

## Council of Governors' Meeting

Wednesday 24 September 2025 13:30 – 14:41

Venue: Piano Room Peacock Hall, RVI / via Microsoft Teams

### Agenda

	Item	Lead	Paper	Timing
<b>Business items</b>				
1	Apologies for absence and declarations of interest	Paul Ennals	Verbal	13:30 – 13:31
2	Minutes of the Public Council of Governors meeting held on 25 June 2025 and any matters arising	Paul Ennals	Attached	13:31 – 13:32
3	Chair's report	Paul Ennals	Attached	13:32 – 13:37
4	Chief Executive's report	Rob Harrison	Presentation	13:37 – 13:55
<b>Items for discussion</b>				
5	Capital Programme Update	Keith Hodgson / Russ Jones	Presentation	13:55 – 14:20
<b>Items to receive [NB for information – matters to be raised by exception only]</b>				
6	Governor Working Group (WG) Reports including: i. Lead Governor ii. Quality of Patient Experience (QPE) WG iii. Business & Development (B&D) WG iv. People, Engagement and Membership (PEM) WG; including a. PEM WG Terms of Reference <b>[For approval]</b>	Lead Governor / WG Chairs	Attached	14:20 – 14:35
7	Public Meeting Action Log	All	Attached	14:35 – 14:36
<b>Refreshment break</b>				<b>14:36 – 14:41</b>
Date and Time of next meeting:				
<ul style="list-style-type: none"> <li>Formal Council of Governors – 26 November 2025, 13:30</li> </ul>				

Members of the public may observe the meeting in person subject to advance booking via emailing the Corporate Governance Team on [nuth.board.committeemanagement@nhs.net](mailto:nuth.board.committeemanagement@nhs.net)

*Paul Ennals, Chair*

*Rob Harrison, Chief Executive Officer*

*Keith Hodgson, Deputy Director Estates-Strategy, Planning & Capital Development*

*Russell Jones, Deputy Director Estates-Strategy, Planning & Capital Development*

*Judy Carrick, Lead Governor*

*Catherine Heslop, Public Governor and Chair of the People, Engagement and Membership Working Group*

*Eric Valentine, Public Governor and Chair of the Business and Development Working Group*

*Claire Watson, Public Governor and Chair of the Quality of Patient Experience Working Group*



## COUNCIL OF GOVERNORS

Date of meeting	26 September 2025					
Title	Chair's Report					
Report of	Sir Paul Ennals, Chair					
Prepared by	Sir Paul Ennals, Chair Gillian Elsander PA and Corporate Governance Officer					
Status of Report	Public	Private		Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
Purpose of Report	For Decision	For Assurance		For Information		
	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>		
Summary	<p>This report outlines a summary of the Chair's activity and key areas of recent focus since the previous Council meeting held in Public in June 2025:</p> <ul style="list-style-type: none"> <li>• Board Activity</li> <li>• Governor Activity</li> <li>• Informal Visits</li> <li>• Alliance</li> <li>• External Meetings</li> </ul>					
Recommendation	The Council of Governors is asked to note the contents of the report.					
Links to Strategic Objectives	<p>Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.</p> <p>Pioneers – Ensuring that we are at the forefront of health innovation and research.</p>					
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Link to the Board Assurance Framework [BAF]	No direct link however provides an update on key matters.					
Reports previously considered by	Previous reports presented at each Public meeting.					

## CHAIRS REPORT

I hope that everyone has had an enjoyable summer and had the opportunity to take advantage of some of the glorious weather we have experienced.

We recently concluded a Governor-led process to appoint a permanent Vice Chair. Following a robust interview process with some healthy competition I am delighted to welcome Bill MacLeod to the role.

Over the last few weeks, I have continued my period of induction at Gateshead Health NHS Foundation Trust - meeting with Executive and Non-Executive colleagues and the Lead and Deputy Lead Governors, visiting services, observing some Committee meetings, and meeting key local partners - ahead of commencing substantively in the role from 1 October 2025.

### **BOARD ACTIVITY**

Our Board Development session in June focussed on our Equality, Diversity and Inclusion (EDI) plan and strategy which is aligned to Year 2 of our People Plan and will focus on challenging and addressing inappropriate behaviours, improving how valued and heard staff feel as well as improving how we lead and manage.

We looked at our strategies and discussed how different strategies fit together and how we support this through our approach to quality improvement, focussing on 3 priorities as we address our Big Signals. This will be done by:

- Focussing on the fundamentals of delivering high quality, safe and compassionate patient care, improving performance and managing our money.
- Making it better for colleagues by improving IT kit, digital systems and correspondence with patients, supporting colleagues through our People Plan with better psychology support and greater equality, diversity and inclusion, and improving the estate for colleagues and patients.
- Looking to the future by working with partners to create Neighbourhood teams, focussing on the Great North Children's Hospital as the regional specialist centre providing world class paediatric care, and developing our Clinical and Trust strategy, as a member of Great North Healthcare Alliance.

The remainder of the session focussed on our work with the Board's Care Quality Commission (CQC) preparedness, discussing any remaining gaps and/or areas of weakness and what immediate actions should be taken as a unitary Board.

The annual round of appraisals of Non-Executive Directors (NEDs) has now been completed for 2024/2025. Meetings were arranged on a one-to-one basis for an in-depth exchange of information and views on progress made during another challenging year. In all cases performance against the corporate and personal objectives for each NED were discussed. In addition, NEDs were asked to self-assess themselves using the self-assessment form within the new NHS Leadership Competency Framework, and 360-degree feedback was obtained for each NED.

I am delighted to advise that all NEDs have met, or exceeded, their objectives.

In June I completed the Annual Fit and Proper Persons return and this was submitted to the NHS England Regional Director ahead of the 30 June 2025 deadline. Testing was conducted in accordance with the NHS England Fit and Proper Person Framework and the outcomes of the testing enabled me to submit a return which provided full assurance that all Board members were 'fit and proper'. Board member references were completed for all leavers as appropriate and a detailed report was considered at the Audit, Risk and Assurance Committee meeting on 22 July 2025.

Our Board Development session in August focussed on:

- Freedom to Speak Up (FTSU), where we had a detailed discussion to agree the top 3 FTSU priorities and associated key actions for 2025/26.
- The NHS 10-year Health Plan and how this linked to the development of the Trust Strategy. In groups we explored the 5/6 priority areas for the Trust and what actions will be taken in the short, medium and long term to ensure the priorities are progressed.
- Our Board Development Programme, which continues to support our preparation for Care Quality Commission (CQC) re-inspection, and particularly the well-led domain, through the agreement of a robust Board Development Programme for the 12 months from September 2025. A framework was agreed being mindful of how the plan is communicated to provide added assurance to staff and colleagues about the openness of the process. For transparency, the Framework has been appended to this report (Appendix A).

### **ACTIVITY WITH GOVERNORS AND MEMBERS**

At our Governor Workshop in July, in addition to our standard reports, we had a focussed session on Equality, Diversity and Inclusion (EDI) facilitated by our Executive Leads Caroline Docking and Annie Laverty who provided an update on this area of work noting that:

- Each Board member has a clear EDI objective.
- Priority has been to engage, and importantly to build trust, with our staff network leads and members.
- A deep dive had taken place into Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) data alongside the staff survey results.
- Discussions have taken place at the People Committee, Governor People, Engagement and Membership (PEM) Working Group, Trust Management Group and the Trust Board to ensure that there is appropriate focus on EDI improvements.
- The EDI focussed actions are aligned to the People Plan Year 2.
- An action plan for EDI has been co-created for 2025/26 which is framed around the six national high impact actions and extensive feedback.

We also held our Annual Members Meeting in July. Whilst this meeting is held to fulfil the statutory requirement to approve our Annual Report and Accounts for 2024/25, it also

allows an opportunity for staff to come together and showcase the pioneering and innovative work being undertaken across the organisation.

Our members' event in August focussed on Sustainable Healthcare in Newcastle (Shine) where we heard about the programme of work our Eco Influencers have been involved in on ward 2B of the Great North Children Hospital as well as the plans in place for resource management and to reduce waste within Newcastle Hospitals.

### **INFORMAL VISITS**

I have continued with my informal visits across all parts of the organisation to meet with staff. To pick out some examples –

- I visited the Ophthalmology Department at the RVI, where I met with Wasique Chaudhry, Director of Operations and colleagues from the department, to discuss current challenges and achievements.
- I met with Amanda Kilsby, Consultant Physician and other members of the Frailty Team, to understand more fully the opportunities for significant expansion of this work, and to see how it contributes to the wider Urgent and Emergency Care work.
- I visited the Centre for Life where Dr Michael Wright, Joint Medical Director introduced me to the speciality of Genomics. The Genomics Diagnostics Laboratory provides molecular diagnosis for people with inherited or heritable conditions and recently, and more commonly now, common diseases including cancer. The collaboration between the Genomics Diagnostic Laboratory and laboratories elsewhere in the country, has really helped improve quality of life and outcomes for patients. This work may well feature large in our future plans in response to the NHS 10 Year Plan, where the potential of genomics is emphasised.
- I visited the new facilities on our cardiology day case and long stay patients in Wards 25 and 27 at the Freeman Hospital.

### **ALLIANCE**

The momentum for joint working continues at pace, and each month we can see more evidence of positive outcomes from the collaborative work that we have initiated. There continues to be good progress with Alliance developments, in terms of closer organisational working, particularly around clinical pathways, but also some of our corporate functions - for example IT, finance and research.

Monthly meetings of the Joint Committee (of the 3 East Coast trusts) and the Committee in Common (all 4 partners) continue, where we receive regular reports on progress in the three areas of delegated authority listed above, and consider progress on the range of bilateral collaborations. We recently met also with the Chair and CEO of the Integrated Care Board (ICB), who are very encouraging of our progress.

The mutual trust between partners has made possible the various secondments of recent months – Gateshead’s CEO is currently seconded to fill a gap at North Cumbria Integrated Care, and her role has been filled in turn by the secondment of the Chief Operating Officer from South Tyneside & Sunderland NHS Foundation Trust. It is noticeable that three out of the four CEOs in the Alliance are interim.

I spoke at an Estates Alliance Event on 9 September where the senior leadership teams from the estates functions across the 4 Alliance partners considered ways in which the teams can work more effectively together.

### **OTHER MEETINGS**

Monthly I meet with the Chair, CEO and senior officers of the ICB, along with other Foundation Trust Chairs, to discuss issues of common interest.

Latterly, focus has been on the challenging financial position together with the medium-term plan for 2026/27 with specific reference to the ICB’s clinical strategy to ensure it is up to date and aligned to the NHS 10 Year Plan. The future roles of the ICB and regional NHS England, the operating framework, the implementation for the NHS 10 Year plan – all have featured in our discussions, along with constructive information sharing on the issues confronting each trust.

I also attended a private dinner with NHS Providers Chief Executive, Daniel Elkeles and Chair of County Durham and Darlington NHS Foundation Trust, Professor Richard Scothorn, along with colleagues and chairs from across the patch. This provided an opportunity to share insight and help shape the conversations that will guide us through the next period of change as we focus on the NHS 10 Year Plan next steps, financial and operational challenges.

I remain on the Board of Net Zero North East England, and the Board of the North East Child Poverty Commission.

One highlight of this last period was joining the runners at the end of the Great North Run. Nearly 500 people had run in aid of the Newcastle Hospitals Charity, including several staff. It was a privilege to meet many of them in our hospitality tent beyond the finishing line. The charity staff did a great job, and it was good to see governor attendance too, all in the presence of the race founder, Sir Brendan Foster CBE.

### **RECOMMENDATION**

The Council of Governors is asked to note the contents of the report.

**Report of Sir Paul Ennals**

**Chair**

**15 September 2025**

*The draft Board Development programme was discussed at the 28 August 2025 Board Development session and agreed subject to the following amendments which have been incorporated into this final version:*

- *Linking to the NHS 10 Year Health Plan, and ensuring that across the 12-month period the six areas identified as Trust areas for opportunity from the NHS 10 Year Health Plan are incorporated into the Programme;*
- *Building in flexibility for additional topics and their order; and inviting other colleagues to attend where appropriate;*
- *Referencing the month in which session topics plan to be covered; and*
- *Additional narrative for session 1 to incorporate the requirements of the Provider Capability Assessment and include feedback from the external well-led review.*

# Board Development 2025-2026

The Newcastle upon Tyne Hospitals NHS  
Foundation Trust

Will.Crookes@thevaluecircle.co.uk September, 2025



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# Introduction

This document sets out a 12-month Board Development Programme for the Trust from September 2025. The programme sets out clear areas of development to strengthen Board effectiveness, improve governance maturity, and support collective leadership.

The programme has been developed in collaboration with the Chair and Chief Executive. It directly supports the Board's role in delivering its statutory duties, strategic objectives, and high-quality, safe, and equitable care.

It is built on NHS England's The Insightful Provider Board (2024) guidance. It also aligns with the Trust's People Plan, its associated leadership and organisational development (OD) frameworks, and the Trust's values.

Appendix A sets out the previous development work undertaken by the Board, which informed and shaped the forward plan for Board development.

## Integration with Trust Frameworks and Values

The programme is designed to work within existing Trust frameworks. The Board will ensure it explicitly connects to:

- The People Plan and its leadership development frameworks.
- The Trust's behavioural frameworks which guide expectations for all leaders.
- The Trust's values, which will underpin all development activities:
  - **We care and are kind** – fostering respectful, compassionate leadership within the Board.
  - **We have high standards** – committing to robust governance and high-quality oversight.
  - **We are inclusive** – ensuring all voices are heard, challenging bias, and valuing diversity in Board debate.
  - **We are innovative** – encouraging curiosity, learning, and improvement in how the Board works.
  - **We are proud** – reinforcing commitment to the Trust's purpose and service to patients and staff.
- The 10-year Health Plan for the NHS.

## Alignment with Strategy and External Requirements

This programme will strengthen the Board's ability to deliver the Trust's strategy, ensuring collective clarity on priorities and effective oversight. It aligns with:

- The Trust's strategic objectives and operational delivery.

- The new oversight framework and 10 Year Health Plan for England, supporting assurance, accountability, and delivery of national priorities.
- The Well-Led Framework, promoting clear roles, strong leadership, and continuous improvement.

The blended programme builds on the work undertaken on the Board's structures and culture together to ensure that the Board is:

- Confident in its governance mechanics.
- Skilled at using meaningful information for assurance.
- Open, curious, and problem-sensing.
- Cohesive, trusting, and effective as a unitary team.
- Committed to delivering high-quality, safe, sustainable care.

# Board Development Overview

## Development Objectives

- Enhance the Board's capability to govern as a unitary body.
- Support reflection on governance structures and processes put in place in 2024, identifying refinements based on experience to date.
- Use continuous improvement to refine systems and reporting processes (Mechanics).
- Build trust, psychological safety, and open, constructive, and curious challenge (Dynamics).
- Reflect upon and develop our existing data in line with our strategy and performance objectives to ensure the use of meaningful information for assurance.
- Continuously develop the behaviours and style needed for effective Board conversations.
- Support strategy oversight and the Board's role as a partner in the wider system, including addressing how to approach difficult trade-offs for the collective good.

## Development Outcomes

Through undertaking time out as a Board to focus on development as a team, the Board will seek to:

- Have reflected on and refined governance structures and processes to support effective decision-making.
- Be confident in triangulating data and using meaningful assurance.
- Role-model transparent, problem-sensing, learning-focused culture.
- Test and improve the effectiveness of the governance framework on Board oversight of strategy, quality, people, finance and risk.
- Strengthen its approach to system partnership, including handling collective trade-offs.
- Operate as a high-performing, cohesive, unitary Board.

## Programme Structure

The Trust Secretary and Chair will agree the development structure with the Board. The programme will have built in flexibility regarding the order of the sessions and topics covered; in addition other colleagues may be invited to attend where appropriate. This will be set outside of formal Board business to protect dedicated development time. It typically includes:

- 6 development workshops over 12 months (one every two months).
- Participation from the full unitary Board (Executive and Non-Executive Directors).
- External insights and facilitation as required.
- Scenario-based discussion, including use of real Board examples and case studies.
- Structured review of good and poor practice.
- Action planning and review.

# Development areas of focus for 2025-2026

The following outline sets out the focus for each Board development session over the 12-month cycle. This structure provides a clear framework while remaining adaptable to the Board's evolving needs and priorities. Each session will be tailored by the Trust to ensure relevance and impact.

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## Session 1: Governance Foundations and Board Culture [October 2025]

**Theme:** Setting expectations for effective Board working.

**Mechanics:**

- Review statutory roles, unitary Board responsibilities, committee structures, escalation processes.
- Reflect on structures established in 2024 and identify refinements.
- External well-led review findings shared by Grant-Thornton.
- Review and discuss draft Provider Capability Self-Assessment.

**Dynamics:**

- Explore Board culture, psychological safety, leadership behaviours.
- Commit to open, problem-sensing, learning-focused approaches.

**Outputs:**

- Action plan for well-led, to include strengthening structures and culture.
  - Agree/finalise Provider Capability Self-Assessment
  - Board behavioural commitments.
- 

## Session 2: Finance, Productivity and Risk [December 2025]

**Theme:** Integrating finance, quality, and strategic risk.

**Mechanics:**

- Explore innovation and commercialisation as a Board.
- Review financial governance and committee integration.
- Link finance to quality, workforce, strategy.

**Dynamics:**

- Build collective accountability.
- Trust in financial and commercial discussions.
- Encourage open debate on prioritisation and trade-offs.
- Develop our approach to innovation.

**Outputs:**

- Improved finance reporting and oversight.
  - agreed approach to balancing resources and quality.
-

## Session 3: Strategy and System Leadership [February 2026]

**Theme:** Developing and delivering strategy in a system context.

**Mechanics:**

- Review strategic objectives, ICS alignment, Board cycle priorities.
- Consider the opportunities and ambitions regarding neighbourhood services and integrated health models.
- Understand Capital Development, the digital strategy, and wider estates strategy for Newcastle Hospitals.
- Explore how the Board utilises and addresses health inequalities.

**Dynamics:**

- Strengthen understanding of the Board's role as a system partner, including how to handle trade-offs for collective benefit.
- Build collaborative behaviours and partnership mindset.
- Understanding the Great North Healthcare Alliance and the role of the Board within system leadership.

**Outputs:**

- Clarity over the long-term future for Newcastle upon Tyne Hospitals NHS Foundation Trust and who we are as an organisation.
  - Agree next steps for two key areas from the 10-year Health Plan: Neighbourhood services and the Integrated Healthcare Organisation models.
  - Strategic oversight plan.
  - Understand what the Great North Healthcare Alliance means for Newcastle Hospitals.
- 

## Session 4: Information, Assurance and Effective Challenge [April 2026]

**Theme:** Moving from reassurance to true assurance while improving Board conversation.

**Mechanics:**

- Review reporting quality and escalation, linking to the asks in the 10-year Health Plan.
- Analyse real examples (case study approach) of weak and strong assurance.

**Dynamics:**

- Build skills in constructive and curious challenge as a dedicated focus.
- Strengthen trust and collective responsibility.

**Outputs:**

- Agreed improvements to reporting.
- Commitments to support open, challenging discussion.

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## Session 5: Quality, Safety and Patient Voice [June 2026]

**Theme:** Strengthening quality oversight and patient-centred care.

**Mechanics:**

- Review quality metrics, reporting, escalation, data triangulation.
- Analyse work undertaken to date on outpatient transformation.

**Dynamics:**

- Build empathy for patient and staff voice.
- Promote learning from incidents and complaints.

**Outputs:**

- Improved quality assurance approach
  - Board commitments to hearing patient and staff voices.
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## Session 6: Innovation, People, Workforce and Culture [October 2026]

**Theme:** Transforming through innovation and leading and supporting the workforce.

**Mechanics:**

- Review workforce reporting, escalation, Board role in people governance.
- Strengthen FTSU processes.
- Discuss work progressed in line with the 10-year Health Plan on transforming through innovation and workforce modernisation.

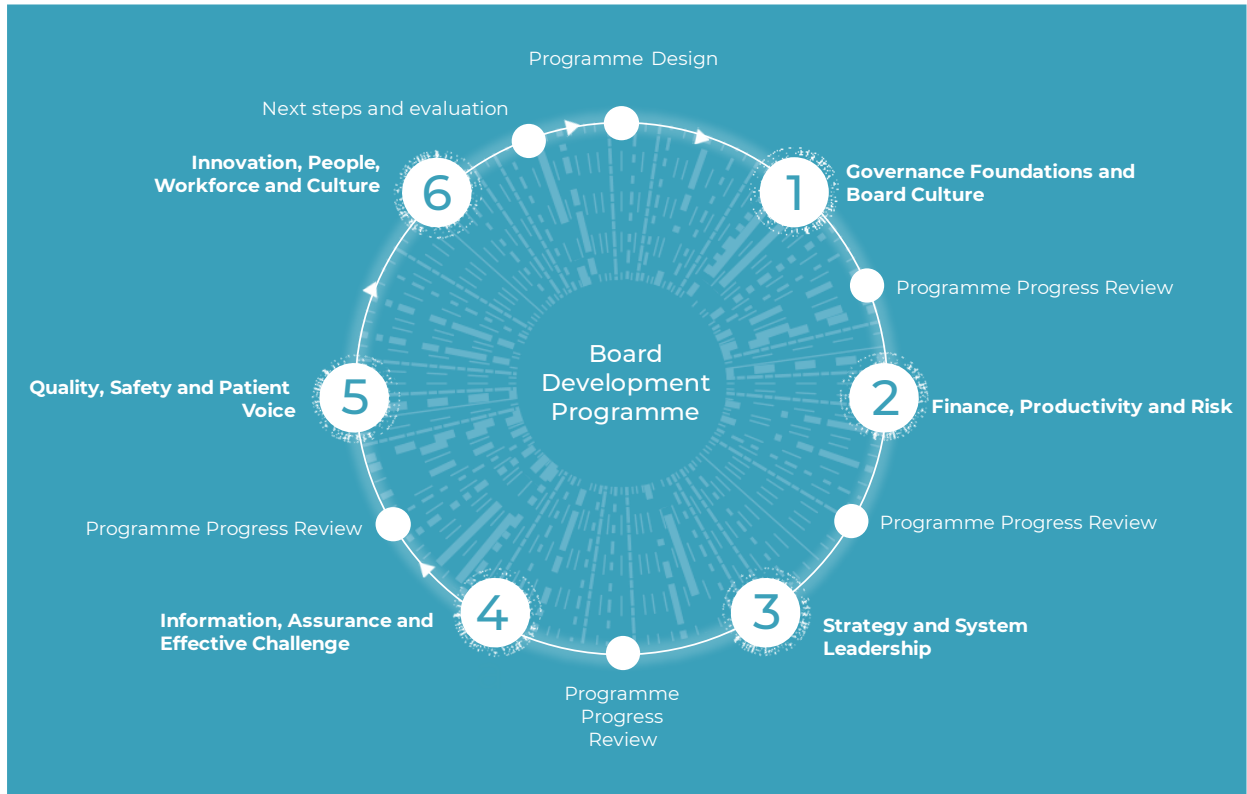
**Dynamics:**

- Build trust and psychological safety.
- Address inequalities and diversity.
- Improve Board visibility and staff engagement.

**Outputs:**

- Workforce assurance improvements
  - Staff engagement commitments.
-

## 2025-2026 Overview





## Appendix A: Previous Board Development 2024-2025

The following table sets out key Board development activities undertaken previously. This work provides an important foundation and informs the design of the forward development plan.

Area of focus	Description
Exploration of learning from previous CQC Inspection (February 2024)	Reflections on the Board's current context and identification of key actions, changes, and commitments to drive as a unitary board.
Skills Matrix Self-Assessment (Spring 2024)	Board members completed an individual skills matrix to identify strengths, gaps, and development needs in the Board's composition.
Risk management and Board Assurance Framework (March 2024)	Reviewing and updating the Board's approach to risk management and the Board Assurance Framework (BAF) to strengthen oversight and accountability.
Insightful Board Self-Assessment (December 2024)	Collective feedback on the board self-assessment undertaken with agreed areas of priority for development,
Developmental Well-Led Interviews (January 2025)	External review and facilitated sessions to reflect on Well-Led Framework domains and Board effectiveness.
Equality, Diversity, Inclusion (May 2025)	Dedicated time to establish what good looks like from a Board perspective in relation to EDI, with reflections on the Newcastle Hospitals current position.
Strategy (June 2025)	Board-level sessions to explore current strategies including presentation on the vision for the Great North Healthcare Alliance, update on the EDI plan, and update on strategy development.
Freedom to Speak up and 10-year Plan (August 2025)	A deep dive into freedom to speak up and development of a draft action plan. Discussion and debate on the 10 year health plan and the impact and considerations for the Board at Newcastle Hospitals.

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## COUNCIL OF GOVERNORS

Date of meeting	24 September 2025					
Title	Update from the Lead Governor					
Report of	Judy Carrick, Lead Governor					
Prepared by	Judy Carrick, Lead Governor					
Status of Report	Public		Private		Internal	
	<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Purpose of Report	For Decision		For Assurance		For Information	
	<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>	
Summary	This report updates on the work of the Lead Governor since the Formal Council of Governors meeting on 25 June 2025.					
Recommendation	The Council of Governors is asked to (i) receive the report and (ii) note the contents.					
Links to Strategic Objectives	Patients - Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.					
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Link to Board Assurance Framework [BAF]	No direct link.					
Reports previously considered by	Regular reports are provided to the Council of Governors.					

## UPDATE FROM THE LEAD GOVERNOR

### 1. UPDATE:

Since my last report, I have taken forward the following matters on behalf of the Council of Governors ('the Council').

a. Meetings schedule/agendas: I have been working with the Chair and Trust Secretary on two fronts. First of all, we have tried to focus the meeting agendas on fewer topics to allow more discussion and questions. We have asked that presentations and papers do the majority of work in informing governors; this allows us to look more carefully at issues and areas of concern or achievement. Secondly, I have proposed and trialled in July a modification to the Workshop meetings. A Non-Executive Director (NED) "carousel" will allow all governors, not just those observing meetings, to see how the NEDs work to challenge and get assurance. It will also allow all governors the chance to ask questions and see the breadth of the NED composition at work. We will continue to review and refine the approach, and governors are asked to submit any feedback on the approach. This is one step in making the workshops more interactive and focused on the improvement of our work on the Council. To ensure that governors understand how we work to include all issues raised, while still making room for comment, we also intend to share the way agenda setting meetings work so that all Governors can see how the agenda decisions have been made. Finally, in response to concerns that there may still not be room for enough comment, I have proposed that Governors send in questions not only before the meeting or pose questions at the meetings, but they will also be invited to send questions to the shared mailbox in the week following each meeting.

b. Observer reports: The observer reports are an important part in supporting us to hold the NEDs to account for the performance of the Board of Directors. I have written some additional wording on Observer reporting for inclusion in the Governor Handbook which has been agreed with the Trust Secretary. I am also trialling summarising trends and emerging issues at the end of each Lead Governor update. The updated handbook is available on the Reading Room in AdminControl. Feedback, as always, is welcome.

c. Learning Lab: Feedback on usage of the Learning Lab for Governor training is requested.

d. Staff mental health: This is a key feature of the People Plan Year 2 and will be presented to the Council when the new Trust Associate Director for People and Organisational Development settles into post.

e. Further/new topics raised for future agendas: Catering has been raised as a topic for a future update. A hospital food tasting session was held at the September Quality of Patient Experience (QPE) meeting. The following have been added to our already ambitious list of topics for future discussion (arising from formal Council meetings, informal Governor meetings and Working Groups):

1. Spotlight on Primary Care (and Neighbourhood Working)
2. The new Maternity/neonatal review
3. Areas where an improvement in performance is required such as Lower GI, Lung, Upper GI and Colorectal cancers
4. Procurement (to be discussed at a Business & Development Working Group meeting (B&D)).

f. Alliance: The Lead Governors and our Deputy Lead Governor have now met and along with the Alliance Formation Team agreed a further meeting for the Governors across all four Alliance trusts to take place in October/November. Further, I continue regular informal meetings with the other Lead Governors to discuss current issues such as the rollout of the Shared Chair role and commercial opportunities so that we are sighted on the questions raised by our fellow governors.

g. Well-led: In preparation for the external Well-Led review by Grant Thornton and also to improve the quality of our work as a Council, I have been meeting with our NEDs to ask them if there any other matters which we Governors may not have yet raised - or which deserve more emphasis due to the risk level and consequences they involve. I am currently completing this task and will send out the results. I would like to thank the NEDs for their generosity and candour. It has been a worthwhile exercise and I look forward to sharing it with the Council.

I met with representatives from Grant Thornton on 2 September 2025 both separately as Lead Governor and as part of a focus group with fellow Governors.

h. Induction: It was a pleasure to welcome our newly elected Governors at an induction on 18 June. The Trust Corporate Governance Office and Lead Governor worked to streamline the presentations to focus on the working practices and aims of the Council and give time to discuss new Governors' personal interests within the wider world of health representation and governance. Mentor/buddies were allocated and the new Governor Handbook was shared. In addition, I have submitted an article to the Members Newsletter which introduces eight of our new Governors.

Further, I have sent a questionnaire to new Governors and the feedback has been very useful in identifying further development needs, such as a briefing on the Trust workings and accompanied early visits. This feedback has also highlighted ways to improve Governor interaction; for example, we might consider informal Governor time before or after formal Council of Governors.

i. Membership engagement: With the support of Governor Fatema Rahman, I met with the leads of the Muslim Community Association who would like to work with us to break down barriers faced by this community in accessing healthcare and research opportunities. Thanks to Fatema.

j. Ongoing areas of discussion: Signage, People Plan (Year 2) with its mental health support offer, Cost Improvement Programme (CIP), digital security updates and communication with patients. These are longer-term issues and I am continuing to ask questions in order to allow the Council to see progress made and any areas where there are gaps in assurance.

## **2. MEETINGS ATTENDED:**

In this period, I have attended several events on your behalf:

- 09/05/2025 Celebrating 40 Years of Heart Transplantation at the Freeman Hospital
- 23/05/2025 Open Day at the Clinical Research Facility (Governor session)
- 12/06/2025 Led the Informal Governors Meeting
- 18/06/2025 New Governor Induction
- 19/06/2025 Lead Governor Meeting (cross-Alliance)
- 25/06/2025 Meeting with the CEO to discuss progress and any areas of concern
- 01/07/2025 Attended the Drop in Session with the Chair followed by the Agenda-setting meeting with the Chair and Trust Secretary

- 02/07/2025 Triangle of Care Meeting
- 04/07/2025 Nominations Committee meeting
- 07/07/2025 Sir Bobby Robson Cancer Research Centre opening fundraising event
- 18/07/2025 Nominations Committee - Shortlisting for Vice Chair
- 19/07/2025 Joined the Newcastle Hospitals presence at the Newcastle Pride March
- 31/07/2025 People at our Hearts Annual Awards
- 01/08/2025 Nominations Committee - Chaired the interviews for Vice Chair
- 19/08/2025 Agenda setting meeting and briefing with Ian Joy about the Well-Led review
- 19/08/2025 Members Event
- 29/08/2025 People at our Hearts Quarter 1 prize giving
- 02/09/2025 Interview and Focus Group with Grant Thornton: Well-Led Review

### **3. KEY MATTERS AND TRENDS**

Keys matters from Board Committee Observer Reports include the following themes which have been highlighted by Governors:

From the Audit, Risk and Assurance Committee 22 July 2025:

- Progress of the Pharmacy services and IT developments.
- The financial position in the light of the challenging financial environment.

From the Digital & Data Committee 10 July 2025:

- Badgernet (electronic maternity system) ongoing national issues.
- Community Diagnostic Centre (CDC) – IT difficulties.
- Delays with the implementation of the Electronic Meal Ordering (EMO) system.
- IT project prioritisation, the associated ask for the digital teams and communication.

From the People Committee 21 July 2025:

- Progress of Year 2 of the People Plan.
- Health and Wellbeing, especially mental health, in particular men's mental health, and sickness absence.
- Implications regarding changes to the Exception Reporting process (Guardian of Safe Working reporting) and the Quality Account.
- The Supreme Court Judgement of the 16th of April 2025 and work in this area.

New Governor Feedback: A brief questionnaire was sent to the new Governors as a check-in exercise. This provided invaluable feedback. The key themes were:

- The need to continue to improve on the amount of discussion time at meetings.
- Time commitment and priorities.
- Buddying.
- The tracking of issues raised by Governors.

I will take the discussion time matter to the next agenda setting meeting in September with the Chair and Trust Secretary. The two meetings to attend in priority should always be formal Council meetings and Informal meeting/drop-ins to raise any matters or issues. Working group meeting

attendance/choices are recommended to follow a Governor's passions and availability and does not require 100% attendance.

Member Events are important as are a good way to mix with constituents if a Governor is available and visiting new buildings or wards is helpful when Governors are available as it aids in building a better understanding of the organisation.

The suggested improvements to the buddying system are excellent and will be actioned.

Finally, the tracking of the issues raised by Governors is done through the Lead Governor reports. Further detail can be made available upon request.

#### **4. RECOMMENDATION**

The Council of Governors is asked to note and comment on the contents of this report. Governors are also invited to provide any feedback on the report directly to me.

**Report of Judy Carrick  
Lead Governor  
2 September 2025**

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## COUNCIL OF GOVERNORS

Date of meeting	24 September 2025					
Title	Quality of Patient Experience Working Group - Report					
Report of	Claire Watson, Chair - Quality of Patient Experience Working Group					
Prepared by	Claire Watson, Chair - Quality of Patient Experience Working Group					
Status of Report	Public	Private			Internal	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Purpose of Report	For Decision	For Assurance			For Information	
	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	
Summary	<p>The content of this report outlines the activities undertaken by the working group since the previous Report in June 2025.</p> <p>Key points to note are:</p> <ul style="list-style-type: none"> <li>- Group Activities</li> <li>- Presentations and Guests</li> <li>- Wards and Departments Visited</li> </ul>					
Recommendation	The Council of Governors is asked to receive the report.					
Links to Strategic Objectives	Performance – being outstanding now and in the future.					
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Link to Board Assurance Framework [BAF]	No direct link.					
Reports previously considered by	Regular reports on the work of this Working Group are provided to the Council of Governors.					

## QUALITY OF PATIENT EXPERIENCE (QPE) WORKING GROUP (WG) REPORT

### 1. INTRODUCTION

The QPE WG has continued to meet monthly, in person and via Microsoft Teams. A trial of Teams only meetings will run until the end of the year in an attempt to increase accessibility and to assist with supporting the Cost Improvement Programme. The WG currently has oversight of the following areas arising out of the CQC Report; Caring, Cardiothoracic Surgery, and Maternity; and has asked the Non-Executive Directors (NEDs) responsible for each area, via the Corporate Governance Team, to attend the WG meetings to provide assurance.

### 2. GROUP ACTIVITIES

Members of the QPE WG attended the following Groups and Committees:

#### a) **Complaints Panel**

Aileen Fitzgerald and Peter Bower, Public Governors, attend the monthly Complaints Panel meetings. Of note from the August and September meetings, Urology has had a total of 20 formal complaints during the months of July 2024 – June 2025. More generally, the response time for responding to complaints had reduced from 60 to 15 days and, positively, complaints were being peer reviewed within Clinical Boards.

Issues with meeting Accessible Information Standards remain, largely due to IT difficulties, however a task and finish group, which involves patients and carers, has been established to help improve performance against the Standard.

The transition from the previous reporting system (Datix) to the new system (InPhase) has been challenging with a problem identified regarding the incomplete migration of all data. The matter could not be fixed in-house and is awaiting resolve by InPhase. Manual backup arrangements are in place on an interim basis. Group members agreed that this matter should be brought to the attention of the Lead Governor, who subsequently confirmed a problem was identified and mitigations were in place to ensure no data was lost, and all cases were receiving attention.

#### b) **Clinical Audit and Guidelines Group (CAGG) [meets monthly]**

Philip Home, Public Governor, and David Black, Appointed Governor (Patient Experience), attend the CAGG meetings. Of note, the Surgical and Associated Services (SAS) Clinical Board quality lead from vascular surgery, highlighted the importance of continuing to strengthen the visibility of clinical effectiveness throughout the wider organisation. SAS already has robust and established oversight of clinical effectiveness through the Quality Oversight Group (QOG), which rigorously monitors both performance metrics and national organisational data. The SAS Board is well organised and fully engaged in quality improvement and is actively working to integrate additional aspects of clinical effectiveness into Monthly Performance Reviews (MPR) to further enhance patient outcomes.

**c) Patient Safety Group (PSG) [meets monthly]**

Alexandros Dearges-Chantler, Public Governor, attended the Patient Safety Group meeting on 24<sup>th</sup> June 2025. There was no governor attendance at the PSG meeting in August.

Regarding the implementation of the Artificial Intelligence Venous Thromboembolism (VTE) programme (as part of the new Trust-wide policy for preventing hospital-acquired thrombosis), one specialty had raised a concern regarding the use of a particular drug which would mean that the policy would not have been standardised across all specialties. Subsequently this was agreed to enable appropriate standardisation.

It was also felt that governors should receive future updates on Freedom to Speak up Guardian changes and the progress of the Patient Improvement Partners.

**d) Quality Committee**

Claire Watson, Public Governor, attended the Quality Committee meeting on 17 June 2025. Of note were concerns around lack of funding for mental health intervention in maternity services. This had been escalated to the Trust Board. The Non-Executive Directors (NEDs) continued to be very well briefed on the discussions and subject areas and constructively challenged gaps in assurance/areas of concern.

There was no public governor attendance at the July meeting, and no meeting took place in August.

**e) Nutrition Steering Group (NSG) [bi-monthly]**

Claire Watson, Public Governor, regularly attends the NSG meetings and the monthly Electronic Meal Ordering Steering Group meetings, and provides a written report to Governors.

Of note, an external hygiene audit highlighted some inconsistencies with handwashing processes, and no working temperature probes in some areas. This is being actioned, with up-to-date food hygiene certificates being followed up. The electronic meal ordering system (EMO) project currently has a good level of IT involvement, and it was hoped to have this up and running by the end of the year. It is now looking more like March/April 2026 with implementation of a new catering management system followed by EMO rolling out to the wards in April-May 2026. The QPE WG meeting had sight of a vast Excel spreadsheet detailing the complexity of the work that needs to be undertaken to get this up and running in order to provide a level of understanding of what is involved to help manage expectations.

**3. PRESENTATIONS/GUESTS**

At the 1<sup>st</sup> July meeting Andrew McDonnell, General Management Trainee, joined us to provide an update on the Ophthalmology Patient Experience Network (OPEN) work. Key points included an update on recent meetings, patient involvement (which included a tour of the department), and ongoing projects to improve patient experience. Efforts had been made to involve more patient representatives, which included patients with sight loss. Ongoing projects included improving the

macular service, addressing issues raised in the eye emergency department, and enhancing the overall patient experience in the ophthalmology department. Governors were offered a tour of the eye department. Andrew also provided an update on the Accessible Information Standard (AIS) including the challenges of adhering to it. There was a discussion about the Trust's compliance with the AIS and the need for improvements in this area. It was agreed to collate any feedback from Governors to identify any common themes/concerns.

At the 2<sup>nd</sup> September meeting, we were joined by Mary Mahon, Lead Specialist Dietician, Caroline McGarry, Partnership & Involvement Manager, Amy McDonough, Head Chef at the Freeman Hospital, and Simon Lee, Assistant Head Chef at the Freeman Hospital. Mary provided a brief update on the Electronic Meal Ordering system progress and then the governors carried out a food tasting session and provided a rating score for analysis.

At the September meeting we were also joined by Tracy Scott, Head of Complaints & Experience of Care, who had originally intended to give an update on Q1 Complaints. This was not possible because of issues caused by the change over from Datix to InPhase, so instead detailed information was shared in relation to the Complaints Improvement Plan which included training, the creation of Standard Operating Procedures, evaluating the new processes and the creation of a task and finish group to explore complaint training opportunities.

The Quality of Patient Experience Working Group would like to thank Andrew McDonnell, Mary Mahon, Caroline McGarry, Amy McDonough, Simon Lee, and Tracy Scott for their valuable contribution to the meetings.

#### **4. WARD AND DEPARTMENT VISITS**

Visits were undertaken to the following locations:

- 6 August 2025 – Assessment Suite, RVI.
- 6 August 2025 – Ward 22, RVI.

WG Members provide written reports of visits to the Corporate Governance Team, which are then passed on to Mr Ian Joy, Executive Director of Nursing, for review. Members of the WG discuss findings and recommendations in meetings to identify any trends that they may wish to seek further assurance on.

#### **5. RECOMMENDATIONS**

The Council of Governors are asked to receive the report.

**Report of Claire Watson  
Chair of QPE Working Group  
13 September 2025**

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**The Newcastle upon Tyne Hospitals**  
NHS Foundation Trust

**COUNCIL OF GOVERNORS**

Date of meeting	24 September 2025						
Title	Report of the Business and Development Working Group						
Report of	Eric Valentine, Chair of the Governors Business and Development Working Group						
Prepared by	Eric Valentine, Chair of the Governors Business and Development Working Group						
Status of Report	Public	Private			Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
Purpose of Report	For Decision	For Assurance			For Information		
	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>		
Summary	This report details the activities of the Business and Development Working Group since the last report to the Council of Governors (CoG) on 25 June 2025.						
Recommendation	The Council of Governors is asked to note the contents of this report.						
Links to Strategic Objectives	Performance- Being outstanding now and in the future.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Impact detail	Impact detailed within the report.						
Reports previously considered by	Standing agenda item.						

## **REPORT OF THE BUSINESS AND DEVELOPMENT (B&D) WORKING GROUP (WG)**

### **1. INTRODUCTION**

The Business and Development (B&D) Working Group meetings have been held monthly, except in August, via Teams and in-person with the topics covered relating to the Working Groups (WG) Terms of Reference.

The WG is well attended. The WG particularly welcomes new Governors who would like to join, as well as Governors who may wish to attend a specific meeting. There have been two B&D WG meetings since the last report.

### **2. PRESENTATION TOPICS**

#### **2.1 Audit Update from Mazars - 10 July 2025**

Attended by Mark Outterside (MO), Director, Forvis Mazars LLP, and Joanne Bracken (JB), Senior Manager Forvis Mazars LLP.

MO provided an update on the external audit for the financial year ending 31st March 2025 which was similar to the previous year. He explained the audit process for the financial statements, value for money arrangements, and wider reporting responsibilities; the risks assessed, and the unqualified opinion (being the best possible outcome), indicating good quality financial statements.

An explanation was given on the risks assessed during the audit which included management override of control, fraud in revenue recognition and expenditure recognition, valuation of buildings.

The audit found one non-trivial, non-material extrapolated error, which was not significant. Regarding the risk associated with the valuation of buildings, MO advised that this risk was included due to the level of judgement and estimation involved. The Trust utilises a professional valuer to carry out the valuations, and audit procedures are undertaken to ascertain whether the assumptions used by the valuer are reasonable. The audit found no issues in this area.

MO confirmed that Newcastle's financial information had always been of good quality and that there was a good working relationship with the Trust staff, which contributed to the high quality of financial information.

Concerns about minor fraud, such as timesheet discrepancies were considered as part of the audit risk assessment.

The value for money work was outlined, which focussed on assessing financial sustainability, governance, and the three Es (economy, effectiveness, and efficiency). Whilst there were no

significant weaknesses identified in relation to financial sustainability, an 'other recommendation' had been made by the auditors as the Trust's reliance on non-recurrent savings requires close monitoring going forwards.

The Trust had made improvements based on the CQC inspection report, but the auditors could not remove the significant weakness raised in the prior year Value For Money commentary until a follow-up inspection was conducted.

A discussion ensued on the significant risks and challenges in the IT department, including the replacement of outdated equipment and software. David Bull, Staff Governor and Trust Desktop Support Manager provided insights into the ongoing efforts to address these issues to improve the IT infrastructure, including upgrading equipment and software to meet current standards, and holding suppliers to account for contract performance.

## **2.2 Pressure on supply and risks due to international financial uncertainties - 11 September 2025**

Attended by Dan Shelley (DS), Procurement and Supply Chain Director.

DS introduced himself and shared a presentation that provided an overview of NHS supply chain challenges, including logistics costs, Brexit impacts, equipment shortages and procurement constraints. He highlighted the following points:

- The Scan4Safety initiative and the importance of inventory management and collaboration across the Alliance and other trusts. Inventory management will improve in time management and a better use of resources.
- Use of the NHS supply chain model (NHS SCCL) and the aspiration to have 80% of spend through NHS SCCL.
- Logistical issues include increasing transportation costs (encouraging electric vehicle use), shipping overheads, staffing (wage increases) and the Brexit impact whereby some suppliers have withdrawn from international trading.
- Equipment and consumable shortages and encouraging market competition.
- Warehouse and logistics challenges with regards to space constraints and staff recruitment into these roles. Consideration of work-life balance and staff support was a key area of focus. Inventory is decanted to wards on arrival.
- Economic downturns reduced funding from government and impacts capital spending plans, combined with reduced support for research and innovation from the private sector.
- Political tensions were affecting areas of supply.
- Difficulties with investment in infrastructure impacting on 3-5 year plans.
- Artificial Intelligence (AI) robots used for processing elements of procurement.
- Demand profiles and commercial decisions being made months in advance.
- Investment in the procurement team, with 4 new members of staff and national and regional developments for upskilling logistical skills.

It was agreed that DS return to the WG in an agreed time-period to provide an update.

## **2.3 Introductory meeting with Director of Innovation - 11 September 2025**

Attended by Neil Watson (NW), Director of Innovation.



Neil Watson introduced his new role as Director of Innovation and outlined the development of an innovation framework, genomic strategy, and AI initiatives. Discussions included the importance of curiosity, courage, and collaboration in driving innovation across the Trust. NW highlighted the following points:

- Development of an innovation framework which will feed into the NHS 10-year health plan requirements.
- Work was underway to coordinate a process for use of AI across the organisation, smarter completion of tasks with process automation and productivity.
- 10-year plan describes innovation to drive healthcare reform.
- Use of value based procurement.
- The 'Big I' conversation happening in October with Alliance members.
- Patient and user involvement is key to co-design/co-produce.

### **3. REPORTS ON BOARD COMMITTEE OBSERVATION**

The following Board Committees have been observed by Governors. The completed reports will be available in the Governor Reading Room on AdminControl.

- Finance and Performance Committee (June 2025) - Philip Home
- Audit, Risk and Assurance Committee (June 2025) - Eric Valentine
- Audit, Risk and Assurance Committee (July 2025) - Eric Valentine
- Digital and Data Committee (July 2025) - Claire Watson

### **4. RECOMMENDATION**

The Council of Governors is asked to note the contents of this report.

**Report of Eric Valentine  
Working Group Chair  
14 September 2025**

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## COUNCIL OF GOVERNORS

Date of meeting	24 September 2025					
Title	People, Engagement and Membership (PEM) Working Group Report					
Report of	Catherine Heslop – Chair of the PEM Working Group					
Prepared by	Catherine Heslop – Chair of the PEM Working Group					
Status of Report	Public <input checked="" type="checkbox"/>	Private <input type="checkbox"/>	Internal <input type="checkbox"/>			
Purpose of Report	For Decision <input type="checkbox"/>	For Assurance <input type="checkbox"/>	For Information <input checked="" type="checkbox"/>			
Summary	<p>The People, Engagement and Membership (PEM) Working Group (WG) is tasked with increasing both the number and diversity of Trust membership and with supporting members with dedicated members' events and newsletters. In addition, the WG works to engage with the wider Trust community.</p> <p>This report provides an update to the Council of Governors on the ongoing work of the PEM WG since the last meeting of the Council of Governors in June 2025.</p>					
Recommendation	The Council of Governors are asked to receive the report.					
Links to Strategic Objectives	Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.					
Impact (please mark as appropriate)	Quality <input checked="" type="checkbox"/>	Legal <input type="checkbox"/>	Finance <input type="checkbox"/>	Human Resources <input type="checkbox"/>	Equality & Diversity <input checked="" type="checkbox"/>	Sustainability <input type="checkbox"/>
Link to Board Assurance Framework [BAF]	Outlined within the report.					
Reports previously considered by	Regular reports on the work of this Working Group are provided to the Council of Governors.					

## **PEOPLE, ENGAGEMENT AND MEMBERSHIP (PEM) WORKING GROUP (WG) REPORT**

### **1. INTRODUCTION**

The People, Engagement and Membership (PEM) Working Group (WG) continues to meet monthly with a recess in August. This month our guest speaker was Phil Kane, Non-Executive Director and Chair of the Trust Charity Committee. He gave us an excellent update on the Newcastle Hospital Charity. Phil was happy with the points raised and associated actions from the working group and will return in due course with an update.

### **2. GROUP ACTIVITIES**

This was our first meeting using MS Teams and we had some positive feedback.

A discussion took place regarding the need for a staff member to be present, as per our Terms of Reference, for the working group to be quorate. The staff members present highlighted it was not essential for them to be there to make the meeting quorate and that their work has to be priority. This was agreed by the working group members present. We will be taking an updated Terms of Reference to the Council of Governors (COG) to be ratified, please refer to agenda item 6(iv)(a).

The Governor Observer from the People Committee gave an update which led into a discussion on people matters.

### **3. ONGOING AREAS OF FOCUS**

#### **3.1 Membership**

It was noted that 7 public members had left the Trust membership but we gained 359 staff members which is very encouraging. Two members from the PEM WG are attending different events and will take some leaflets and membership forms to engage with new members.

I attended the Great North Run in conjunction with the Newcastle Hospital Charity which was an excellent day for all involved. Sir Paul Ennals was also in attendance. Areas where the Trust could engage with potential members at this event were highlighted and we will take this forward in due course.

With regard to our future public events, it was suggested that we have an event on the complaints process (once the new process has been embedded into the Trust).

### **4. RECOMMENDATIONS**

The PEM WG asks that the Council of Governors receive this report for information.

**Report of Catherine Heslop**  
**Chair of the PEM Working Group**  
**11 September 2025**

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## COUNCIL OF GOVERNORS

Date of meeting	24 September 2025					
Title	Governor Working Group – Terms of Reference for Patient Engagement and Membership Working Group (PEM)					
Report of	Kelly Jupp, Trust Secretary					
Prepared by	Jayne Richards, Governor and Membership Engagement Officer					
Status of Report	Public	Private	Internal			
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Purpose of Report	For Decision	For Assurance	For Information			
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Summary	<p>The Terms of Reference for the People, Engagement and Membership (PEM) Working Group have been updated for approval.</p> <p>The Working Group reviewed the quorum requirement detailed within the Terms of Reference during the September Working Group meeting.</p> <p>One minor change has been recommended to remove the requirement for a Staff Governor to be present for quorum purposes. This proposed change would make the quorum requirement the same across all three Working Groups.</p>					
Recommendation	The Council of Governors is asked to note the contents of the report and to approve the Working Group Terms of Reference.					
Links to Strategic Objectives	Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.					
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Sustainability
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Link to Board Assurance Framework [BAF]	Outlined within the report.					
Reports previously considered by	Working Group Terms of Reference are reviewed at the Council of Governors annually.					

## **Terms of Reference – People, Engagement and Membership (PEM) Working Group**

### **1. Constitution of the Group**

The PEM Working Group is a non-statutory Group established by the Trust Council of Governors to report to the Council on the Trust membership; this includes the recruitment and retention of a membership that seeks to reflect the population the Trust serves, engagement and communication with members regarding the activities of the Trust, the oversight of Member Events, membership materials and people matters.

### **2. Purpose and function**

The purpose and function of the Group is to gain assurance, on behalf of the Council of Governors:

- 2.1 on the effectiveness of communications and engagement, with internal and external stakeholders, local communities and partners, with the People Committee acting as the oversight Committee;
- 2.2 that the Trust membership is diverse, inclusive and representative of the population it serves; and meets the minimum levels prescribed within the Trust Constitution;
- 2.3 that the processes are in place for improving communications and engagement with members to ensure that the views of members are considered, including the scheduling of Members Events up to four times a year;
- 2.4 in relation to effective liaison and communication between Governors and Members; and
- 2.5 regarding people related matters through the People Committee Chair.

### **3. Authority**

The Group is:

- 3.1. a non-statutory Group of the Trust Council of Governors, reporting directly to the Council, and has no executive powers;
- 3.2 authorised by the Council of Governors to investigate any activity within its Terms of Reference, to seek any information it requires from any officer of the Trust, and to invite any employee, through liaison with the Governor and Membership Engagement Officer, to provide information by request at a meeting of the Group to support its work, as and when required; and
- 3.3 authorised by the Council of Governors to secure the attendance of individuals and authorities from outside the Trust with relevant experience and expertise if it considers this necessary for the exercise of its functions, including whatever professional advice it requires (as advised by the Trust Secretary).



- 3.4 the Terms of Reference must be approved by the Trust Council of Governors and reviewed every two years.

## **4. Membership**

### **4.1 Group Composition and Attendance**

- 4.1.1 Members of the Group must be elected or appointed Trust Governors who form part of the Trust Council of Governors. The Group shall be made up of least four Governors (Public or Staff).
- 4.1.2 One of the members of the Group will be appointed by the Council of Governors as the Chair of the Group. The Chair will be appointed through a nominations and ballot process, facilitated by the Governor and Membership Engagement Officer and will serve a term of three years as Chair of the Group (or until the Governor term of office ends).
- 4.1.3 A further member of the Group shall be appointed as Vice-Chair, likewise by the Council of Governors.
- 4.1.4 The Chair of the Council of Governors, the Trust Secretary and the Governor and Membership Engagement Officer shall not be members of the Group, but may be in attendance.
- 4.1.5 Other than as specified above, members of the Group have the right to participate in Group meetings however other Governors are welcome to attend and contribute. Other non-Group members for example Trust Staff members may be invited to attend and assist the Group from time to time, according to particular items being considered and discussed.
- 4.1.6 In the absence of the Group Chair, the Vice-Chair shall chair the meeting. Members are expected to attend all meetings where possible.
- 4.1.7 Members are able to attend Group meetings in person, by telephone, or by other electronic means. Members in attendance by electronic means will count towards the quorum.
- 4.1.8 Members of the group may serve a term of up to three years (dependant on when their term of office as a Trust Governor ends). No more than three consecutive terms may be served.
- 4.1.9 The Governor and Membership Engagement Officer shall provide support as necessary for example in arranging Group agendas, meeting presentations, taking meeting notes and maintaining an action log.

### **4.2 Quorum**

- 4.2.1 The quorum necessary for the transaction of business shall be three members, as defined in 4.1.1 above, including the Chair or Vice Chair.
- 4.2.2 Members unable to attend a meeting of the Group may nominate another Governor to attend on their behalf, agreed with the Chair of the Group. Nominated attendees will count towards the quorum.

## **5. Duties**

### **5.1 Cycle of Business**

The Group will:

- 5.1.1 set an annual plan for its work and report to the Council of Governors on its progress at every Council meeting.

### **5.2 Membership Communications & Engagement**

The Group will:

- 5.2.1 review the coherence and comprehensiveness of the ways in which the Trust engages with existing and potential members; and
- 5.2.2 development of the Trust's membership strategy and review the effectiveness of internal communications and engagement.
- 5.2.3 refresh the Membership Strategy when due and submit for approval by the Council of Governors.
- 5.2.4 provide input into the updating of Membership Materials as and when required for example membership posters, membership forms, the welcome letter from the Chair of the Working Group and certificate received when becoming a member of the Trust.

## **6. Reporting and Accountability**

- 6.1 The Group Chair will report formally to the Trust Council of Governors on its proceedings after each meeting on all matters within its duties and responsibilities, summarising areas where action or improvement may be needed.

## **7. Committee Administration**

- 7.1 The Group shall meet a minimum of four times a year and at such other times as the Chair of the Group, in consultation with the Governor and Membership Engagement Officer, shall require.
- 7.2 The Chair may at any time convene additional meetings of the Group to consider additional business or business that requires urgent attention.
- 7.3 The agenda will be set in advance by the Chair, with the Governor and Membership Engagement Officer, reflecting an integrated cycle of business, which is agreed each year, to ensure it fulfils its duties and responsibilities in an open and transparent manner.
- 7.4 Notice of each meeting confirming the venue, time and date, together with an agenda of items to be discussed, shall be made available to each member of the Group, no less than five working days before the date of the meeting in electronic form. Supporting papers shall be made available no later than three working days before the date of the meeting.

- 7.5 The Chair shall establish, at the beginning of each meeting, the existence of any conflicts of interest and ensure these are recorded in the notes accordingly.
- 7.6 The Governor and Membership Engagement Officer shall note the proceedings of all Group meetings, including recording the names of those present and those in attendance. Meeting notes will be filed by the Governor and Membership Engagement Officer.
- 7.7 The Committee shall, at least once a year, review its own performance, using a template agreed for all Working Groups by the Council of Governors.

**Procedural control statement: 27 May 2025**

**Date approved: 10 September 2025 [Working Group] and 24 September 2025 [Council of Governors - TBC]**

**Approved by: Working Group and Council of Governors [TBC]**

**Review date: June 2027**

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Log Number	Action No	Minute Ref	Meeting date where action arose	ACTIONS	Responsibility	Notes	Status
141	ACTION03	1. Business Items iv) Chief Executive's Report including:	29 January 2025	An evaluation of the Frailty pilot would be conducted at the end of the pilot and shared with the Council of Governors [ACTION03].	RH	<u>15.04.25</u> - This is being led by Medicine and Emergency Care and is still in a review and pilot phase. Clinical Board to present at a future meeting or to be picked up at QPE Working Group. <u>19.05.25</u> - Marcus Weatherly, new Director of Operations, to provide an update and clarify when a summary of outcomes can be shared with Governors. <u>15.08.25</u> - Email sent to Marcus Weatherly for an update <u>04.09.25</u> - Email sent to Marcus Weatherly for an update - Marcus to write a short summary update to be circulated to Governors. <u>16.09.25</u> - An update has been supplied by Marcus Weatherly and will be circulated to Governors on Friday 19.09.25 - Propose to close action.	
146	ACTION02	2. Items for discussion iii) Transplantation Update	23 April 2025	The JMD-PC would provide a further update once the strategy had been finalised. [ACTION02].	LPC	<u>19.06.25</u> - Update from JMD-PC - The Transplantation Strategy is still under development, and the draft is expected at the next Transplantation Committee meeting. Update to be shared in September 2025. <u>14.08.25</u> - Added to agenda for September. <u>16.09.25</u> - Moved to November forward plan as strategy not yet finalised (Transplantation Committee meeting held 10 September) - Propose to close action.	
148	ACTION01	1. Business Items iv) Chief Executive's Report including:	25 June 2025	The development of the integrated neighbourhood health teams was progressing. The Trust was involved in designing the first stage of working collaboratively to reduce duplication with good clinical leadership. This included close working with primary care colleagues and Healthwatch had also been engaged in the work. Neighbourhood teams had been discussed at the Trust Management Group (TMG) this morning. It was agreed that an update would be provided at the September Council for Governors meeting	RH	<u>14.08.25</u> - Email to Elle Marshall to add to RH Update for September 2025. To be included in RH September Update <u>15.08.25</u> - <u>18.09.25</u> - Referred to in CEO slides on the September CoG agenda (slide 33). Propose close action.	
149	ACTION02	1. Business Items iv) Chief Executive's Report including:	25 June 2025	Paul Ennals recommended that it would be useful to report back to Governors in a future update to which Rob Harrison agreed and explained that the food provision review was an ongoing piece of work with the estates and facilities team.	RH	<u>14.08.25</u> - Email to Elle Marshall to add to RH Update for September 2025. Referred to in CEO slides on the September CoG agenda (slide 8). Propose close action. <u>18.09.25</u> -	
150	ACTION03	2. Items for discussion i) HIV Confident	25 June 2025	Caroline Docking encouraged members to complete the training and noted that it would be useful for Governors to have access to the training on Learning Lab	JR	<u>14.08.25</u> - JR has emailed TEL to add to Governors Training on Learning Lab <u>15.08.25</u> - This course is available to all learners, it can be found searching in the course catalogue when logged into the learning lab by typing in HIV Confident in the search box at the top right hand corner, this has been tested by one of the Governors. Propose to close action.	
151	ACTION04	2. Items for discussion iii) Cancer and Diagnostics	25 June 2025	Paul Ennals recommended that it would be useful to receive a further update in relation to cancer and diagnostic performance at a future Council of Governors meeting	PG	<u>14.08.25</u> - Added to forward plan for the January 2026 agenda - Propose to close action.	

Key:

Red =	No update/Not started
Amber =	In progress
Green =	Completed
Grey =	On Hold