



The Tavistock and Portman
NHS Foundation Trust

Council of Governors Part Two

Agenda and papers of a meeting to be held in public

**Thursday, 7th
December
2023**

**For timings,
please refer to
the agenda.**

**COUNCIL OF GOVERNORS – PART TWO
MEETING HELD IN PUBLIC
ON THURSDAY, 7 DECEMBER 2023 AT 2.50 – 5.10 P.M.
VENUE: LECTURE THEATRE, 5TH FLOOR
THE TAVISTOCK AND PORTMAN NHS FOUNDATION TRUST AND VIRTUALLY (VIA ZOOM)**

AGENDA

23/	Agenda Item	Purpose Approval Discussion Information Assurance	Lead	Format Verbal Enclosure	Time	Report Assurance rating
OPENING ITEMS						
001	Welcome and Apologies for Absence	Information	Chair	Verbal	2.50 (5)	
002	Confirmation of Quoracy	Information	Chair	Verbal		
003	Council Members' Declarations of Interest	Information	Chair	Enc		
004	Minutes of the Previous Meeting held on 14 September 2023	Approval	Chair	Enc		
005	Matters Arising from the Minutes and Action Log Review	Approval	Chair	Enc	2.55 (5)	
REPORTS AND UPDATES						
006	Presentation – Tavistock Consulting	Discussion	Charlotte Williams - Acting Director of Tavistock Consulting	Enc	3.00 (20)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
007	Governor Feedback	Discussion	Lead Governor	Verbal	3.20 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
008	Chief Executive's Report	Discussion	Chief Executive	Verbal	3.30 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
009	Finance Report for Month 7	Information	Chief Finance Officer	Enc	3.40 (10)	Limited <input type="checkbox"/> Partial <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>
010	Council of Governors' Development Programme	Approval	Director of Corporate Governance	Enc	3.50 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
011	Governor Observers on Board Committees	Approval	Director of Corporate Governance	Enc	4.00 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

STATUTORY DUTIES AND RESPONSIBILITIES						
012	Appointment of External Auditors	Approval	Chief Finance Officer	Enc	4.10 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
REPORTS FROM THE NON-EXECUTIVE CHAIRS OF THE BOARD ASSURANCE COMMITTEES						
013	Education and Training Committee Highlight Report • 16 November 2023	Discussion	Committee Chair	Verbal	4.20 (5)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
014	Integrated Audit & Governance Committee Highlight Report • 23 November 2023	Discussion	Committee Chair and/or Executive Lead	Verbal	4.25 (5)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
015	Quality & Safety Committee Highlight Report • 2 November 2023	Discussion	Committee Chair and/or Executive Lead	Verbal	4.30 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
016	People, Organisational Development, Equality, Inclusion and Diversity Committee Highlight Report • 2 November 2023	Discussion	Committee Chair and/or Executive Lead	Verbal	4.40 (10)	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
017	Performance, Finance and Resources Committee Highlight Report • 26 September 2023	Discussion	Committee Chair and/or Executive Lead	Enc	4.50 (10)	Limited <input type="checkbox"/> Partial <input checked="" type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
CLOSING BUSINESS						
018	Questions from the Public	Discussion	Chair	Verbal	5.00 (5)	
019	Any other Urgent Business	Discussion	Chair	Verbal	5.05 (5)	
020	Issues to be escalated to the Board of Directors	Discussion	Chair	Verbal		
021	Review of Meeting	Discussion	Chair	Verbal		
DATE AND TIME OF NEXT MEETING						
022	Date of the Next Meeting – Thursday 14 th March 2024 at 3.00p.m. [venue to be confirmed].					
CLOSE OF PUBLIC MEETING						
	Close of the Public Meeting				5.10	

REGISTER OF GOVERNOR INTERESTS - 2023/24 (LAST UPDATED 05/09/2023)

NAME	POSITION HELD (INCLUDING CONSTITUENCY)	FIRST APPOINTED	DESCRIPTION OF INTERESTS DECLARED	RELEVANT DATES		DECLARATION COMMENTARY
				FROM	TO	
Julian Lousada	Rest of London	October 2021 (1st term)	NIL RETURN			
Michael Rustin	Rest of London	October 2021 (1st term)	NIL RETURN			
Michael Arhin-Acquaah	Rest of London	October 2021 (1st term)	Employed by Kids as a Playworker	Jun-21	Dec-21	Zero-hour contract working with children with additional needs
			Research Assistant (employed/voluntary) at London South Bank University	Jun-23	present	Working on project involving intervention courses for safeguarding staff working with transgender youth, particularly in the care sector. Developing signposting resources and research evidence to increase staff competence and confidence.
Michelle Morais	Rest of London	October 2021 (1st term)	NIL RETURN			
Stephen Frosh	Rest of London	December 2022 (1st term)	NIL RETURN			
			NIL RETURN			
Sebastian Kraemer	Rest of London	December 2022 (1st term)	NIL RETURN			
Natalia Barry	Camden	May 2022 (1st term)	NIL RETURN			
			NIL RETURN			
Fíyona Dawber	Camden	May 2022 (1st term)	NIL RETURN			
			NIL RETURN			

NAME	POSITION HELD (INCLUDING CONSTITUENCY)	FIRST APPOINTED	DESCRIPTION OF INTERESTS DECLARED	RELEVANT DATES		DECLARATION COMMENTARY
				FROM	TO	
Jocelyn Cornwell	Camden	December 2022 (1st term)	Chair, board of trustees - Action Against Medical Accidents (3)	01/12/2021	present	no perceived conflict - Declared on application
Kenyah Nyameche	Rest of England & Wales	October 2021 (1st term)	NIL RETURN			
Sheena Bolland	Rest of England & Wales	October 2021 (1st term)	NIL RETURN			
Jessica Anglin d'Christian	Staff - Clinical, Academic, Senior	November 2021 (2nd term)	Employed by East London NHS Foundation Trust as a Specialist CAMHS Practitioner	05/12/2018	present	Does not have any input in decision making within the Trust - no perceived conflict.
Maisam Datoo	Staff - Admin & Technical	December 2022 (1st term)	Employed by the Institute of Family Therapy as a course director	01/09/2022	present	Works only on a contractual basis and does not have any input in any management of the company - no perceived conflict.
Paru Jeram	Staff - Education & Training	December 2021 (1st term)	NIL RETURN			
Katharine Knight	Student	May 2022 (1st term)	Honorary Contract at Oxford Health NHS Trust	01/08/2022	present	no perceived conflict - Declared on application
David O'Mahony	Stakeholder - University of Essex	May 2021 (1st term)	NIL RETURN			
Peter Ptashko	Stakeholder - Local Authority	March 2022 (1st term)	NIL RETURN			

NAME	POSITION HELD (INCLUDING CONSTITUENCY)	FIRST APPOINTED	DESCRIPTION OF INTERESTS DECLARED	RELEVANT DATES		DECLARATION COMMENTARY
				FROM	TO	
Kathy Elliott (Lead Governor)	Stakeholder - Voluntary Action Camden)	December 2020 (1st term)	Trustee and Vice Chair of Voluntary Action Camden (VAC) (3)	Sep-20	present	Stakeholder Governor representing Voluntary Action Camden
			Member and Vice Chair Caversham Practice Patient Participation Group (3)	Jan-14	present	no perceived conflict
			Chair Registration Panel; and Assessor UK Public Health Register (3)	Jan-14	present	no perceived conflict
Robert Waterson	Stakeholder - University of East London)	December 2022 (1st term)	NIL RETURN			
Vacancy	Trade Union					
2 Vacancies	Commissioners					
Categories:						
1	Directorships including non-executive directorships, held in private companies or PLCs (with the exception of directorships of dormant companies)					
2	Majority or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS					
3	Position(s) of authority in a charity or voluntary organisation in the field of health and social care					
4	Any connection with a voluntary or other body contracting for NHS services					
5	Any connection with an organisation, entity or company considering entering into, or having entered into, a financial arrangement with the Trust, including but not limited to lenders or banks					

**UNCONFIRMED MINUTES OF THE MEETING OF THE COUNCIL OF GOVERNORS –
PART TWO HELD IN PUBLIC
THURSDAY, 14 SEPTEMBER 2023 AT 3 P.M.**

**LECTURE THEATRE 5th FLOOR, THE TAVISTOCK AND PORTMAN NHS FOUNDATION TRUST
AND VIRTUALLY VIA ZOOM**

PRESENT: (Voting Members)

John Lawlor	Chair of the Board of Directors	JL
Kathy Elliot	Stakeholder Governor and Lead Governor	KE
Peter Ptashko	Stakeholder Local Authority Governor	PP
Ffyona Dawber	Public Governor	FD
Sheena Bolland	Public Governor	SB
Michael Rustin	Public Governor	MR
Katharine Knight	Student Governor	KK
Paru Jeram	Staff Governor	PJ
Stephen Frosh	Public Governor	SF
Julian Lousada	Public Governor	JL
Kenyah Nyameche	Public Governor	KN
Natalia Barry	Public Governor	NB
Jessica Anglin d'Christian	Staff Governor	JAC
Jocelyn Cornwell	Public Governor	JC

IN ATTENDANCE:

Deborah Colson	Non-Executive Director and Vice Chair	DC
Aruna Mehta	Non-Executive Director, Chair of the Performance, Finance and Resources Committee and Joint Chair of the Audit Committee	AM
David Levenson	Non-Executive Director and Joint Chair of the Audit Committee	DL
Shalini Sequeira	Non-Executive Director and Chair of the People, Organisational Development, Equalities Diversity and Inclusion Committee	SS
Claire Johnston	Non-Executive Director and Chair Quality Committee	CJ
Sal Jarvis	Non-Executive Director and Chair Education and Training Committee	SJ
Sabrina Phillips	Associate Non-Executive Director	SP
Michael Holland	Chief Executive Officer	MH
Sally Hodges	Deputy Chief Executive and Chief Clinical Operations Officer	SH
Adewale Kadiri	Director of Corporate Governance	AK
Rod Booth	Director of Strategy and Transformation	RB
Clare Scott	Chief Nursing Officer	CS
Chris Abbott	Chief Medical Officer	CA
Jane Meggitt	Interim Director of Communications and Marketing	JM
Gem Davis	Chief People Officer	GD
Peter O Neill	Interim Chief Finance Officer	PON
Elisa Reyes-Simpson	Interim Chief Education and Training Officer and Dean of Postgraduate Studies	ERS
Mike Smith	Head of Communications and Engagement	MS
Amanda Hawke	Corporate Governance Manager	AH
Reni Aina	Corporate Governance Officer (Minutes)	RA
Sophie Marshall	Consultant Clinical Psychologist	SM
Sarah Stenlake	Freedom to Speak up Guardian	SSt

APOLOGIES:

Michelle Morais	Public Governor
Maisam Dato	Staff Governor
Sebastian Kraemer	Public Governor
Robert Waterson	Public Governor
Michael Arhin-Acquaah	Public Governor

MINUTE NO.	ACTION (INITIALS)
23/001	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>The Chair, JL welcomed all in attendance.</p> <p>Apologies for absence were received from Michelle Morais, Maisam Dato, Sebastian Kraemer, Robert Waterson and Michael Arhin-Acquaah</p>
23/002	<p>CONFIRMATION OF QUORACY</p> <p>JL confirmed that the meeting was quorate.</p>
23/003	<p>DECLARATIONS OF INTEREST</p> <p>There were no declarations of interest that related to business discussed at the meeting.</p> <p>The Council of Governors received and noted the Register of Governors' Declaration of Interests 2023/24, as of 16 August 2023.</p> <p>Action Point: The Director of Corporate Governance will review all entries on the Register of Governors' Declaration of Interests 2023/24 for consistency and will do the same for the Board. AK</p>
23/004	<p>MINUTES OF THE PREVIOUS MEETING HELD ON 8 June 2023</p> <p>The minutes of the previous meeting held on 8 June 2023 were agreed as an accurate record, subject to the following minor amendments:</p> <p>Page 1 should read: Claire Johnston, Non-Executive Director, Chair Quality Committee.</p> <p>Aruna Mehta, Non-Executive Director, Chair of Performance, Finance and Resources Committee and Joint Chair of the Audit Committee.</p> <p>David Levenson, Non-Executive Director, Joint Chair of the Audit Committee.</p> <p>Page 3, Item 2.2, Paragraph 2 should read: Potential merger options will be explored as part of this work.</p>
23/005	<p>MATTERS ARISING FROM THE MINUTES AND ACTION LOG REVIEW</p> <p>It was noted that there were no matters arising.</p> <p>The Council reviewed the Action Log and noted the progress made on all items.</p>

JL recommended updates to the following entries:

- Action 1.5 – To Close, propose for closure.
Expressions of interests from Governors will be sought to observe Board meetings.
- Action 4.1 – Overdue, due date passed.
The Nominations Committee met in February 2023 to consider retrospectively appointing David Levenson for a further term of office from 1st October 2022 – 30th September 2025. Email approval for this recommendation to be sought.

Action 4.1 Notes – No record of email approval from Governors can be found. Request that Governors agree this recommendation at the meeting on 14th September 2023.

- Action 4.2 – Overdue, due date passed.
To agree remuneration for the Non-Executive Directors (excluding the Chair). Governors to agree this recommendation at the meeting on 14th September 2023.

Action 4.2 Notes – No record of email approval from Governors can be found. Request that Governors agree this recommendation at the meeting on 14th September 2023.

Action points:

It was agreed that Action 1.5 be updated as an open action still in date.

AH

It was agreed that Actions 4.1 and 4.2 be updated as completed items for closure.

23/006

PRESENTATION

JL welcomed Sophie Marshall, a Consultant Clinical Psychologist at the Portman Clinic to the meeting.

SM gave a presentation with slides on the Community Consultation and Liaison Model Working with Complexity in the community. The Council noted the forensic child and adolescent mental health services available in the UK and also services provided by the Portman team in North Central and North East London. SM discussed the statistical information on services provided by the Portman team together with a breakdown on the type of service users.

SM provided a case study concerning a young person referred to Portman Forensic CAMHS for animal cruelty and other behavioural problems. SM reported on the programme of support given to the young person and family. The outcome for the young person included reduced risks and better engagement with family and friends.

At the end of the presentation MR queried how the outcomes for service users were measured. SM confirmed that they don't have all the statistics for this but one of the key results is that it helps some of the service users remain in the community, avoiding the need for them to be held in secure accommodation or in custody.

SP queried the reason for a higher number of male referrals (80% male referrals compared to 20% female referrals). SM confirmed that work is ongoing to find out the reasons for the higher rate of male users.

JL thanked SM for the excellent presentation and the case study.

23/007 **GOVERNOR FEEDBACK**

KE, the Lead Governor, provided the following feedback on activities since the last meeting. The following themes were discussed by Governors over lunch:

1. Freedom to Speak Up.
2. Complaints within the Trust.
3. Student Feedback.
4. The Trust's finances.
5. The future of the Trust

KE provided the following feedback:

1. The Governors had positive feedback in respect of the Trust's news and social media coverage.
2. The papers for the Council of Governor meeting are now shorter and easier to read.
3. Governors asked how the Executives intend to engage and work in partnership with them.
4. More information was required on the context and role of the Governors.
5. Some Governors have found hybrid meetings a challenge. The Governors would also like to discuss communications and support available to Governors.

It was noted that DL led the process on the Chair's appraisal. DL confirmed that the feedback received from the Governors was constructive and honest with no significant concerns raised. The topics discussed included promotion of the trust, support to the CEO, delivering on our finances and the deficit.

JL thanked KE and all the Governors for the feedback.

JL advised that at a recent away day the CEO and the Executives discussed engagement with the Governors as part of their priorities for the year ahead.

Action points:

- | | |
|---|-----------|
| KE and JL, to discuss the feedback received from the Governors. | AH |
| AK is to follow-up with KE on the governance matters raised in items 4 and 5 of the feedback. | AK |
| JL, KE and DL met to discuss his priorities for 2023-24. A report will be submitted to the Chief People Officer and externally to NHS England. | AK |

23/008 **CHIEF EXECUTIVE'S REPORT**

MH, the Chief Executive Officer, introduced the report which covered the period since the last Council of Governors' meeting on 8 June 2023. The report was taken as read and highlights included the following points:

- The Gender Identity Development Service (GIDS) waiting list had transferred from the Trust to NHS Arden and GEM Commissioning Support Unit (CSU).
- The post of Chief Education and Training Officer had not been filled and the recruitment process will be starting again this autumn.
- The 2022 staff survey results have been presented to department leads, inviting feedback.
- The People Team with the Communications Team will be asking groups of staff, patients, service users and students to work with us to reshape our values.
- The British Medical Association (BMA) announced further strike dates on 24 and 25 August 2023.
- Staff Networks have now elected their new chairs and co-chairs and these have been communicated to the trust.
- Report on the year-end financial position for 2022/23.
- Delivery of the Trust's new three-year Strategy with a focus on Five Pillars which will be discussed with service users, carers, students and partners between August to October 2023.

The CEO formally welcomed the new Executive members: Adewale Kadiri, Chris Abbott, Rod Booth and Clare Scott to the Council of Governors' meeting.

In addition to the CEO's report the Chair provided the following updates:

- JL advised that following the deaths at Chester Hospital, it might take a while before there are any formal recommendations. Council noted that the Trust are monitoring developments in the case and further noted that these matters will be discussed at the Quality Committee as part of our drive to improve quality and safety.
- Speaking up was discussed at the Board's development session held on 13 September 2023.
- The Trust's annual accounts had been laid before Parliament.
- The Annual General Meeting will be on 11 October 2023.

- Proposed changes to the Constitution will be considered at the AGM.
- The list of all new Executive members will be presented at the AGM.

AH

Action point: Confirmation of the date and time of the AGM will be circulated to all relevant parties.

23/008a **FREEDOM TO SPEAK UP GUARDIAN REPORT**

JL welcomed Sarah Stenlake, the Freedom to Speak up Guardian (FTSUG) to the meeting.

SSt, provided a verbal update on the Trust's freedom to speak up framework which allows for confidential and anonymous reporting. The Council noted the following:

The overall results for speaking up still need further strengthening. Some of the key themes arising include:

- The need to be listened to.
- Investigations not being concluded effectively.
- Concerns about confidentiality.
- The need for better strategic planning around proposed changes.
- Leadership and Management training on effecting change in this area should be mandatory.

The use of Datix has helped the freedom to speak up framework and assisted with work on tracking.

In response to questions:

SSt confirmed that she is working with the communications team to promote awareness of the freedom to speak up framework.

SSt confirmed that the freedom to speak up framework applies to all staff, former staff and students.

GD stated that any concerns about data not being available involved previous staff and problems that had occurred with log in, any points noticed are now shared with the Freedom to Speak up Guardian. The Council noted that there are no longer any login issues and data is carefully maintained.

SSt agreed to the suggestion that there should be a similar framework for patients to speak up, however she confirmed that her focus is on staff. CS agreed that a freedom to speak up framework for patients is something that could be discussed at POD EDI and the Quality Committee meetings.

DL commended SSt on her work and further advised that the work on freedom to speak up should be everyone's responsibility.

DL also advised that Equality, Diversity and Inclusion and Freedom to Speak up were the two main points discussed at the informal meeting of the NED Chairs of Board Committees held at the end of the Board cycle.

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Action Point: AM noted that on reviewing our Board Assurance Framework (BAF) and the risk register there is no mention of psychological safety. It was agreed that there should be a review of the risks to consider the inclusion of this topic.

SSt

23/009 **FINANCE REPORT**

PON, Interim Chief Finance Officer introduced the Finance Report for Month 4 (cumulative position to 31 July 2023). The report was taken as read and highlighted points included:

- **Income & Expenditure**
The Trust incurred a net deficit of £1,200k in the period, against a planned deficit of £1,083k, an adverse variance of £117k. This is a small deterioration from the previous month's negative variance of £96k against plan.

The deficit plan for 2023-24 assumes that the potential financial impacts of GIDS decommissioning fall into the next financial year. However, this will be monitored throughout the year with any risks and mitigations being brought into 2023-24 where appropriate.
- **Capital Expenditure**
To date capital spend totals £564k. The agreed capital spend for the whole year is £2.2m, a reduction from the previous year of £0.9m. It will require robust management to ensure the Trust stays within plan.
- **The Cash Balance**
The cash balance at the end of the period is £7.0m, against the planned M04 figure of £11.3m. This is to be delivered by £2m of non-recurrent income and identified non-pay schemes of £1m. The agreed plan includes a reduction in cash over the year to an outturn of £3.1m, which reflects the expected deficit position.

23/010 **MEMBERSHIP ENGAGEMENT REPORT**

MS, Head of Communications and Engagement, introduced the Membership Engagement Report. The report was taken as read and highlighted points included:

- The Foundation Trust membership is one of our key groups of stakeholders. Previously a draft membership engagement strategy was shared with the Council recommending a working group for member engagement that has Governor input.
- The report provided an update on the engagement since the last Council meeting. A Newsletter was sent to the Membership on 1 September 2023. It was noted that the open rate for the newsletter was 35.43% and that there are currently 2942 members with valid email addresses.

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- MS advised that JM, MH and AK are leading on the plan to set up a working group as part of our work on improving engagement with the membership.

23/011 **DRAFT STRATEGY REPORT**

RB, the Director of Strategy and Transformation, introduced the Draft Three Year Strategy Report. The report was taken as read and highlighted points included:

Planning is underway to deliver a new 3-year strategic plan. Our five strategic pillars are:

1. Provide outstanding patient care.
2. Enhance our reputation and grow as a leading local, regional, national and international provider of training and education.
3. Develop partnerships to improve population health and build on our reputation for innovation and research in this area.
4. Develop a culture where everyone thrives with a focus on equality, diversity and inclusion.
5. Improve value, productivity, financial and environmental sustainability.

It was noted that the Board considered and were supportive of the draft content in July 2023 and the draft strategy will be developed over the next 8 weeks before consideration and sign off by the Board on 11 November 2023.

23/012 **EDUCATION AND TRAINING COMMITTEE HIGHLIGHT REPORT**

The Council of Governors noted the key discussions and assurances provided at the Education and Training Committee held on 20 July 2023.

SJ, Chair of the Education and Training Committee, presented the report which was taken as read. The highlights included:

- Recruitment to new staffing structures is complete, though there are a few vacancies due to resignations.
- The Trust lost a long-standing and much admired member of faculty, Andrew Cooper and the Trust is looking to organise an event to remember his work and contribution.
- The Directorate held a number of staff engagement events which have had a positive impact on staff morale.
- The PowerBI data reporting platform has been developed to improve the way in which we are able to report on activities across the directorate.
- Student experience of academic quality has been negatively impacted by the movement of staff and delays in recruitment of new staff following the outcome of the strategic review.
- The Marketing team are developing a full strategy to come to the November meeting.

- The Committee received an overview of actions and recommendations following investigations into complaints from 2018-2023. Many of the ongoing actions have been impacted by changes in staffing, and vacancies, and there has been more progress of late in taking these forward as new structures settle.
- The completion rate for the annual student survey has risen to 39%, and overall satisfaction has increased to 81%.
- The Committee agreed that the Workforce Innovation Unit needs to be linked up to the marketing team and included in the marketing strategy.
- The Committee approved the recommendations for the governance structure within Education & Training.

23/013 **AUDIT COMMITTEE HIGHLIGHT REPORT**

DL, Joint Chair of the Audit Committee, provided a verbal update on the Audit Committee. It was noted that the last time the Committee met formally was in May 2023. DL raised the following points:

- The terms of reference of the Audit Committee are to be reviewed by the Board with one of the proposed changes is for the Audit Committee to meet quarterly.
- A new name is proposed for the Audit Committee, it is to be called the Integrated Audit and Governance Committee.
- Last year the annual accounts were produced late and this year there were also some further issues with meeting the deadline to finalise the annual accounts.
- On reviewing the Accounts, the External Auditors Mazars found a surplus of £100,000.
- On completion of the audit, AK, the Director of Corporate Governance, confirmed that the accounts could be laid before Parliament.
- The Trust is currently going through the process of appointing new External Auditors.

PON, Interim Chief Finance Officer, advised that there is a review of what happened with the accounts and the reasons for the delays in signing these off. Lessons learnt will be reported to the Audit Committee.

23/014 **QUALITY COMMITTEE HIGHLIGHT REPORT**

The Council of Governors noted the key discussions and assurances provided at the Quality Committee meeting held on 6 July 2023.

CJ, Chair of the Quality Committee, presented the report which was taken as read. The highlights included:

- The approval of the Clinical Audit Annual Programme 2023/24.
- The Care Quality Commission (CQC) conducted a review of the Trust's approach and programmes to address Equality, Diversity and Inclusion. The CQC findings did not highlight anything unexpected but confirmed areas for improvement.
- Following the CQC review, the People Organisational Development & Equality, Diversity & Inclusion (POD EDI) Committee will provide oversight for the work plan.
- The Trust is still managing a backlog of complaints.
- The validation process for case notes following the outage to the Care Notes system had been completed and a lessons learnt paper will be presented to the Quality Committee.
- The Patient Safety Incident Response Framework (PSIRF) had made steady progress. The new patient safety programme was in phase 2 (diagnostics and discovery) and phase 3 is to be explored.

23/015

PEOPLE, ORGANISATIONAL DEVELOPMENT, EQUALITY, DIVERSITY AND INCLUSION COMMITTEE HIGHLIGHT REPORT

The Council of Governors noted the key discussions and assurances provided at the People, Organisational Development, Equality, Diversity and Inclusion Committee meeting held on 6 July 2023.

- SS, Chair of the People, Organisational Development, Equality, Diversity and Inclusion Committee, presented the report which was taken as read. The highlights included:
 - The People Team are getting the basics right, with the language, improvements in payroll and recruitment functions and planned introduction of new processes and interventions.
 - It was noted that an additional Freedom to Speak Up Guardian is required, to properly resource the function. Discussions on how the Trust could undertake and support freedom to speak up better are ongoing and will be re-visited at future committees.
 - The Chair of the Committee picked up on the theme of staff being much more likely to experience harassment, bullying and abuse both in the Workforce Race Equality Standard (WRES) and the Workforce Disability Equality Standard (WDES).

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- The Associate Director of EDI recently gave a presentation on the WRES and WDES at the recent Board development seminar.

JL advised that the Trust has a new staff Administration Forum and that this positive development will help improve their roles and influence across the organisation.

23/016 **PERFORMANCE, FINANCE AND RESOURCES COMMITTEE HIGHLIGHT REPORT**

The Council of Governors noted the key discussions and assurances provided at the Performance, Finance and Resources Committee on 25 July 2023.

AM, Chair Performance, Finance and Resources Committee, presented the report which was taken as read. The highlights included:

- The full Directorate of Education and Training (DET) Report had come to PFRC.
- The Committee noted there are improvements in the way data is presented.
- Long waiting lists exist in Gender Identity Clinic (GIC), Autism Spectrum Disorder (ASD) and adult trauma.
- Cyber essentials is complete and we have 12 months accreditation.
- WIFI upgrade project is in train.
- Work is continuing to ensure our compliance against recognised standards eg the national cleaning standard and building compliance model.
- The Committee asked for an estates map, showing the various sites that services are provided from.
- The reported expenditure and cash positions are behind plan.
- The Integrated Quality and Performance Report (IQPR) continues to develop and needs to demonstrate more transparency through a summary of key challenges being faced.

DL confirmed that the NHS had issued a notice about Reinforced Autoclaved Aerated Concrete (RAAC). It was noted that the Trust have engaged a structural engineer to investigate RAAC and a report is expected soon.

23/017 **CONSTITUTIONAL CHANGES ON VOTING MEMBERS OF THE BOARD**

The Council of Governors noted the report on proposed changes to the Trust's Constitution which were recommended for approval.

When this agenda item was considered, the number of the voting members present had reduced by one. JL advised that a decision could not be taken on the proposed changes to the Constitution because at least 6 Governors are required to approve the changes and only 5 Governors were present.

Action point: It was noted that the Council of Governors could not consider Agenda item 23/017 on the proposed Constitutional changes on voting members of the Board. JL advised that this item be deferred and that the Director of Corporate Governance should write to all Governors to let them know when this item will be considered. AK

23/018 **QUESTIONS FROM THE PUBLIC**

There were no questions from the public.

23/019 **ANY OTHER BUSINESS**

There was no other business.

23/020 **ESCALATION TO THE BOARD OF DIRECTORS**

There were no issues to be escalated to the Board of Directors.

23/021 **REFLECTIONS AND FEEDBACK FROM THE MEETING**

Feedback received included:

- Freedom to speak up concerns.
- There were elements of feedback in the Assurance reports.
- The technology for this meeting is better.
- Not everyone liked the new seating arrangement.

Close

The Chair closed the meeting at 5.20 p.m.

There will be a joint strategy session for the Board and Governors on 15 November 2023 (time and venue to be confirmed).

Date of Next Meeting in public: Thursday, 7 December 2023 3pm (time and venue to be confirmed).

Signature _____

Date _____

Council of Governors Part 2 - Public Action Log (Open Actions)							
Action Ref.	Meeting Date	Agenda Ref.	Agenda Item (Title)	Action Notes	as follows:->		
					Action Due date	Action owner (Name and Job Title)	
				Open - New action added	To Close - propose for closure	Overdue - Due date passed	
				Actions are RAG rated	Not yet due - Action still in date	Progress Note / Comments (to include the date of the meeting the action was closed)	
	16.3.23	1.3	Chairs opening remarks.	Peter Ptashko was present at the December 2022 meeting online.	8.6.23	Amanda Hawke, Corporate Governance Manager	Complete - the Minutes have been updated.
	16.3.23	1.5	Action log and matters arising	Expressions of interests from Governors will be sought to observe Board Committees.	TBC	Amanda Hawke, Corporate Governance Manager	Governors would be asked to put their names forward, by no later than 31 December, indicating the Committee(s) that they would like to shadow.
	8.6.23	2.7	Council of Governors Development Programme 2023/24	Training - Governors Development Programme to be developed.	14.9.23	Adewale Kadiri, Director of Corporate Governance	On the agenda. Proposed to close.
	8.6.23	3.3	Quality Committee Highlight Report	CMcK held an event on suicide events reporting. The slides from this event will be circulated to Governors. Slides to be circulated to Governors.	14.9.23	Caroline McKenna, Deputy Chief Medical Officer	A verbal update to be provided at the meeting.
23-003	14.9.23		Declarations of Interest	To review all entries on the Register of Governors' Declarations of Interests 2023/24 for consistency and will do the same for the Board	07.12.23	Adewale Kadiri, Director of Corporate Governance	A verbal update to be provided at the meeting.
23-005	14.09.23		Matters arising from the minutes and action log	It was agreed that Action 1.5 be updated as an Open Action still in date; It was agreed that Actions 4.1 and 4.2 be updated as completed items for closure	07.12.23	Amanda Hawke, Corporate Governance Manager	Complete - Proposed for closing.
23-007	14.09.23		Governor Feedback	To discuss the feedback received from the Governors. This is in relation to point 3 and point 5: 3.Governors asked how the Executives intend to engage and work in partnership with them. 5.Some Governors have found hybrid meetings a challenge. The Governors would also like to discuss communications and support available to Governors.	07.12.23	John Lawlor, Trust Chair & Chair of the Council of Governors and Kathy Elliott, Lead Governor	A verbal update to be provided at the meeting.

Action Ref.	Meeting Date	Agenda Ref.	Agenda Item (Title)	Action Notes	Action Due date	Action owner (Name and Job Title)	Status (pick from drop-down list)	Progress Note / Comments (to include the date of the meeting the action was closed)
23-007	14.09.23		Governor Feedback	To follow-up with Kathy Elliott on the governance matters raised in items 4 and 5 of the feedback: 4. More information was required on the context and role of the Governors. 5. Some Governors have found hybrid meetings a challenge. The Governors would also like to discuss communications and support available to Governors.	07.12.23	Adewale Kadiri, Director of Corporate Governance	Open	A verbal update to be provided at the meeting.
23-007	14.09.23		Governor Feedback	Following a meeting with John Lawlor, Kathy Elliott and David Levenson regarding John's priorities for 2023-24. A report is to be submitted to the Chief People Officer and externally to NHS England.	07.12.23	Adewale Kadiri, Director of Corporate Governance	Open	A verbal update to be provided at the meeting.
23-008	14.09.23		Chief Executive's Report	Confirmation of the date and time of the AGM to be circulated to all relevant parties	07.12.23	Amanda Hawke, Corporate Governance Manager	To Close	Invitations for the AGM was circulated prior to the meeting and the AGM has been held.
23-008a	14.09.23		Freedom to Speak Up Guardian Report	As there was no mention in the BAF and the risk register of psychological safety, it was agreed that there should be a review of the risks considered in the inclusion of BAF and risk register.	07.12.23	Sarah Stenlake, Freedom to Speak Up Guardian	Open	The BAF is currently being refreshed to align with the new Strategic Ambitions of the Trust. This will be considered as part of the refreshed document.
23-017	14.09.23		Constitutional Changes on Voting members of the Board	Governors could not consider this agenda item on the proposed Constitutional changes and the Chair advised that this item would be deferred and that that Director of Corporate Governance should write to all the Governors to let them know when it would be considered.	07.12.23	Adewale Kadiri, Director of Corporate Governance	To Close	The Director of Corporate Governance wrote to all Governors following the meeting. The Constitutional changes were agreed and subsequently approved by Members at the AGM.

MEETING OF THE COUNCIL OF GOVERNORS PART 2 (PUBLIC) – Thursday, 7 December 2023				
Report Title: Tavistock Consulting			Agenda No.: 006	
Report Author and Job Title:	Charlotte Williams Acting Director, Tavistock Consulting	Lead Executive Director:	Elisa Reyes Simpson, Interim Chief Education and Training Officer	
Appendices:	None			
Executive Summary:				
Action Required:	Approval <input type="checkbox"/> Discussion <input checked="" type="checkbox"/> Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/>			
Situation:	This report outlines the work that Tavistock Consulting (TC) undertakes within The Tavistock and Portman NHS Foundation Trust. It demonstrates the wide range of clients reached, services delivered, and work carried out with leaders and professionals across all levels of organisational life. It speaks to the impact the work has and how this benefits the Trust in relation to its international reputation both academically and professionally.			
Background:	<p>Tavistock Consulting was established in 1994 by the Head of the Adult Psychotherapy Department, Jon Stokes. He recognised the need for consultancy and coaching across organisations and for an approach that offered something more psychologically informed, than the traditional management consultancy approach.</p> <p>Since its conception, a team of organisational consultants have worked together to apply and further develop the groundbreaking theories that emerged from work carried out at the Tavistock Clinic after the second world war.</p>			
Assessment:	The impact of the work of Tavistock Consulting has been felt by organisations from around the world who have accessed and benefited from our services; literature has been generated and published around the systems-psychodynamic approach to organisations; and the reputation of Tavistock has flourished in organisations both within and beyond those related to health throughout the world.			
Key recommendation(s):	The Council of Governors is asked to DISCUSS and NOTE the contents of this report.			
Implications:				
Strategic Objectives:				
<input checked="" type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organisational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input type="checkbox"/> Ensure we are well-led & effectively governed.

Relevant CQC Domain:	Safe <input checked="" type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input type="checkbox"/>
Link to the Risk Register:	BAF <input type="checkbox"/>	CRR <input type="checkbox"/>	ORR <input type="checkbox"/>		
	None				
Legal and Regulatory Implications:	Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>		
	The services provided by Tavistock Consulting are in line with the relevant legislation; regulation and industry practice.				
Resource Implications:	Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>		
	There are no additional resource implications associated with this report.				
Equality, Diversity and Inclusion (EDI) implications:	Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>		
	There are no additional EDI implications associated with this report.				
Freedom of Information (FOI) status:	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.		<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various exemptions to information where the public authority has applied a valid public interest test.		
Assurance:					
Assurance Route - Previously Considered by:	None				
Reports require an assurance rating to guide the discussion:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input checked="" type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required	

Report Title: Tavistock Consulting

1. Purpose of the report

- 1.1. This report will outline the work that Tavistock Consulting (TC) undertakes within the Tavistock and Portman NHS. It will demonstrate the wide range of clients reached, services delivered, and work carried out with leaders and professionals across all levels of organisational life. It will speak to the impact the work has and how this benefits the Trust in relation to its international reputation both academically and professionally.

2. Background

- 2.1. Tavistock Consulting was established in 1994 by the Head of the Adult Psychotherapy Department, Jon Stokes. He recognised the need for consultancy and coaching across organisations and for an approach that offered something more psychologically informed, than the traditional management consultancy approach. Since its conception, a team of organisational consultants have worked together to apply and further develop the groundbreaking theories that emerged from work carried out at the Tavistock Clinic after the second world war. As a result, organisations from around the world have accessed and benefited from our services; literature has been generated and published around the systems-psychodynamic approach to organisations; and the reputation of Tavistock has flourished in organisations both within and beyond those related to health throughout the world.

2.2. The Approach

At Tavistock Consulting, we incorporate overlapping frameworks of thinking: systems thinking, the study of group behaviour and psychoanalytic theory into an aligned approach, where each aspect connects and inter-relates, whether we are working with an individual, a team or a whole organisation. It's a powerful combination that gives clients a depth of understanding that gets to the heart of a situation and generates sustained learning and improvement. Our systems-psychodynamic approach draws on ideas first sculpted by Melanie Klein and Wilfred Bion in the early days of the Tavistock, informed by those of Kurt Lewin and further developed and applied in organisations by Isabel Menzies Lyth, Eric Trist, Ken Rice, and Eric Miller. Leading contemporary thinkers on leadership and organisations have at their core, the ideas incubated at the Tavistock and further developed at the Grubb, MIT, and Harvard.

The THRIVE Framework was originally developed by a collaboration of authors from the Tavistock and Portman NHS Foundation Trust and the Anna Freud National Centre for Children and Families in 2014. The THRIVE Framework is an integrated, person centred and needs led approach to delivering mental health services for children, young people, and families.

2.3. The Primary Task

Tavistock Consulting is a specialist organisational development and change consultancy enterprise working with clients across the health, corporate, education and third sectors as well as in central and local government. We work collaboratively with our clients, co-creating interventions that are shaped with their context in mind so that our work aligns with and amplifies organisational performance. Our expertise

lies in being able to work with the full complexity of organisational life. This means we recognise and engage with both the practical realities and issues our clients face as well as the unacknowledged aspects that lie below the surface; the assumptions, dynamics and emotions that often present an unanswered challenge to creating real and sustainable change.

The National i-THRIVE Programme support implementation of the THRIVE Framework for system change (Wolpert et al., 2019), translating the principles of the THRIVE Framework into local models of care using an evidence based approach to implementation.

3. Tavistock Consulting Today

- 3.1. Tavistock Consulting is made up of organisational consultants with a variety of backgrounds, many of whom trained on, and are now faculty on the Tavistock's Masters and Doctoral Programmes in Consulting and Leadership.

Until November 2022 Tavistock Consulting consisted of just five core staff members, three Consultants, one Director and an Administrator. Alongside this was a pool of highly experienced associate consultants that were called upon to assist with delivery of the work.

An outcome of the Strategic Review was the creation of the Workforce Innovation Unit (WIU) within DET. WIU housed the National Workforce Skills Development Unit (NWSDU) under the NHS branch, and a collection of services were combined under the Commercial arm. There was an ambitious plan to reform TC and the other services in the WIU to increase the contribution to Trust income that they made.

Two of the services were moved to work alongside Tavistock Consulting. Add-Wellbeing was dissolved as a separate service and staff integrated into Tavistock Consulting delivery. The National i-THRIVE programme which delivers consultancy, training, and development supports local systems to implement the THRIVE Framework for system change. i-THRIVE, continues to flourish, and works closely alongside the consultants at Tavistock Consulting

A three-year business plan was developed which led to the creation of three new organisational consultant posts and a project manager. Within a year TC expanded from 6 to 15 positions.

- 3.2. Much of TC's work comes in through consultants' contacts, previous clients, or word of mouth. TC takes a commercial approach to its work. As highly experienced and trained organisational consultants, we are skilled at generating interest, scoping, designing, and proposing interventions and ultimately turning interest into sales and contracts. This is all before we go on to deliver high quality interventions that ensures our clients return and refer us on. TC consultants bring the commercial acumen needed to compete in a crowded market together with our USP, the Tavistock's very own systems-psychodynamic approach formed to organisations that enables us to offer interventions that get to the heart of the matter. We see the commercial element of our work, not as a necessary evil that the public sector is required to do, but as a central, fun, and interesting part of the work of providing a consultancy service.

Services Provided to Organisations and Leaders

- Team Effectiveness

- Leadership Development
- Organisational and System Change
- Custom-made Development Programmes
- Organisational Consultancy
- Executive Coaching
- CPD for OD Practitioners
- Supervision for Organisational Consultants.
- Training and Consultancy for the implementation of the THRIVE Framework.

3.2.1. **Challenges faced this year.**

- Delays in recruitment to new posts.
- Departure of TC Director, reduction in the size and authority granted to the role.
- Changes in the economic climate.
- Reputation of the Tavistock following GIDS decommissioning.
- Impact of SR on staff and productivity.
- Time lag for redeployed and new staff to develop the commercial skill and experience of well-established TC staff and get up to full productivity.
- Issues around Finance and the implementation of the project management operation.
- Paucity of marketing and communications support to drive new business.

3.2.2. **Successes achieved this year.**

Tavistock Consulting gained some substantial contracts this year with the following new clients to name but a few:

- **The Institute for Management Development** – contracted to deliver a systems programme for teaching faculty and coaches at IMD developing their understanding of team coaching from a systems-psychodynamic perspective.
- **Investec** – working with Investec's People and Organization Department and have co-designed and run an experiential learning programme. The purpose of the programme was to generate a shared understanding of organisational and team dynamics using the Tavistock model or systems-psychodynamic frame. The method was to run several webinars to introduce the ideas and apply them to current work issues followed by an experiential learning event run over two days to provide a deeper, more embodied learning.
- **Unnamed National Religious Organisation** – supporting their leadership development through the provision of training around the systems-psychodynamic approach to groupwork.
- **Homerton Healthcare NHS Trust** - provision of Executive Coaching to the CEO of the Homerton NHS Trust and a six-month Consultancy for the Homerton Executive Team commences in January made up of team and individual coaching.
- **Unnamed Large Tech Company** (one of the fastest growing tech companies in Europe) requested a bespoke systems-psychodynamic leadership programme rolled out across their Senior Leadership Team (30 leaders) to increase self-awareness and understanding around relationships at work team dynamics and organisational effectiveness. This consists of training, coaching and SLT away days
- **i-THRIVE Northern Ireland** – Large scale regional implementation with engagement from Health& Social Care, Education Authority, Youth Justice, voluntary and community organisations to align their offer of help and support to the THRIVE Framework.
- **i-THRIVE pan-London** – In the second year of funding with a vision for all CYP in London to access support of help from a THRIVE-aligned system. Support given around 150 leaders from the 5 London ICBs to embed the THRIVE Framework

- **i-THRIVE in Sunderland** – 12-month programme of support for local implementation of the THRIVE Framework across Northeast and North Cumbria ICB with training delivered to over 200 cross-sector representatives from the Sunderland system.

Alongside this we have continued to provide consulting and coaching to established clients in organisations from the following sectors.

- International NGO's
- National Government Departments
- ICBs
- NHS Trusts throughout the UK – from Board level to front facing clinical teams.
- Universities
- Schools
- Local Authorities – housing, social services, CAMHS, Mental Health Services, Youth Justice Services.
- Charities – National and local
- Teams within The Tavistock and Portman NHS Foundation Trust.

New testimonials:

Louise Ashley - CEO Homerton Healthcare NHS Trust

Charlotte and her team have worked with service teams in difficulty and with executive directors both as team and individual coaches.

The outcomes of their work have been really positive, enabling individuals and teams to get to the bottom of long-standing issues which have restricted their ability to succeed.

I cannot now imagine leading an organisation without having the expertise and support of Tavistock Consulting working alongside me to support the psychological wellbeing of my teams”.

Dr Alok Gupta , Consultant Paediatrician and Clinical Director, Children & Young People Services, Darent Valley Hospital.

There was a sustained improvement in team working, senior leadership, work environment and overall productivity and efficiency of the children and young people department in turn we saw in our patients’ experience, a lot of positive feedback.

The colleagues from Tavistock were excellent with good techniques and approach to carry out this complex piece of work”.

4. Conclusion

- 4.1. This report demonstrates that Tavistock Consulting makes a significant positive contribution to the reputation of the Tavistock both nationally and internationally.

MEETING OF THE COUNCIL OF GOVERNORS PART 2 (PUBLIC) – Thursday, 7 December 2023			
Report Title: Finance Report - As of 31 October 2023 (Reporting Month 07)			Agenda No. 009
Report Author and Job Title:	Udey Chowdhury, Deputy Chief Finance Officer	Lead Executive Director:	Peter O'Neill, Interim Chief Finance Officer
Appendices:	None		
Executive Summary:			
Action Required:	Approval <input type="checkbox"/> Discussion <input type="checkbox"/> Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/>		
Situation:	The report provides a summary of the Month 07 (cumulative position to 31st October 23) financial performance against NHSE plan.		
Background:	<p>The Trust has a plan for a revenue deficit for 2023/24 of £2.5m, with Capital Expenditure of £2.2m and a year-end cash position of £3.1m.</p> <p>Income & Expenditure The Trust incurred a net deficit of £2,252k in the period, against a planned deficit of £2,128k i.e., an adverse variance of £124k. This is a worsening from the previous month's negative variance of £45k against plan. This reflects some one-off costs paid in October and the ongoing industrial action and building rates additional costs. However, the distribution of the national funding for industrial action costs has now been confirmed and will offset these costs, bringing the trust back towards its planned deficit for the period. The trust still expects to achieve its year planned deficit of £2.5m.</p> <p>Capital Expenditure To date capital spend totals £942k, versus the plan total of £1,390k. Anticipated expenditure in the year being on plan at £2.2m.</p> <p>Cash The cash balance at the end of the period is £7.2m against the planned M07 figure of £9.9m. The negative variance reflects the impact of the variance to plan and a continued lower income receivables figure from NHS sources. It is anticipated that this position will move closer to plan in the coming months.</p>		
Assessment:	<p>Income and Expenditure The Trusts planned deficit of £2.5m requires the delivery of a £3m efficiency to achieve this. This is to be delivered by £2m of non-recurrent income and identified non-pay schemes of £1m. The Trust will decommission the GIDS at the end of March 24. The cost of decommissioning will fall partly in this financial year, with potentially significant redundancy costs falling into the next financial year. However, the likelihood is that we will be required to recognize the cost in this financial year by way of a provision. The working assumption by us and the ICB is this cost will be funded in total by NHSE. Thus, the year end projection is unaffected for these costs at this point.</p> <p>Capital Expenditure</p>		

	<p>The agreed capital spend for the year is £2.2m, is a reduction from the previous year of £0.9m and will require robust management to ensure the Trust stays within plan.</p> <p>Cash The agreed plan includes a reduction in cash over the year to an outturn of £3.1m, which reflects the planned deficit position, but not the unknown impact of GIDS decommissioning.</p>				
Key recommendation(s):	The Council of Governors is asked to NOTE the position outlined in the report.				
Implications:					
Strategic Objectives:					
<input type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input checked="" type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organizational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input checked="" type="checkbox"/> Ensure we are well-led & effectively governed.	
Relevant CQC Domain:	Safe <input type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>
Link to the Risk Register:	BAF <input checked="" type="checkbox"/>		CRR <input type="checkbox"/>		ORR <input type="checkbox"/>
	<p>BAF 8: Delivering Financial Sustainability Targets. A failure to deliver a medium / long term financial plan that includes the delivery of a recurrent efficiency program bringing the Trust into a balanced position in future periods. This may lead to enhanced ICB/NHSE scrutiny, additional control measures and restrictions on autonomy to act.</p> <p>BAF 10: Suitable Income Streams The result of changes in the commissioning environment, and not achieving contracted activity levels could put some baseline income at risk, impacting on financial sustainability. This could also prevent the Trust establishing sustainable new income streams and adapt the current Trust service configuration.</p>				
Legal and Regulatory Implications:	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	
	It is a requirement that the Trust submits an annual plan to the ICS, and monitors and manages progress against it.				
Resource Implications:	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	There are no additional resource implications associated with this report.				
Equality, Diversity, and Inclusion (EDI) implications:	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	There are no EDI implications associated with this report.				
Freedom of Information (FOI) status:	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.			<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various	

	exemptions to information where the public authority has applied a valid public interest test.			
Assurance:				
Assurance Route - Previously Considered by:	None			
Reports require an assurance rating to guide the discussion:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input checked="" type="checkbox"/> Partial Assurance: There are gaps in assurance	<input type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required

MEETING OF THE COUNCIL OF GOVERNORS PART 2 (PUBLIC) – Thursday, 7 December 2023					
Report Title: Council of Governors' Development Programme				Agenda No.: 010	
Report Author and Job Title:	Adewale Kadiri Director of Corporate Governance	Lead Executive Director:	Adewale Kadiri Director of Corporate Governance		
Appendices:	None				
Executive Summary:					
Action Required:	Approval <input checked="" type="checkbox"/> Discussion <input checked="" type="checkbox"/> Information <input type="checkbox"/> Assurance <input type="checkbox"/>				
Situation:	The report provides a proposal for the Council of Governors' Development Programme.				
Background:	<p>The Council of Governors is a key group within the formal governance structures of an NHS Foundation Trust.</p> <p>It is therefore essential that the Council is provided with all the tools and support that they need to perform their role effectively. In particular, the Council should have in place a clear and effective development programme to ensure that members have the skills and knowledge that they need, and that they are able to keep abreast of any changes in legislation, guidance or practice.</p>				
Assessment:	<p>There have historically been gaps in the level of support provided to the Council of Governors at this Trust, leading to variations in the knowledge and understanding of the governor role across the Council.</p> <p>This paper seeks to identify development needs across the Council and provide suggestions as to how these will be met.</p>				
Key recommendation(s):	<p>The Council of Governors is asked to:</p> <ul style="list-style-type: none"> - DISCUSS the proposals, and make suggestions for changes or alternative areas of focus; and - APPROVE the draft half year development programme to commence in January 2024. 				
Implications:					
Strategic Objectives:					
<input type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organisational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input checked="" type="checkbox"/> Ensure we are well-led & effectively governed.	
Relevant CQC Domain:	Safe <input type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>
Link to the Risk Register:	BAF <input type="checkbox"/>		CRR <input type="checkbox"/>		ORR <input type="checkbox"/>
	None				

Legal and Regulatory Implications:	Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	
	The CQC's Well Led domain requires that requires that organisations have clear and effective governance and accountability requirements.			
Resource Implications:	Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	
	The Trust may need to engage the services of external trainers to provide some of the content set out in this programme.			
Equality, Diversity and Inclusion (EDI) implications:	Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	
	Members of the Trust's Council of Governors come from a range of backgrounds, and some have protected characteristics. It is essential that this programme takes account of any additional needs that they may have, to ensure that all Governors understand their role and are able to fully contribute.			
Freedom of Information (FOI) status:	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.		<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various exemptions to information where the public authority has applied a valid public interest test.	
Assurance:				
Assurance Route - Previously Considered by:	None			
Reports require an assurance rating to guide the discussion:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input checked="" type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required

Council of Governors' Development Programme

1. Purpose of the report

- 1.1. The purpose of this report is to enable the Council of Governors have a full and open discussion about their development needs, and how these may best be met, and then to hopefully approve this plan as part of the route to meeting these needs.

2. Background

- 2.1. The Council of Governors plays an important role in the governance arrangements for any Foundation Trust, but particularly so at The Tavistock and Portman NHS Foundation Trust as we approach merger with another organisation – the Council has a specific statutory role in this process. It is important therefore to ensure that all members of the Council are fully equipped and supported to perform their functions.
- 2.2. It is acknowledged that in the past, the approach to training and development for the Council has not been consistent. This paper therefore seeks to set the foundations for the establishment of a formal programme, combining externally provided set-piece training sessions, with in-house bespoke sessions, including proper induction as Governors take up their roles, and briefings on the Significant Transactions regime, as well as ongoing presentations about various aspects of the work of the Trust.

3. Governors' Induction

- 3.1. It is intended that as new Governors join the Council following the conclusion of the election process, a formal induction programme to welcome them to the Trust and to their role on the Council will be held. This will, as much as practicable, be linked to the Trust's corporate induction, and indeed, new Governors will be asked to participate in relevant aspects of that process. In addition, there will be sessions on how the NHS works, an introduction to Foundation Trusts, the roles and powers of the Council of Governors, and the relationship between Governors and Members. Existing Governors who feel that they would benefit from this new induction are welcome to attend. Indeed, although we are not expecting a significant new intake of Governors until October 2024 (and this may then be affected by the merger), we would be happy to run the session early in the New Year if there is demand for it.
- 3.2. While it is intended that much of this content will be delivered in-house, new Governors will also be asked to attend the GovernWell programme (delivered by NHS Providers) Core Skills course. In fact, we will encourage all Governors to engage with various aspects of their annual programme, including their courses on accountability and holding to account and their virtual workshops which give governors the opportunity to keep abreast of the latest developments in health policy and to meet counterparts from across the country.
- 3.3. The in-house aspect of the induction process will also include a targeted pack, with relevant hyperlinks, that Governors can use as reference material throughout their tenures.

4. Ongoing training and development

- 4.1. While the induction will enable new Governors to start their tenures on the right footing, it is essential that this is supplemented with ongoing training and development to allow them to grow into their roles. This will consist of a combination of Trust-specific sessions relating to the work of individual teams and services, and other programmes on the role of the Governor, to be delivered internally, across the ICB or externally. It is anticipated that subjects could include the role of the Council within the merger process and what Governors could expect as participants in the expected CQC Well Led inspection. In addition to these two specific items, it would be important for Governors to be refreshed from time to time on more routine items, such as holding NEDs to account, engaging with Members and appraisals, including through the GovernWell programme as discussed earlier. There is also the possibility, if required, of inviting GovernWell, or any other similar body to provide bespoke training in response to a specifically identified need.

5. Suggested programme and time commitment

- 5.1. Taking account that all our Governors are volunteers and can only devote finite time to Trust business, it is important that the right balance is struck between providing the training and development that Governors need and not demanding too much additional time. It is therefore suggested that a proportion of the time that is currently set aside for the private section of the Council of Governors' meeting be instead devoted to training and development. It would be for Governors themselves to determine how much, or, if this suggestion is not accepted, whether additional time should be found. In months when there are no Council of Governors' meetings, it is suggested that some of the current informal meetings be extended, perhaps by 30 minutes to allow for a session.
- 5.2. Set out below is a taster of what the first few months of a new development programme, commencing in the New Year could look like:

Month	Item
January 2024	Governor induction refresh (optional)/ CQC Well Led
February	Introduction to the Significant Transaction regime/Accountability and holding to account (GovernWell)
March	Service presentation (TBA)
April	Member and Public Engagement
May	Engagement with other NCL CoGs (tentative/optional)
June	Service presentation (TBA)

Governor observer of Board Committees – Agreement and Role Description

Introduction

1. All members of the Council of Governors are eligible to put themselves forward to observe scheduled meetings of the following Board Committees:
 - Education and Training Committee
 - Integrated Audit and Governance Committee
 - People, Organisational Development, Equality, Diversity and Inclusion Committee
 - Performance, Finance and Resources Committee
 - Quality and Safety Committee.

Agreement

2. It will be for the Chair of the Committee, in conjunction with the Trust Chair to decide which Governor will observe their meetings.
3. It may be possible for more than one Governor to observe meetings together or separately, but this would be for the Committee Chair to decide.
4. In the absence of the nominated observer, it will not be possible for another member of the Council of Governors to attend a Committee meeting if they are not the observer for that group, without the expressed consent of the Chair.

The Role

5. The Governor observer will be provided with the full pack of papers for each meeting at the same time as the Committee members.
6. At the point of taking up the role, the Governor observer will be provided with all the Committee dates for the year and will indicate their availability at the earliest opportunity. Where this changes mid-year and they can no longer attend a meeting, they should notify the Corporate Governance team as soon as possible.
7. The Governor observer is not a member of the Committee and therefore does not have the right to ask questions or comment on the papers during the meeting.
8. The Committee Chair may ask the observer if they have any questions, or to comment on how they found the meeting, after it has concluded.
9. The Governor observer will provide verbal feedback at the next meeting of the Council of Governors of what they observed at the Committee meeting, at the same time as the Committee Chair presents their update report.
10. The Governor observer will be asked to provide feedback, along with the Committee members and attendees, as part of the annual evaluation process.
11. All the Governor observers will provide feedback as appropriate to the Trust Chair as part of the Non-Executive Director appraisal process.

MEETING OF THE COUNCIL OF GOVERNORS PART 2 (PUBLIC) – Thursday, 7 December 2023				
Report Title: Appointment of External Auditors			Agenda No.: 012	
Report Author and Job Title:	Peter O'Neill, Interim Chief Finance Officer	Lead Executive Director:	Peter O'Neill, Interim Chief Finance Officer	
Appendices:	None			
Executive Summary:				
Action Required:	Approval <input checked="" type="checkbox"/> Discussion <input type="checkbox"/> Information <input type="checkbox"/> Assurance <input type="checkbox"/>			
Situation:	To seek the approval of the Council of Governors to appoint a new firm of External Auditors following recommendation from the Integrated Audit and Governance Committee.			
Background:	The Trust's previous External Auditors (Mazars) contract finished this year, with the audit of the 2022/23 accounts.			
Assessment:	<p>The Trust went through a competitive procurement process to engage a new external audit partner. Unfortunately, we did not receive any expressions of interest via this process.</p> <p>This is not uncommon as the NHS external audit market is becoming increasingly constrained as large accounting firms pull out of the market. We approached NHSE for guidance and they advised that we should approach companies directly but were unable to identify any likely candidates themselves.</p> <p>The future state work we completed with KPMG that identified 5 potential merger partners was used as a lever to approach Grant Thornton (GT), who are currently the External Auditors of several of those organisations.</p> <p>After initial discussions with the lead partner, GT conceded that it would be reasonable for them to act as our External Auditors in the period up to the merger, even though they had not tendered for the work initially.</p>			
Key recommendation(s):	The Council of Governors is asked to APPROVE the appointment of Grant Thornton as the Trust's new External Auditors.			
Implications:				
Strategic Objectives:				
<input type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input checked="" type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organisational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input checked="" type="checkbox"/> Ensure we are well-led & effectively governed.

Relevant CQC Domain:	Safe <input type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>
Link to the Risk Register:	BAF <input checked="" type="checkbox"/>		CRR <input type="checkbox"/>		ORR <input type="checkbox"/>
	BAF 8: Delivering Financial Sustainability Targets. A failure to deliver a medium / long term financial plan that includes the delivery of a recurrent efficiency program bringing the Trust into a balanced position in future periods. This may lead to enhanced ICB/NHSE scrutiny, additional control measures and restrictions on autonomy to act.				
Legal and Regulatory Implications:	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	
	The Trust has to file an audited set of accounts with Parliament on an annual basis.				
Resource Implications:	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	
	Additional fee of £30k.				
Equality, Diversity and Inclusion (EDI) implications:	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	There are no EDI implications associated with this appointment.				
Freedom of Information (FOI) status:	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.			<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various exemptions to information where the public authority has applied a valid public interest test.	
Assurance:					
Assurance Route - Previously Considered by:	Integrated Audit and Governance Committee – 23 November 2023				
Reports require an assurance rating to guide the discussion:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input checked="" type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required	

MEETING OF THE COUNCIL OF GOVERNORS PART 2 - PUBLIC
Thursday, 7 December 2023

CHAIR'S ASSURANCE REPORT TO THE COUNCIL OF GOVERNORS (CoG)

Committee:	Meeting Date	Chair	Report Author	Quorate	
Performance Finance and Resources Committee	26 September 2023	Aruna Mehta, Non-Executive Director	Sally Hodges COO and Peter ONeill CFO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Appendices:	None		Agenda Item: 017		

Assurance ratings used in the report are set out below:

Assurance rating:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required
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The key discussion items including assurances received are highlighted to the Board below:

Key headline	Assurance rating
<p>1. Integrated Quality and Performance report:</p> <ul style="list-style-type: none"> Report is going in the right direction, with better detail and thus allowing NEDS to triangulate data Report is still too fragmented and data heavy without enough direction for NEDS to know where to focus. We agreed to organise a seminar for the committee to work through together where the focus should be. The plan on a page for the key strategic areas will also help, this will be visible in the reports in the next couple of months. The focus will be on waiting times. Although waiting times are the key concern, a number of metrics, particularly in the GIC report raised questions for the committee and it was agreed that these would be shared with the board. It was also agreed that a brief report on GIC issues with a summary on what actions we are taking will be brought back to the next PFRC. The fire and the Carenotes outage report raised questions about how well embedded our Business Continuity Plans are. Clare Scott, CNO reported that there is a training being rolled out. The committee asked for an update in 6 months post this training. Contract update highlighted significant risk of c.£14m to our income in 24-25, £10m of which is GIDS. This will be escalated to board, and with the development of the IQR establishing a better link between contracts, activity and workforce. Job Planning continues to be a challenge, and it was recognised that this is required for clarity on capacity across our services. ESR issues raised in the Committee highlighted in the IQPR to be clarified and reported to PODEDI if required. 	Limited <input type="checkbox"/> Partial <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>

2. Finance report: <ul style="list-style-type: none"> Finance Report was presented to the Committee with no issues raised. Committee noted that IQP level summaries to be added from M06. 	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	
3. IMT projects including Carenotes outage lessons learned: <ul style="list-style-type: none"> The Committee thanked Jon for the clarity of the report and accepted that all reasonable mitigations are now in place. 	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
4. BAF and Operational Risks: <ul style="list-style-type: none"> The GIC operational risks (including waiting times) were agreed to be separated out as a specific set of new risks on the Risk Register. 	Limited <input type="checkbox"/> Partial <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>	
Summary of Decisions made by the Committee:		
<ul style="list-style-type: none"> The Committee was not required to make any decisions 		
Risks Identified by the Committee during the meeting:		
The Committee highlighted two significant issues for escalation to board, issues with GIC staffing and morale, as well as the finance risks to contracts in 2024-2025.		
Items to come back to the Committee outside its routine business cycle:		
There was no specific item over those planned within its cycle that it asked to return...		
Items referred to the BoD or another Committee for approval, decision or action:		
Item	Purpose	Date
Staffing and ESR development progress	Action	To PODEDI