



**University Hospitals Dorset**  
NHS Foundation Trust

**University Hospitals Dorset**  
**NHS Foundation Trust**  
**Council of Governors Meeting – Part 1**

**Thursday 16 April 2026**

**16:00 – 18:00**

**Patient First Improvement Hub at Christchurch Hospital  
and via Microsoft Teams**

*(Link to join meeting can be found in Outlook Diary Appointment)*

**UNIVERSITY HOSPITALS DORSET NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS MEETING**

The meeting of the University Hospitals Dorset NHS Foundation Trust Council of Governors will be held at 14:30 on Thursday 16 April 2026 in the Patient First Improvement Hub at Christchurch Hospital and via Microsoft Teams.

If you are unable to attend, please notify the Company Secretary Team by sending an email to: [uhd.company.secretary-team@nhs.net](mailto:uhd.company.secretary-team@nhs.net)

**Judy Gillow**  
Interim Trust Chair

**AGENDA – PART 1**

**16:00 on Thursday 16 April 2026**

| Time         | Item       |  | Method                | Purpose       | Lead                   |
|--------------|------------|--|-----------------------|---------------|------------------------|
| <b>16:00</b> | <b>1</b>   | Welcome, Introductions, Apologies & Quorum   | <b>Verbal</b>         |               | <b>Chair</b>           |
|              | <b>2</b>   | Declarations of Interest   | <b>Verbal</b>         |               | <b>Chair</b>           |
|              | <b>3</b>   | Notification of any urgent matters or motions  | <b>Verbal</b>         |               | <b>Chair</b>           |
|              | <b>4</b>   | <b>MINUTES</b>   |                       |               |                        |
|              | <b>4.1</b> | Minutes of the meeting held on 15 January 2026   | <b>Paper</b>          | <b>Agree</b>  | <b>Chair</b>           |
|              | <b>4.2</b> | Matters Arising – Action List  | <b>Paper</b>          | <b>Review</b> | <b>Chair</b>           |
|              | <b>5</b>   | <b>TRUST CHAIR AND LEAD GOVERNOR UPDATES</b>   |                       |               |                        |
|              | <b>5.1</b> | Chair’s Update   | <b>Verbal</b>         | <b>Note</b>   | <b>Chair</b>           |
|              | <b>5.2</b> | Update from Lead Governor  | <b>Verbal</b>         | <b>Note</b>   | <b>Lead Governor</b>   |
|              | <b>6</b>   | <b>TRUST PERFORMANCE AND ACCOUNTABILITY</b>  |                       |               |                        |
|              | <b>6.1</b> | Chief Executive’s Update   | <b>Verbal</b>         | <b>Note</b>   | <b>CEO</b>             |
|              | <b>6.2</b> | Integrated Performance Report <ul style="list-style-type: none"> <li>• Summary IPR paper</li> <li>• Feedback from Board Committee Chairs and governor observers               <ul style="list-style-type: none"> <li>➢ Audit Committee</li> <li>➢ Charitable Funds Committee</li> <li>➢ Finance and Performance Committee                   <ul style="list-style-type: none"> <li>○ No criteria to reside</li> </ul> </li> <li>➢ People and Culture Committee</li> <li>➢ Transforming Care Together</li> <li>➢ Quality Committee</li> </ul> </li> </ul> | <b>Paper / Verbal</b> | <b>Note</b>   | <b>NEDs/ Observers</b> |

| 7 STRATEGY, PLANNING & TRANSFORMATION          |     |   |        |               |                               |
|--|-----|---|--------|---------------|-------------------------------|
|  | 7.1 | Transformation Programme – update   | Verbal | Note          | CSTO                          |
| 8 GOVERNOR DUTIES & STATUTORY RESPONSIBILITIES |     |   |        |               |                               |
|  | 8.1 | Nominations, Remuneration and Evaluation Committee: <ul style="list-style-type: none"> <li>• Feedback</li> <li>• NREC Annual Statement of work</li> <li>• NREC Terms of Reference</li> <li>• NREC Membership</li> </ul> | Paper  | Note/ Approve | Chair                         |
|  | 8.2 | Effectiveness Group: <ul style="list-style-type: none"> <li>• Feedback</li> <li>• Results of the Council of Governors' Assessment of Collective Performance</li> </ul>  | Paper  | Note/ Approve | Carrie Stone/ Group Members   |
|  | 8.3 | Membership and Engagement Group: <ul style="list-style-type: none"> <li>• Feedback on M&amp;E Strategy</li> <li>• Engagement Events</li> <li>• MEG membership</li> </ul>  | Paper  | Note/ Approve | Keith Mitchell/ Group Members |
|  | 8.4 | Quality Group Feedback  | Paper  | Note/ Approve | Kani Trehorn / Group Members  |
|  | 8.5 | Annual Review of the Register of Interests  | Paper  | Approve       | Chair                         |
|  | 8.6 | Council of Governors Cycle of Business 2026/27  | Paper  | Approve       | Chair                         |
|  | 8.7 | Council of Governors 2027 Meeting Dates   | Paper  | Approve       | Chair                         |
| 9 GOVERNOR FEEDBACK                            |     |   |        |               |                               |
|  | 9.1 | Feedback from Staff and Appointed Governors   | Verbal | Note          | Staff and Appointed Governors |
|  | 10  | Any Other Feedback  | Verbal | Note          | All                           |
|  |     | <b>Date of Next Council of Governors Meeting:</b> Thursday 29 May 2026 at 10:00 at Yeomans House, Yeomans Industrial Park.  |        |               |                               |

\* late paper

<sup>R</sup> Associated item in Reading Room

This meeting is being recorded for minutes of the meeting to be produced.  
The recording will be deleted after the minutes of the meeting have been approved.

#### Reading Room

- Integrated Performance Report (*for agenda item 6.2*)

#### Items for Next Council of Governors Part 1 Agenda – May 2026

##### Standing Reports

- Chair's Update
- Chief Executive's Update
- Integrated Performance Report/ Committee Chairs' Assurance Report
- Feedback from the Nominations, Remuneration and Evaluation Committee
- Updates from the Council of Governor Groups

- Feedback from Governor Observers
- Feedback from Staff and Appointed Governors
- Annual Reports
- Annual Report/Statement on the work of the Nominations, Remuneration and Evaluations Committee
- Annual Review of the Governance Cycle
- Convening of the Annual Members' Meeting

**List of abbreviations:**

CEO – Chief Executive Officer

CFO – Chief Finance Officer

CNO – Chief Nursing Officer

CoSec – Company Secretary Team

CSTO – Chief Strategy and Transformation Officer

**Other abbreviations**

CDEL – Capital Delegated Expenditure Limit

SMR – Standardised Mortality Ratio

CIP – Cost Improvement Programme

SWAST – South West Ambulance Service NHS Foundation Trust

ED – Emergency Department

HSMR – Hospital Standardised Mortality Ratio

ICB – Integrated Care Board

ICS – Integrated Care System

ITU – Intensive Therapy Unit

MSG – Mortality Surveillance Group

NHSE/I – NHS England/Improvement

#NOF – Fractured neck of femur

OPEL – Operational Pressures Escalation Levels

**AGENDA – PART 2 PRIVATE MEETING**

**18:15 on Thursday 16 April 2026**

| Time  | Item |  | Method | Purpose | Lead                       |
|-------|------|--|--------|---------|----------------------------|
| 18:15 | 11   | Welcome, Introductions, Apologies & Quorum   | Verbal |         | Chair                      |
|       | 12   | Declaration of Interests   | Verbal | Note    | Chair                      |
|       | 13   | Notification of any urgent matters or motions  | Verbal | Note    | Chair                      |
|       | 14   | <b>MINUTES</b>   |        |         |                            |
| 18:17 | 14.1 | Minutes of the meeting held on 15 January 2026   | Paper  | Agree   | Chair                      |
|       | 14.2 | Matters Arising – Action List  | Paper  | Note    | Chair                      |
|       | 15   | <b>STRATEGY</b>  |        |         |                            |
| 18:20 | 15.1 | Integrated Neighbourhood Teams   | Verbal | Note    | CMO                        |
|       | 16   | <b>GOVERNANCE</b>  |        |         |                            |
| 18:30 | 16.1 | Update on the future of the Council of Governors   | Verbal | Note    | Chair/<br>Lead<br>Governor |
|       | 16.2 | Key themes from the Board Part 2 meeting held on 15 April 2026   | Verbal | Note    | Chair                      |
| 19:00 | 17   | Reflections on the Meeting   | Verbal | Note    | Chair                      |
|       |      | <b>Date of Next Council of Governors Meeting:</b> Thursday 29 May 2026 at 10:00 at Yeomans House, Yeomans Industrial Park. |        |         |                            |

\* late paper

<sup>R</sup> associated paper in the reading room

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**Items for Next Council of Governors Part 2 Agenda – May 2026**

Standing Items

- Feedback from Nominations, Remuneration and Evaluations Committee
- Key themes from Board Part 2 meeting.

**List of abbreviations:**

CEO – Chief Executive Officer  
CNO – Chief Nursing Officer

CFO – Chief Finance Officer  
CoSec – Company Secretary Team

**UNIVERSITY HOSPITALS DORSET NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS PART 1 MEETING**

Minutes of the Council of Governors Part 1 meeting held on 15 January 2026 at 14.30 in the Boardroom at Poole Hospital and via Microsoft Teams

|                       |                      |  |
|-----------------------|----------------------|--|
| <b>Present:</b>       | Judy Gillow          | Interim Trust Chair  |
|                       | Benjamin Anjo        | Staff Governor, Clinical                                       |
|                       | Colin Blebta         | Public Governor: Bournemouth                                   |
|                       | Deniz Cetinkaya      | Public Governor: Bournemouth                                   |
|                       | Sharon Collett       | Public Governor: Bournemouth                                   |
|                       | Sue Comrie           | Appointed Governor: Volunteer Group                            |
|                       | Peter Fitzmaurice    | Public Governor: Poole and Rest of Dorset                      |
|                       | Rob Flux             | Staff Governor: Non-Clinical                                   |
|                       | Colin Hamilton-Welsh | Staff Governor: Non-Clinical                                   |
|                       | Paul Hilliard        | Appointed Governor: BCP Council                                |
|                       | Malcolm Keith        | Staff Governor: Non-Clinical                                   |
|                       | Rosie Martin         | Public Governor: Christchurch, East Dorset and Rest of England |
|                       | Elizabeth McDermott  | Public Governor: Bournemouth                                   |
|                       | Andrew McLeod        | Public Governor: Poole and Rest of Dorset                      |
|                       | Keith Mitchell       | Public Governor: Bournemouth                                   |
|                       | Steve Robinson       | Appointed Governor: Dorset County Council                      |
|                       | Diane Smelt          | Public Governor: Bournemouth                                   |
|                       | Carrie Stone         | Public Governor: Poole and Rest of Dorset                      |
|                       | Shelley Thompson     | Appointed Governor: Bournemouth University                     |
|                       | Kani Trehorn         | Staff Governor: Clinical                                       |
|                       | Michele Whitehurst   | Public Governor: Poole and Rest of Dorset, Lead Governor       |
|                       | Nick Williams        | Public Governor: Poole and Rest of Dorset                      |
| <br>                  |                      |  |
| <b>In attendance:</b> | Siobhan Harrington   | Chief Executive  |
|                       | Richard Renaut       | Chief Transformation Officer                                   |
|                       | Alastair Matthews    | Non-Executive Director   |
|                       | Femi Macaulay        | Non-Executive Director   |
|                       | Michael Marsh        | Non-Executive Director   |
|                       | Sharath Ranjan       | Non-Executive Director   |
|                       | Claire Whitaker      | Non-Executive Director, Senior Independent Director            |
|                       | Janice Smith         | Good Governance Institute                                      |
|                       | Truda Scriven        | Interim Company Secretary                                      |
|                       | Katherine Breerton   | Corporate Governance Manager ( <i>minutes</i> )                |

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| <b>CoG001/26</b> | <p><b>Welcome, Introductions, Apologies and Quorum</b></p> <p>Judy Gillow, interim Trust Chair, opened the meeting and welcomed all those present. A particularly warm welcome was extended to our new Governors joining their first Council meeting. The Chair introduced Janice Smith from the Good Governance Institute who would be observing.</p> <p>Apologies had been received from the following governors:</p> <ul style="list-style-type: none"> <li>• Jeremy Scrivens Governor, Christchurch, East Dorset and Rest of England</li> <li>• Steve Dickens Governor, Christchurch, East Dorset and Rest of England</li> <li>• Marie Cleary Governor, Poole and Rest of Dorset</li> <li>• Robert Bufton Governor, Poole and Rest of Dorset</li> </ul> <p>Apologies had also been received from:</p> <ul style="list-style-type: none"> <li>• Tracie Langley, Non-Executive Director</li> <li>• Helena McKeown, Non-Executive Director</li> </ul> |
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|                  | The meeting was declared quorate.  |
| <b>CoG002/26</b> | <p><b>Declarations of Interest</b></p> <p>The Chair invited declarations of interest. No governor had identified any conflict relating to the agenda. The Chair then acknowledged her own and fellow non-executive directors' declarations of interest in relation to the following recommendations from the Nominations, Remuneration and Evaluation Committee (NREC):</p> <ul style="list-style-type: none"> <li>• Judy Gillow: extension to tenure as interim Chair and re-appointment as NED</li> <li>• Claire Whitaker: extension to tenure as interim SID and re-appointment as NED</li> <li>• Michael Marsh: appointment as interim Vice Chair</li> <li>• Sharath Ranjan and Helena McKeown: reappointments as NED</li> </ul> <p>It was agreed that the NEDs would leave the meeting when this agenda item was discussed. No other declarations were made not already recorded in the register.</p>   |
| <b>CoG003/26</b> | <p><b>Notification of any urgent matters or motions</b></p> <p>There were no urgent matters of motions notified.</p>   |
| <b>CoG004/26</b> | <p><b>Minutes of the Council of Governors meeting held on 2 October 2025</b></p> <p>The Council AGREED the minutes of the last meeting as an accurate record.</p>  |
| <b>CoG005/26</b> | <p><b>Matters Arising – Action List</b></p> <p><b>CoG126/25 - Virtual tour</b> - The Chair stated that she would return to the matter once Richard Renaut joined the meeting. (Richard later confirmed that the Communication Team had set this within their workplan to be completed within the next three months). The action would be updated.</p> <p><b>CoG104/25</b> The item relating to the Macmillan Cancer Information team would be reinstated and marked as <i>In Progress</i> as the presentation had not yet been given.</p> <p>All other actions were complete.</p>  |
| <b>CoG006/26</b> | <p><b>Chair's Update</b></p> <p>The Chair congratulated Dr Michael Marsh, Non-Executive Director, on his award as an MBE in the New Year Honours List for services to healthcare and public service. She reflected on the experience of visiting Royal Bournemouth Hospital alongside Siobhan Harrington on Christmas Day. The Chair described the humility, commitment and warmth shown by staff working across clinical and non-clinical areas during the festive period, and extended appreciation to all those who had worked on Christmas Day. The Chair also expressed thanks to the Salvation Army musicians who had visited the wards and contributed significantly to morale, including at the maternity unit where the presence of the band had enhanced the sense of connection to the wider organisation.</p> <p>The Chair noted her recent engagement in an NHS Providers Chairs' Forum. This was important given that NHS England had commissioned the organisation to lead the national review of the future role of NHS Governors. She confirmed that both she and the Lead Governor were linked into national reference groups.</p> <p>The Chair described her engagement with health and safety teams on both sites, participation in the Trust's equality, diversity and inclusion listening events, and continued involvement in maternity listening events. She reported that the Trust had hosted its first Hanukkah celebration in partnership with local community representatives.</p> <p>The Chair concluded by stating that although the Trust was facing significant operational pressure, and would continue to do so through a year of major clinical transformation, she believed that the changes ahead could be turned into an opportunity for Governors to continue to support the Trust effectively</p> <p>The Council of Governors NOTED the Chair's Update.</p> |
| <b>CoG007/26</b> | <p><b>Update from Lead Governor</b></p> <p>Michele Whitehurst reflected on the conclusion of 2025, noting the successful Governors' Christmas lunch and the joy brought by the carol service in the Atrium, in which one governor had performed on saxophone.</p>  |

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|                         | <p>Michele welcomed new and returning Governors and encouraged them to seek support and ask questions while familiarising themselves with the role.</p> <p>Michele thanked the corporate governance team and the Chair for organising the induction programme delivered the previous week. She emphasised the importance of Governors engaging actively with their communities throughout 2026, especially with the significant organisational changes approaching in July 2026 when the new service configuration would take effect. Michele encouraged Governors to maintain visibility, contribute to public understanding, and continue helping to showcase the positive work undertaken by staff, Governors and volunteers across the Trust.</p> <p>The Council of Governors NOTED the Lead Governor's Update.</p>  |
| <p><b>CoG008/26</b></p> | <p><b>Chief Executive's Update</b></p> <p>Siobhan Harrington, Chief Executive, then presented a comprehensive report on operational and strategic matters. She apologised for not be able to attend the induction session due to a previous commitment. She reminded the Council that there were 27 weeks remaining until the scheduled emergency and planned care site separation in July 2026.</p> <p>Siobhan explained that the Trust had entered the period of the year that historically carried the highest operational pressure. She confirmed that, following eight days of sustained pressure, the organisation had moved into business continuity and subsequently into a formal Critical Incident on the preceding Tuesday. Siobhan described a 10% increase in emergency department demand across Dorset and drew attention to the acute bed pressure created by approximately 230 patients with no criteria to reside. She confirmed that UHD had been one of the last trusts in the South West to declare an Critical Incident. Siobhan reported that at midday on the day of the meeting, the Trust had been able to step down from Critical Incident status after achieving improved patient flow. She explained that intensive work had taken place with system partners to secure short-term additional domiciliary care capacity and that a multi-agency discharge event would be convened to review recent pressures and implement sustainable system improvements.</p> <p>Siobhan also updated the Council on the Trust's performance. She indicated that elective performance remained strong and that UHD had achieved the national milestone of having no patients waiting more than 65 weeks at the end of December 2025. She acknowledged ongoing pressure on 52-week waits and described cancer performance as steady but challenging. She noted that the Trust's position in the National Oversight Framework had shifted from 67th to 71st of 134 acute trusts, although the underlying score had changed only marginally from 2.36 to 2.37. She emphasised that the model was highly sensitive and would be refined nationally.</p> <p>On finance, Siobhan reported that the Trust remained on plan but that the pressures of escalation beds, bank and agency staffing and the recent industrial action period created risk for the final quarter. She described the significant underlying deficit position across the Dorset system for 2026/27, estimated at around £130 million, and she briefed the Council on the system-wide work underway to develop a sustainable clinical strategy. She confirmed that the major new build, the Coast Building, remained on track for completion in July 2026 and that communications and engagement with the public and stakeholders would increase significantly over the coming months. She also extended an invitation to Governors to join her at upcoming community engagement events across Dorset.</p> <p>The Chair facilitated a question-and-answer session with Governors, allowing discussion on the national league table methodology, the emergency department pressures, the Trust's approach to discharge planning, the challenges of winter resilience, the long-term benefits of clinical reconfiguration, and the need to maintain staff morale during periods of exceptional operational pressure.</p> <p>Siobhan Harrington responded to questions regarding additional capacity options, the historical use of the Village Hotel for overflow patients, and the limitations associated with repurposing parts of the BEACH Building. She emphasised the primacy of safe staffing and the need to ensure that clinical space was appropriate, sustainable and aligned with workforce capacity.</p> <p>Governors raised points about system shortcomings relating to social care discharge pathways, and the Chief Executive acknowledged the need for strengthened system collaboration. The Council also considered issues such as the experience of emergency staff, the importance of</p> |

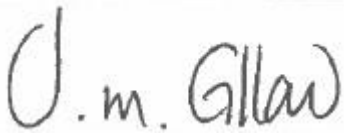
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|                         | <p>listening exercises following the recent pressures, and the value of consistent ward clerk provision.</p> <p>The Council of Governors NOTED the Chief Executive's update.</p>   |
| <p><b>CoG009/26</b></p> | <p><b>Integrated Performance Report</b></p> <p>The Council then reviewed the Integrated Performance Report and assurance reports from the Board's committees. The Chair first invited each non-executive chair and governor observer to comment on the reports.</p> <ul style="list-style-type: none"> <li>• The Audit Committee report was noted, with no questions raised.</li> <li>• The Charitable Funds Committee update was acknowledged, with appreciation expressed for the strong fundraising performance described in the previous Board meeting.</li> <li>• The Finance and Performance Committee had three recent meetings to report. The Governor observer commended the Committee's detailed scrutiny, noting the breadth and depth of financial, operational and performance issues under review.</li> <li>• The People and Culture Committee report was presented, including discussion of appraisal performance, sickness trends, particularly within estates, and the psychological support available to staff. Siobhan Harrington explained that downturns in morale and earlier structural issues had affected sickness absence in certain departments and confirmed that appraisal recovery actions were being implemented.</li> <li>• The Quality Committee reports were received, and the governor observer confirmed that the Committee had scrutinised safety, patient experience, maternity indicators, and several deep dive areas, including older people's services.</li> </ul> <p>The Council acknowledged the cross-cutting nature of some of the challenges discussed across the Board's committees.</p> <p>The Council of Governors NOTED the Board committees' chairs' assurance reports presented by the Non-Executive Directors.</p>   |
| <p><b>CoG010/26</b></p> | <p><b>Board Assurance Framework (six monthly report)</b></p> <p>The Chair presented the Board Assurance Framework for information, explaining its relationship to strategic objectives and corporate risks. She summarised the governance approach and noted that the Audit Committee had reviewed the BAF earlier that morning with further scrutiny, including reflections on how progress against mitigations would translate into measurable improvement over time.</p> <p>The Council of Governors NOTED the Board Assurance Framework.</p>   |
| <p><b>CoG011/26</b></p> | <p><b>Transformation Programme Update</b></p> <p>The Council received an update from Richard Renault on the transformation programme. He outlined progress on the significant construction and service relocation schedule, noting the imminent opening of the Community Diagnostic Centre and Endoscopy Unit at Poole, the commissioning of the new oncology ward in Bournemouth, and the development of the surgical admissions and same-day emergency care facilities.</p> <p>Richard Renault highlighted the July 2026 mobilisation of the COAST Building, which would involve more than 30 departmental moves. He provided reassurance that external specialists had been engaged to provide assurance and logistical support for the move programme. Governors questioned the impact of the works on car parking and accessibility. Richard Renault confirmed that the Trust had purchased additional land at Wessex Fields and as a first step, was actively planning to rebalance staff and patient parking while increasing blue-badge provision.</p> <p>Richard Renault confirmed that the Trust Communications team would update the maternity virtual tour within three months and develop communications highlighting the benefits of new facilities. Richard also confirmed that access through the East Wing entrance would be retained, and the lift access reinstated next to that entrance as part of the COAST programme.</p> <p>The Council raised and discussed current wayfinding challenges. Richard Renault confirmed that a dual-naming approach was being used during transition, with long-term plans for digital wayfinding to support patients and visitors. He also provided reassurance regarding the continuation of the shuttle bus service and ongoing engagement with local transport partners.</p> |

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|                  | The Council of Governors NOTED the Transformation Programme update.   |
| <b>CoG012/26</b> | <p><b>Nominations, Remuneration and Evaluation Committee</b></p> <p><i>Dr Michael Marsh left the meeting</i></p> <p><u>Interim Vice Chair appointment</u></p> <p>Judy Gillow reported that Dr Michael Marsh had been selected as Vice Chair following a formal process, supported by Siobhan Harrington, which had involved several strong candidates. The Chair noted that, if appointed, Michael Marsh’s interim term would align with her own interim tenure as Chair due to uncertainties around future system configuration.</p> <p>The Council of Governors unanimously APPROVED that Dr Michael Marsh be APPOINTED to the role as interim Vice Chair (15 January 2026 – 30 April 2027).</p> <p><i>Judy Gillow, Sharath Ranjan, and Claire Whitaker left the meeting, Michael Marsh returned to the meeting and presided as chair.</i></p> <p><u>NED Reappointments</u></p> <p>Dr Michael Marsh presented a paper in relation to the reappointments of Sharath Ranjan, Judy Gillow, Helena McKeown, and Claire Whitaker each as NEDs for a second term of three years following the NREC recommendation.</p> <p>The Council of Governors unanimously APPROVED the NED reappointments as:</p> <ul style="list-style-type: none"> <li>• Sharath Ranjan for a further three years (1 April 2026 – 31 March 2029)</li> <li>• Judy Gillow for a further three years (1 May 2026 – 30 April 2029)</li> <li>• Helena McKeown for a further three years (1 October 2026 – 30 September 2029)</li> <li>• Claire Whitaker for a further three years (1 October 2026 – 30 September 2029)</li> </ul> <p><u>Interim Chair tenure extension</u></p> <p>Dr Michael Marsh presented the paper in relation to the extension of tenure of Judy Gillow as interim Chair. This was for the period 1 May 2026 to 30 April 2027.</p> <p>The Lead Governor spoke warmly about the inclusive engagement style of Judy Gillow, along with her effective leadership during a period of significant change for the Trust.</p> <p>The Council of Governors unanimously APPROVED that Judy Gillow be extended by one year in her role as interim Chair (1 May 2026 - 30 Apr 2027).</p> <p>Diane Smelt asked why the role continued to be designated as interim. It was explained that this was due to ongoing discussions about the future configuration of NHS providers across Dorset and the potential future move towards a single Chair.</p> <p><u>SID tenure extension</u></p> <p>Dr Michael Marsh presented a paper in relation to the extension of tenure of Claire Whitaker as interim SID, highlighting the importance of the role in supporting the Governors and Board.</p> <p>The Council of Governors unanimously APPROVED the extension of tenure of Claire Whitaker as interim SID (1 May 2026 - 30 April 2027).</p> <p><i>Judy Gillow, Sharah Ranjan, and Claire Whitaker returned to the meeting. Judy Gillow retook the chair.</i></p> <p><u>Chair and NED Performance Review Process</u></p> <p>The Council noted that the Chair and NED appraisal processes was based on national guidance. Planning for NED appraisals was underway, due for completion by the end of April with multi-source feedback. A summary paper on appraisals and objectives was scheduled for May Council of Governors meeting. The Chair’s appraisal would follow the national guidance with outcomes to be reported in May and submitted to NHS England in June. It was confirmed that appraisals for Alastair Matthews and Dr Michael Marsh would be adjusted to reflect their shorter tenure. Governors highlighted the importance of narrative feedback alongside standard forms.</p> <p><u>NREC Membership</u></p> |

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|                  | <p>The Council of Governors was pleased to ELECT Dr Shelley Thompson to a vacancy on NREC for an appointed Governor.</p> <p>The Council noted that one Governor vacancy on NREC remained. Ongoing efforts to attract a candidate from Christchurch were reported. Carrie Stone emphasised that the roles on NREC were important from a governance perspective. Governors were encouraged to put forward expressions of interest to the Corporate Governance team, with an option to observe an NREC meeting before deciding.</p>   |
| <b>CoG013/26</b> | <p><b>Effectiveness Group</b></p> <p>The Effectiveness Group report was presented by Carrie Stone highlighting the Group's focus on induction, elections, benchmarking, and the annual governance self-assessment. Carrie stated that concern had been raised at the recent meeting regarding the pause on board committee governor observers receiving committee papers. The Group invited additional Governors to join following two vacancies.</p> <p>The Council APPROVED the Group's revised terms of reference which set out that the Group should be chaired by a Governor. The Council endorsed the Group's approach to the annual assessment of Council effectiveness and confirmed the ELECTION of Carrie Stone as the Group chair.</p> <p>The Council formally NOTED the election results and welcomed new Governors.</p>   |
| <b>CoG014/26</b> | <p><b>Membership and Engagement Group</b></p> <p>Keith Mitchell presented the report on behalf of the Membership and Engagement Group. He outlined activity with seldom-heard groups, community events, volunteer services, staff feedback, and communications activity across the Trust. Governors raised the longstanding issue of internal transport (the historic "buggy").</p> <p><b>Action:</b> The Chair said that the suggestion for reinstatement would be taken forward.</p> <p>The Council APPROVED the Group's revised terms of reference which set out that the group should be chaired by a governor and its membership increased to eight members, two from each public constituency, one appointed governor and one staff governor: ensuring fair representation. The Council ELECTED Diane Smelt to the group and ELECTED Keith Mitchell as Group chair.</p>  |
| <b>CoG015/26</b> | <p><b>Council of Governors 2026 Meeting Dates</b></p> <p>The Council of Governors 2026 meeting dates were APPROVED.</p>  |
| <b>CoG016/26</b> | <p><b>Council of Governors Cycle of Business 2026/27</b></p> <p>The Council APPROVED the cycle of business, with an additional discussion on ensuring that there was appropriate scheduling for the Governors' response to the Quality Account.</p>  |
| <b>CoG017/26</b> | <p><b>Feedback from Staff and Appointed Governors</b></p> <p>Sue Comrie, Volunteer Governor provided her report to the Council. Volunteer Guiders were adapting to the change to Zones and the introduction of location numbers in RBH. Volunteers continued to provide the Transformation team with feedback from patients and staff and suggestions which were hoped would be considered during this transition period.</p> <p>Volunteers were assisting the charity team with an appeal called 'Do it for the Kids' on 11 February to fundraise for enhancements for our new child health, by making and selling cakes.</p> <p>The staffing situation in the Volunteers office continued to create difficulties.</p> <p>Last year, one of our Poole volunteers, suggested ways that volunteers could be recognised based on the scheme operated by Dorset Police, for whom he also volunteered. This had not been able to be pursued due to the staffing situation in the Volunteers office, which also meant that the usual pre-Christmas get-together had not taken place. A thank you email was sent to all UHD volunteers on 19 December to say that the office was "in the process of organising a gift for you all and will let you know once it's ready to collect". This was still in hand.</p> <p>However, on a positive note, Sue reported that one of our volunteers would shortly be celebrating 25 years as a volunteer at RBH and a small presentation was being planned for her.</p> |

|                  |  |
|------------------|--|
|                  | Sue Comrie was thanked for her report which was NOTED by the Council of Governors.   |
| <b>CoG018/26</b> | <p><b>Any Other Feedback</b></p> <p>The Chair invited any final comments. It was accepted that by having the NED committee chairs' assurance reports ahead of the IPR narrative improved the Council meeting's effectiveness and encouraged more responsive engagement. This was AGREED to continue in the future.</p> <p>Other observations were made that the meeting had also concerned staff psychological support services, volunteer recognition, and the operational pressures facing staff.</p> <p>The Chair thanked all attendees for their contributions and closed the meeting.</p> |
|                  | <b>The next meeting of the Council of Governors would be held on 16 April 2026 at 16:00</b>  |

Signed by



Interim Trust Chair

Approved

| Council of Governors Part 1 Action List - April 2026 |              |   |                                     |          |  |             |
|--|--------------|---|-------------------------------------|----------|--|-------------|
| Minute Ref.  | Meeting Date | Action  | Lead                                | Due Date | Progress   | Status      |
| CoG104/25  | 03/07/2025   | <b>Macmillan Cancer Information Hub:</b><br>To Invite a representative from the Macmillan Cancer Information Hub to give a presentation at a future meeting to address concerns about its impact on local hospice services. | Judy Gillow                         | Apr-26   | from the Macmillan Cancer Information Hub to give a presentation at Council of Governors meeting. Still awaiting a response<br><b>Apr-26:</b> Judy Gillow asked Executive Lead to support the arrangement for thr presentation in the future.  | Complete    |
| CoG126/25  | 02/10/2025   | <b>Virtual tour:</b> To consider recording the virtual tours of maternity unit for future mums  | Jamie Donald<br>Communications Team | Apr-26   | <b>Jan-26:</b> Comms workplan to record a video in next 3 months. There is a video on the website from before the unit opened which will be updated with the new video.<br><b>Mar-26:</b> Maternity has been captured and Comms are working on the technical elements of scanning etc.<br><b>Apr-26:</b> Jamie Donald to share with Governors when editing is complete | Complete    |
| CoG014/26  | 15/01/2026   | <b>RBH Buggy:</b> To review the reinstatement of the internal buggy.  | Richard Renaut                      | Apr-26   | <b>Apr-26:</b> Richard Renaut to give a verbal update at Council of Governors meeting.   | In progress |

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

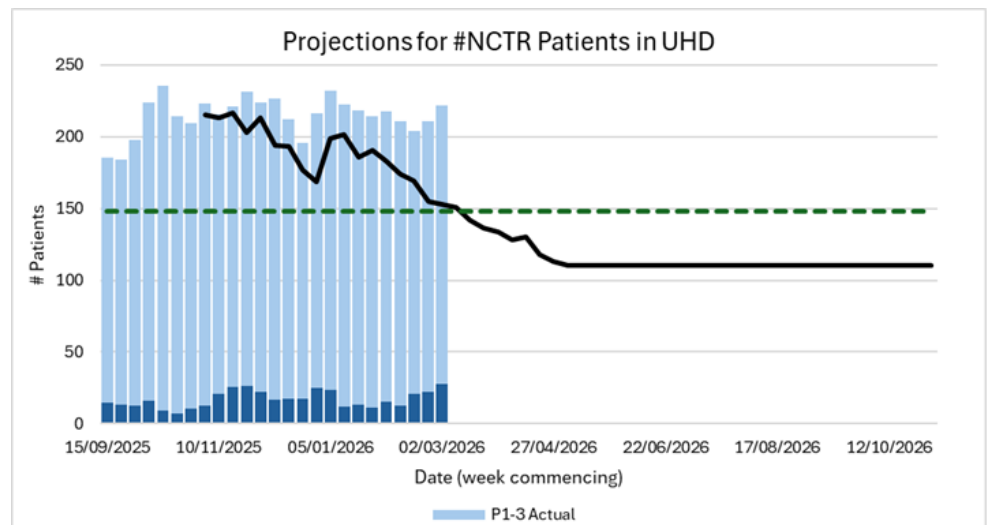
**Agenda item: 6.2**

| COVER SHEET – ALERT, ADVISE, ASSURE                      |  |
|--|--|
| <b>TITLE:</b>  | Integrated Performance Report (Safety, quality, experience, workforce and operational performance)   |
| <b>Prepared by:</b>                                      | Executive Directors, Adam Morris, Mark Major, Judith May, David Mills, Irene Mardon, Jo Sims, Viv Alividza and Adrian Tron.  |
| <b>Presented by:</b>                                     | UHD Chief Officers   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input checked="" type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input checked="" type="checkbox"/><br>Quality Outcomes & Safety <input checked="" type="checkbox"/><br>Sustainable Services <input checked="" type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | BAF Risks 1-7<br>Trust Integrated Performance report for February 2026 - Appendix A  |
| <b>Purpose of paper:</b>                                 | Information  |
| <b>Executive summary:</b>                                | <p><b>Forward Look: Prepared and Focused</b><br/>           Whilst mindful that our winter plans remain in place throughout Feb and March, with our demand forecast indicating ongoing high bed demand, we have started to see several 'green shoots,' emerging.</p> <p>We continue to recognise the prolonged and challenging environment that we operate within and the pressure on colleagues across the Trust.</p> <p>We have a winter plan guided by our Trust strategic deployment reviews and are confident that our focused actions and continued prioritisation will ensure we deliver against our key objectives</p> <p><b>Population &amp; People (2)</b><br/> <i><b>Strategic goal: To meet the national constitutional standards for Planned and Emergency care, supporting reducing inequalities in outcome and access and improving productivity and value.</b></i></p> <p><b>Alert 1: No Criteria to Reside: No Criteria to Reside (NCtR)</b> continues to have no meaningful variation in change despite good complex discharge</p> <p><b>Alert 2: Performance against the 4-hour Organisational standard:</b> The Trust's performance against the 4-hour safety standard outturned 63.8% at month end, failing to meet the improvement trajectory of 72.5%</p> <p><b>Quality Outcomes and Safety (2)</b></p> |

|   |  |
|---|--|
|   | <p><b>To reduce moderate/severe harm patient safety events by 30% through the development of an outstanding learning culture</b></p> <p><b>Alert (1): Clostridioides difficile cases:</b><br/>9 cases of hospital associated C.difficile cases were reported and investigated in February 2026. This is an increase compared to January 2026.</p> <p><b>Alert (2) Methicillin Sensitive Staphylococcus aureus (MSSA) bacteraemia:</b> 5 cases identified in February 2026, an increase of 1 compared to January 2026.</p> <p><b>Patient Experience (1)</b><br/><i>Every team is empowered to make improvements using patient (or user) feedback, in order that all patients at UHD receive quality care, which results in a positive experience for them, their families and/or carers.</i></p> <p><b>Alert (1) - The number of open complaints over 35 days</b> is currently at 62.</p> <p><b>Our People (2)</b><br/><i>Strategic goal: To significantly improve staff experience, engagement, and retention.</i></p> <p><b>Alert (1)</b> As of M11 UHD is not achieving a balanced plan with an adverse variance against wte in M12 (March 2026).</p> <p><b>Alert (2)</b> Appraisals: Number of appraisals completed has not met target compliance</p> <p><b>Sustainable Services – Finance (3)</b><br/><i>Strategic goal: To return to recurrent financial surplus from 2026/27</i></p> <p><b>Alert 1: Revenue Position</b><br/>At the end of February, the Trust reported a deficit of £1.4 million, being an improvement of £1.7 million from the January position and £42,000 better than plan. Good progress continues to be made in relation to planned mitigations, providing confidence that these will deliver the expected benefits by the end of March.</p> <p><b>Alert 2: Efficiency Improvement Programme</b><br/>Efficiency improvement delivery to the end of February is £11.4m behind plan.</p> <p><b>Alert 3: Capital Programme</b><br/>The Trust has reported capital expenditure of £131.5 million, being £15.7 million below plan year to date.</p> |
| <p><u>Population &amp; Systems</u></p> <p>Urgent &amp; Emergency Care</p> | <p><b>Strategic goal: To meet the national constitutional standards for Planned and Emergency care, supporting reducing inequalities in outcome and access and improving productivity and value.</b></p>   |
| <p>Urgent &amp; Emergency Care</p> <p><b>ALERT: 2</b></p>                 | <p><b>Alert (1): No Criteria to Reside:</b><br/>No Criteria to Reside (NCtR) position has shown some improvement throughout February, moving from an average of 232 to 207. This improvement was driven by a reduced length of stay (LOS) across P1 &amp; P2 and reduced number of P0 patients at midnight.</p>  |

- P1 NCTR Length of Stay (LOS) for February has seen a significant decrease in LOS as intermediate care flow has improved.
- P2 NCTR LOS saw a substantial decrease (38%) from January into February as flow through the community and local authority beds improved post-Christmas.
- P3 NCTR LOS saw a substantial decrease of a similar order from January to February.

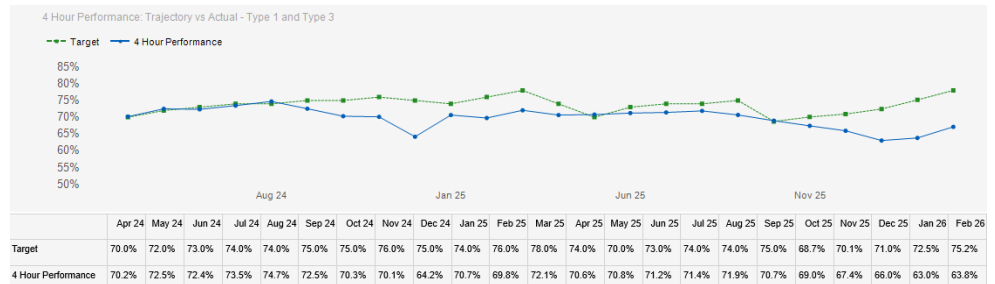
Despite these improvements, the position remains significantly off-plan by about 35, increasing occupancy and impacting flow across emergency pathways.



Ongoing focus on NCTR recovery actions include review of trajectory with four priority areas requiring coordinated effort from all system partners. These include faster decision making following timely referrals, focus on flow through commissioned services and ensuring robust escalation processes within all organisations up to Exec level.

1. **UHD and the Transfer of Care Hubs will** enable faster pathway decision-making by ensuring referrals are submitted immediately once patients are medically fit, and minimising process delays to discharge.
2. **Complex Discharge Pathways commissioned by both Local Authorities and ICB must deliver sufficient throughput across Core P1 and P2.** Within intermediate care, Councils must ensure that assessments and onward planning are completed once discharge ready.
3. **Individual organisations must establish robust escalation processes within their organisations.** This must inform a system-wide escalation process which all organisations fully engage in.
4. **All organisations must ensure that current gaps in out-of-hospital/intermediate care are commissioned.** This will require agreement on the highest priority gaps for immediate care redesign and recommissioning.

**Alert (2): Performance against the 4-hour Organisational standard**  
 The Trust's position against the standard was finalised at 63.8%, failing to meet the improvement trajectory of 75.1%.



The Trust is currently engaged in a national 6-week sprint to recover performance against the 4-hour organisational standard. Actions have been agreed across the UEC pathway involving all Care Groups.

National leads from the 'Getting it Right First,' team were invited to spend two days walking pathways and processes around acute medicine, frailty and Emergency Department. The forthcoming report will form the basis for further improvement and development work across all 3 areas.

An exercise has been undertaken to dis-aggregate the 4-hour safety standard to more effectively measure the specific contribution that all areas make to deliver the 4-hour organisational safety standard. This is in support of the underlying principle that the standard is the business of all. The new metrics will be embedded within the strategic deployment reviews (SDR) as part of the Trust's accountability framework.

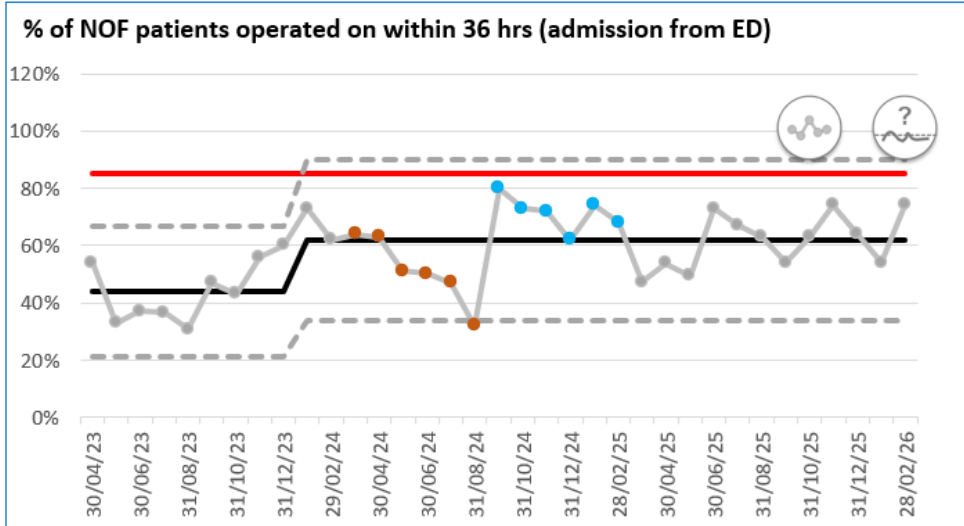
Progress has been noted during the latter part of this reporting period.

**Urgent & Emergency Care**  
**ADVISE: 1**

**Advise (1): Ambulance Performance:**  
 Average handover times showed a slight improvement during February and below the 30 min average. This has not triggered special cause variation and the target remains within process limits.

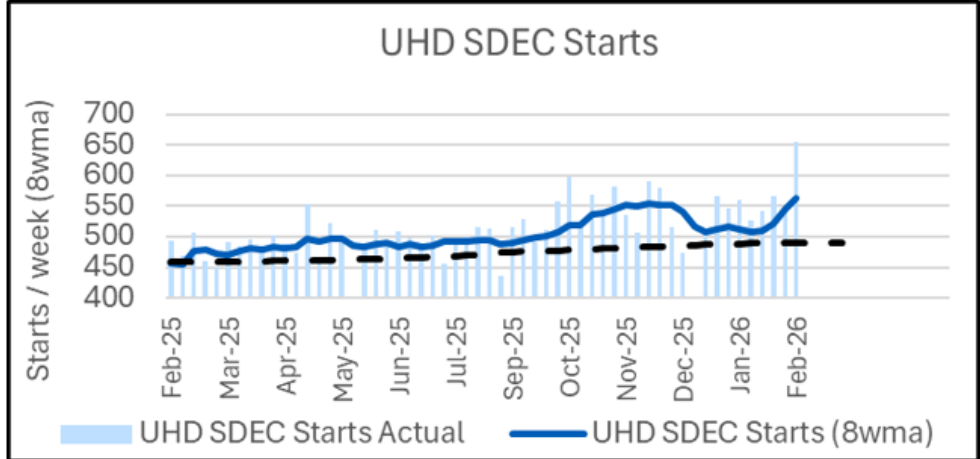
**Urgent & Emergency Care**  
**ASSURE: 1**

**Assure (1): Trauma: February performance for time to theatre for fractured neck of femur (#NoF) patients saw 74% of patients operated on within 36 hours of admission.**  
 Performance in February moved above the process mean and the target continues to fall within the process limits, indicating it is achievable. 94% achieved surgery within 36 hours of being fit for surgery, which is a significant improvement.



**Assure (2): Alternatives to Admission:**

The number of Same Day Emergency Care (SDEC) starts has continued to demonstrate strong performance ahead of the improvement trajectory and increased during the latter part of February, beyond the peak seen in December 2025.



**Population & Systems:**  
Planned Care including Cancer standards

**Strategic goal: To meet the national constitutional standards for Planned and Emergency care, supporting reducing inequalities in outcome and access and improving productivity and value.**

**ALERT: 0**

The are no alerts for planned care or cancer.

**ADVISE: 3**

**Advise (1) Cancer Waiting Times**  
Following a strong position in December position, it was noted in the IPR that January 2026 would be a challenging month for cancer performance. This has been realised and additional actions are in place for February and March to support recovery of the Trust’s position.

Performance against the 28 Day Faster Diagnosis standard for January 2026 was lower than the national standard (75%) and the Trust’s Operational Plan (79.5%). This is driven by Breast and Colorectal capacity challenges

due to staff vacancies. Additional activity to support recovery is scheduled and February's current performance of 79.9% is showing a positive improvement.

The 31 Day standard did not achieve the 96.0% national standard but is expected to recover fully in February and March.

The 62 Day standard did not achieve the Trust operational plan (73.6%) or the national recovery target (75%). This is a key area of focus in March. Recovery actions are in place to support delivery of the March 2026 trajectory, with daily actions supporting breach management.

**Advise (2) 18-week Referral to Treatment (RTT) performance shows an increased variation (1.3%) to the operational plan trajectory.**

A 0.6% improvement in RTT performance was delivered in February compared to January. However, the operational plan trajectory was not met (63.8% versus plan 65.1%). Increased 1<sup>st</sup> outpatient appointments during the Q4 national RTT sprint and reduced waits for a first attendance (74% of patients seen under 18 weeks), enables patients to be placed on the correct pathway or discharged sooner and is expected to have a positive effect on RTT performance in March.

**Advise (3) The % of patient waiting >52 weeks for Community Health (neurodevelopmental) services remains high**

Following discussion with ICB and System partners on agreed interventions to address the increasing waiting list, the Trust has commenced the transfer of the longest waiting children on a neurodevelopmental pathway to local Right to Choose providers for assessment in March 2026. Additional Capacity is being brought online, through the implementation of a Neurodiversity Exploration and Strengths Tool (NEST) led through Dorset Health Care.

The Planned Care Improvement Group has oversight of the improvement projects supporting elective performance.

**ASSURE: 1**

**Assure (1) Elimination of waits on an RTT pathway exceeding 65 weeks was achieved for the third consecutive month and the percentage of >52 week waits as a proportion of the waiting list (1.9%) has also reduced.**

The Trust reported no patients on an active RTT waiting list with a wait over 65 weeks for the third consecutive month in February 2026 and is seeking to maintain this position throughout Quarter 4.

The percentage and actual number of patients waiting >52 weeks is also reducing. NHSE has launched an RTT sprint for Outpatients and 52-week waits in Quarter 4, which has provided additional funding to increase capacity for first OPAs and treatments.

| Planning requirement                      | Jan 26 | February 2026 |   |
|---|--------|---------------|---|
| Referral to treatment 18-week performance | 63.2%  | 63.8%<br>▲    | National standard 92% trajectory 65.1% Feb 2026 |

|  | Eliminate >65 week waits   | 0             | 0                  | 🟢           | Plan trajectory 0 by Feb 2026         |             |     |        |        |     |             |   |  |  |  |
|--|--|---------------|--------------------|-------------|---------------------------------------|-------------|-----|--------|--------|-----|-------------|---|--|--|--|
|  | Reduce >52+ weeks  | 1529          | 1254               | 🟢           | Plan Trajectory 1.1%, 759 by Feb 2026 |             |     |        |        |     |             |   |  |  |  |
|  | Reduce Waiting List size   | 65,960        | 66,134             | 🟡           | Plan Trajectory 67,023 Feb 2026       |             |     |        |        |     |             |   |  |  |  |
|  | Waits for first activity <18 weeks   | 74.0%         | 74.1%              | 🟢           | Plan trajectory 72.2% Feb 2026        |             |     |        |        |     |             |   |  |  |  |
| <b>Celebrating Outstanding:</b>  | The Trust commenced delivery of outpatient procedures at St Mary's Outpatient Assessment Centre in February 2026 to reduce waits for treatments and increase access to one stop appointments.  |               |                    |             |                                       |             |     |        |        |     |             |   |  |  |  |
| <b>Population &amp; Systems</b><br><br><b>Health Inequalities and Primary Prevention</b>       | <p><b>Advise (1) The DM01 (Diagnostic) standard performance was 6.4% of patients waiting more than 6 weeks for a diagnostic test, moving the Trust above the operational planning ambition (5%).</b></p> <p>Standard: No more than 1% of patients should wait more than 6 weeks for a diagnostic test.</p>   |               |                    |             |                                       |             |     |        |        |     |             |   |  |  |  |
| <b>ADVISE: 1</b>   | <table border="1"> <thead> <tr> <th>February 2026</th> <th>Total Waiting List</th> <th>&lt;6 weeks</th> <th>&gt;6 weeks</th> <th>Performance</th> </tr> </thead> <tbody> <tr> <td>UHD</td> <td>11,269</td> <td>10,571</td> <td>725</td> <td><b>6.4%</b></td> </tr> </tbody> </table>   | February 2026 | Total Waiting List | <6 weeks    | >6 weeks                              | Performance | UHD | 11,269 | 10,571 | 725 | <b>6.4%</b> | <p>DM01 (Diagnostics) performance showed further variation against the target at 1.4% above plan (5%) in February. Performance was impacted by reduced outsourcing capacity in Cardiology and Endoscopy and a depleted bookings admission team. Imaging however achieved the national constitutional standard (&lt;1%). Further capacity challenges in March due to urgent estates work, reduced access to insourcing and short notice staff absences (Endoscopy) are placing the March trajectory at risk.</p> |  |  |  |
| February 2026  | Total Waiting List   | <6 weeks      | >6 weeks           | Performance |                                       |             |     |        |        |     |             |   |  |  |  |
| UHD  | 11,269   | 10,571        | 725                | <b>6.4%</b> |                                       |             |     |        |        |     |             |   |  |  |  |
| <b>Celebrating Outstanding:</b>  | Imaging achieved the national constitutional standard (<1%) for DM01.  |               |                    |             |                                       |             |     |        |        |     |             |   |  |  |  |
| <b>Population &amp; Systems</b><br><br><b>Operational Productivity</b><br><br><b>ADVISE: 1</b> | <p><b>Advise (1) Capped theatre utilisation in February was 79.8% remaining below the process mean, however with reduced variation</b></p> <p>Three contributing factors are impacting on this metric in Q4:</p> <ul style="list-style-type: none"> <li>• Hospital flow and an increase in elective cancellations, particularly in relation to Critical Care cases.</li> <li>• Increased emergency theatre activity remains a concern and is also impacting on elective delivery.</li> <li>• In month impact of the 'Heraeus' bone cement supply issue</li> <li>• SSD equipment failures and repairs.</li> </ul> <p>The 4 key actions are:</p> <ul style="list-style-type: none"> <li>• Review of planning for Critical Care cases to enable shadow patients to be available to backfill capacity in the event of cancellations.</li> <li>• Empty theatre sessions converted to additional Emergency theatre lists to support increase in activity and protect elective cases.</li> <li>• Robust list scheduling incorporating 'locking lists' in advance.</li> <li>• Optimisation of pre-operative assessment capacity, including additional insourced capacity during Q4 to support the RTT sprint.</li> </ul> |               |                    |             |                                       |             |     |        |        |     |             |   |  |  |  |

|   |   |
|---|---|
| <p><b>ASSURE: 2</b></p>                         | <p><b>Assure (1) The Trust has delivered 115% (value weighted activity) year to date compared to the same period in 2019/20.</b></p> <p>Elective activity has been maintained above the operational plan trajectory in February (108.8%) despite bed pressures, and there is a high level of confidence in maintaining this position in March 2026.</p> <p><b>Assure (2) The Trust's performance against the British Association of Day Surgery (BADs) day surgery rate (target 85%) improved in the latest reported data (Nov 2025) at 84.2%.</b></p> <p>The latest published data is November 2025, and the Trust is performing at 84.2%, an increase compared to October and a reduction in the gap to the national target. An improvement project working group is in place.</p>  |
| <p><b>Maternity</b></p> <p><b>ADVISE: 1</b></p> | <p><b>Maternity</b></p> <p><b>CQC action plan -</b><br/>Recent inspection in September – draft report reviewed February 2026 – awaiting final report - initial recommendations action plan in place for baby abduction/security and safe staffing rosters.</p> <p><b>These are areas currently identified for focus</b></p> <ul style="list-style-type: none"> <li>• Readmitted babies to hospital within the first 30 days of life- well-being clinic now commenced in November however increase in admissions in December and January.</li> <li>• Postpartum Haemorrhage &gt; 1500mls – 10 incidents equating to 35.97 per 1000 births (national target of 30) – Note: we include all PPH cases not just singleton term cases – Monthly SIM training commenced this month focussed on PPH management.</li> <li>• Apgar score less than 7 at 5 minutes – further rise this month and quality improvement commenced.</li> </ul> <p>Improvement actions are detailed within the IPR.</p> |
| <p><b>Infection Prevention and Control:</b></p> | <p><b>Quality, Safety, &amp; Patient Experience Key Points</b></p> <p><b>Strategic goals: To achieve top 20% of Trusts in the country for mortality (HSMR)</b><br/><b>To reduce moderate/severe harm patient safety events by 30% through the development of an outstanding learning culture</b></p>  |
| <p><b>ALERT: 2</b></p>                          | <ul style="list-style-type: none"> <li>• <b>Alert (1): Clostridioides difficile cases:</b><br/>9 cases of hospital associated <i>C.difficile</i> cases were reported and investigated in February 2026. This is an increase compared to January 2026.</li> <li>• <b>Alert (2) Methicillin Sensitive Staphylococcus aureus (MSSA) bacteraemia:</b> 5 cases identified in February 2026, an increase of 1 compared to January 2026.</li> </ul>  |

**ADVISE: 5**

- **Advise (1) Methicillin Resistant *Staphylococcus aureus* (MRSA) bacteraemia:** 0 cases of hospital associated MRSA bacteraemia in February 2026.
- **Advise (2) *E.coli* bacteraemia:** 5 cases of *E.coli* bacteraemia were identified in February 2026, a reduction compared to January 2026.
- **Advise (3) *Klebsiella* bacteraemia:** 3 cases reported in February 2026, a decrease of one compared to January 2026.
- **Advise (4) *Pseudomonas* bacteraemia:** 2 cases reported in February 2026.

| Organism  | Mar-25 | Apr-25 | May-25 | Jun-25 | Jul-25 | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 |
|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| MRSA      | 2      | 1      | 0      | 0      | 1      | 0      | 0      | 0      | 1      | 0      | 2      | 0      |
| MSSA      | 8      | 4      | 4      | 6      | 2      | 6      | 4      | 5      | 3      | 3      | 4      | 5      |
| C Diff    | 8      | 10     | 11     | 5      | 8      | 13     | 5      | 12     | 10     | 8      | 6      | 9      |
| E Coli    | 19     | 18     | 13     | 14     | 12     | 7      | 3      | 12     | 11     | 11     | 8      | 5      |
| Kleb      | 8      | 3      | 6      | 3      | 4      | 4      | 3      | 2      | 2      | 3      | 4      | 3      |
| Pseudo    | 0      | 3      | 2      | 1      | 2      | 2      | 2      | 4      | 6      | 1      | 0      | 2      |
| Outbreaks | 0      | 0      | 0      | 0      | 0      | 2      | 0      | 0      | 1      | 8      | 12     | 7      |

- **Advise (5): Outbreaks/cohort of infectious disease:**  
7 outbreaks identified in February 2026:  
One Covid-19 outbreaks on Poole site  
Three Norovirus outbreaks on Poole site  
One outbreak of Norovirus **and** Covid-19 on RBH site  
One outbreak of Norovirus on RBH site  
One outbreak of Covid-19 on RBH site

**Clinical Practice Team ALERT: 0**

**Falls prevention & management:**

**ADVISE: 2**

**Advise (1):** Falls remain within the expected range on the SPC chart; however, February 2026 recorded the highest of falls so far, this financial year. February 2026 rate: 8.3 per 1,000 bed days. Twelve inpatient falls resulted in moderate or greater physical harm, equating to 0.4 per 1,000 bed days.

**Advise (2):** Due to clinical pressures and limited management capacity at ward level, 58% of PSIRF falls-related SWARM learning responses from February are outstanding. These have been rescheduled for completion in March 2026.

**ASSURE: 1**

**Assure (1): Fundamentals of Care Safer Activity** launch started in March 2026, promoting appropriate footwear, and highlighting the importance of movement for recovery.

**Patient Experience**

**Strategic goal: Every team is empowered to make improvements using patient (or user) feedback, in order that all patients at UHD receive quality care, which results in a positive experience for them, their families and/or carers.**

**Patient Experience and Engagement Team Overview:**

**Patient Experience (inc. PALS and Complaints) performance February 2026.**

|                                     |   |
|-------------------------------------|---|
| <b>ALERT: 1</b>                     | <b>Alert (1) - The number of open complaints over 35 days</b> is currently at 62. The complaints team continue to prioritise, with further measures to reduce the number of outstanding complaints in place and developing SOPs to ensure efficient processes within the service.   |
| <b>ADVISE: 2</b>                    | <p><b>Advise (1) - Average complaint response timescale</b> February 2026 was a 40.61 working day average for a final response (January 2026 = 41.37)</p> <p><b>Advise (2) – Contributors to the final response letter will be asked to include the learning from the complaint in the response.</b> This will help ensure that learning is captured and will enable the contributors to focus on what can be done to make improvements.</p>  |
| <b>ASSURE: 2</b>                    | <p><b>Assure (1) – Complaints are kept up to date.</b> All complainants are kept up to date regarding any delays in the complaint investigation and response.</p> <p><b>Assure (2) - new process for contributors to provide input started 09 March 2026.</b> Contributors will be asked to add the requested input directly into a final response template letter. This will help focus on the questions being asked.</p>  |
| <b>Nurse Staffing:<br/>ALERT: 0</b> |   |
| <b>ADVISE: 2</b>                    | <p><b>Care Hours per Patient Day (CHPPD):</b><br/> <b>Advise (1)</b> February 2026 CHPPD remained stable at 4.6 for Registered Nurses/Midwives combined. There was a slight reduction in all Registered and non-registered care staff of 0.3hrs CHPPD for February 2026 to 7.6 CHPPD.</p> <p>The overall percentage rota fill rate against planned staffing (day and night all nursing/care staff) was 92.6%. This is a slight reduction from January 2026 which stood at 94.8%.</p> <p><b>Red Flag Reporting:</b><br/> <b>Advise (2)</b> There has been an increase in the occurrence of Red Flags in February.</p> <p>29 Red Flags on Adult inpatient wards for February 2026. 58.8% (17) are due to Patient at Risk as unable to provide Enhanced Care”, 20.6% (6) due to Omission of fundamental care, 13.7% (4) due to RN shortfall of more than 8 hours or 25% versus shift demand and 3.45% (1) due to delay in providing planned medication or pain relief and 3.45% (1) occurred in Emergency Department for Pre-Shift less than 25% of the workforce on duty.</p> |
| <b>ASSURE: 1</b>                    | <p><b>Workforce Controls:</b><br/> <b>Assure (1)</b> Red flags are reviewed by Matrons and data is triangulated with other quality and safety information in preparation for unannounced assurance visits to in-patient wards.<br/> Monthly review of Open Red flags by Senior Nursing staff within the Workforce Assurance group.</p>  |
| <b>Workforce Performance:</b>       | <b>Strategic goal: To significantly improve staff experience, engagement, and retention.</b>  |

|                                     |   |
|-------------------------------------|---|
| <b>ALERT:1</b>                      | <p><b>Alert (1)</b> As of M11 UHD is not achieving a balanced plan with an adverse variance against wte in M12 (March 2026) .</p> <ul style="list-style-type: none"> <li>• In M11 UHD total workforce was 190.16 whole time equivalent (wte) adverse variance to in month plan. Against M12 plan, the adverse variance is 201.44 wte</li> <li>• M11 substantive workforce: adverse variance of 192.40 wte to in month plan and and M12 plan</li> <li>• Actual bank use against M12 plan shows an adverse variance of 67.78 wte</li> </ul> |
| <b>ADVISE:1</b>                     | <p><b>Advise (1)</b> A programme manager is currently being recruited to support the 'Workforce Operational Efficiency and Reduction plan'.</p>   |
| <b>ASSURE:1</b>                     | <p><b>Assure (1)</b> Agency usage reduced in M11 to 57.92wte, against an in-month plan of 128wte. Agency use shows a favourable variance of 58.82wte against M12 plan.</p>  |
| <b>Celebrating Outstanding:</b>     | <p>Agency usage has been under plan for the past 11 months. Following a directive from NHSE to cease use of Band 2/3 agency by 31 January 2026, the use of Band 2/3 agency has reduced to 1.04wte in M11.</p>   |
| <b>Resourcing:</b>                  |   |
| <b>ALERT: 0</b>                     |   |
| <b>ADVISE:1</b>                     | <p><b>Advise (1) The Admin and Clerical (A&amp;C) Transfer Window (TW)</b> remains embedded as the default route for all A&amp;C permanent vacancies, with continued growth in the talent pool and sustained engagement from colleagues. Use of the TW is becoming more consistent across services, supported by refreshed guidance and ongoing recruitment advice to hiring managers. Additional targeted hiring manager support is being developed as the process continues to mature.</p>  |
| <b>ASSURE: 1</b>                    | <p><b>Assure (1)</b> The Recruitment service continues to implement targeted Time to Hire improvements, including streamlining candidate journey steps and reducing delays.</p> <p>Newly developed Recruitment Service Level Agreements (SLA's) defining expectations and operational accountability were approved at the March's People and Culture Committee.</p>   |
| <b>Organisational Development :</b> |   |
| <b>ALERT: 1</b>                     | <p><b>Alert (1)</b> Appraisals: Number of appraisals completed has not met target compliance</p> <ul style="list-style-type: none"> <li>• Values based appraisal compliance has failed to hit 90% target rate over past 11 months and is at 78.2% for M11</li> <li>• Medical and Dental appraisal compliance has failed to hit 90% target rate over past 11 months and is at 84.4% for M11</li> </ul>   |
| <b>ADVISE:1</b>                     | <p><b>Advise (1)</b> Appraisals has been confirmed as a Trust-wide improvement project for 26-27</p>  |
| <b>ASSURE: 0</b>                    |   |
| <b>HR Operations:</b>               |   |
| <b>ALERT: 0, ADVISE:0</b>           | <p>No areas for Alert or Advise</p>   |
| <b>ASSURE: 1</b>                    | <p>All Trusts must demonstrate progress to achieve 4.10% sickness absence rate by March 2027. Trajectory in place from March 2026. As of February 2026, the Trust's sickness absence rate is 4.9% which</p>   |

is 0.2% above the March 2026 trajectory. A range of targeted actions are underway to support improvement, including enhanced focus on the areas with the highest absence levels, strengthened management oversight and line manager training, together with earlier actions through HR, Psychological/Occupational health and musculoskeletal interventions.

|  | Forecast<br>outturn year<br>ending<br>31/03/2026 | 2026/27 Plan |       |       |       |       |       |       |       |       |       |       |       |
|--|--|--------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
|  |  | M01          | M02   | M03   | M04   | M05   | M06   | M07   | M08   | M09   | M10   | M11   | M12   |
| Sickness Absence<br>rate %<br>(total substantive<br>workforce) | 4.70%  | 4.70%        | 4.70% | 4.60% | 4.60% | 4.50% | 4.40% | 4.30% | 4.30% | 4.30% | 4.20% | 4.20% | 4.10% |

**Trust Finance  
Position**

**Strategic goal: To return to recurrent financial surplus from 2026/27**

**ALERT: 3**

**Alert (1): Revenue Position**

At the end of February, the Trust reported a deficit of £1.4 million, being an improvement of £1.7 million from the January position and £42,000 better than plan. Good progress continues to be made in relation to planned mitigations, providing confidence that these will deliver the expected benefits by the end of March.

**Alert (2): Efficiency Improvement Programme**

Efficiency improvement delivery to the end of February is £11.4m million behind plan. The trust has identified savings opportunities of £55.0 million, however when adjusted to reflect the risk of delivery in year, this is reduced to £54.8 million. This risk adjusted shortfall has been factored into the forecast outturn noted above.

However the recurrent savings shortfall results in a significant underlying deficit, which places significant pressure (£36.1 million) on the 2026/27 financial plan.

**Alert (3): Capital Programme**

The Trust has reported capital expenditure of £131.5 million, being £15.7 million below plan year to date. The reprofiling request for STPW1 funding has been confirmed by NHSE and we are therefore forecasting delivery of the programme within the capital funding envelope

**ADVISE: 1**

**Advise (1): Cash**

As at February the Trust is holding a consolidated cash balance of £160.3 million which is fully committed against the Trust's reconfiguration programme. This current balance represents 64 days of operating expenditure. The underlying operational cash balance, removing PDC draws received in February due to the NHSE draw cut off for the year, relating to capital spend in March, is £63.4 million or 26 days of operating expenditure. Cash balance will reduce in March as this spend occurs.

**ASSURE: 1**

**Assure (1): Public Sector Payment Policy**

In relation to the timely payment of supplier invoices, the Trust is currently delivering performance of 95.5%, ahead of the national standard of 95%.

|  |  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
|--|--|----------------------|--------------------------|------------------------------|--------------------------|---|-------------------------------------|-----------|-------------------------------------|---------------------|-------------------------------------|-------------------------|-------------------------------------|------------------------------|--------------------------|---------------------|--------------------------|---------|-------------------------------------|------------|-------------------------------------|-------------------------|-------------------------------------|--------|-------------------------------------|
|  |  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| <b>Sustainable Services<br/>ALERT: 0</b>       | <b>Digital</b>   |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| <b>ADVISE: 1</b>                               | <p><b>Advise (1) The rate of Advice and guidance requests per 100 first attendances demonstrate significant improvement however the target sits outside the current process control limits</b></p> <p>A task and finish group involving clinical and operational leads supporting the development of a standard operating procedure for Advice and Guidance pathways and the roll out of the use of the Consultant Connect solution. The roll out continues with five more specialties moving live on the 16<sup>th</sup> March leaving seven to be completed within the next two months.</p>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| <b>ASSURE: 2</b>                               | <p><b>Assure (1) Did not attend or missed appointment rates are above the Trust's 5% target at 5.4%.</b></p> <p>DNA rates (5.4%) is demonstrating normal variation but fell below the process mean in February for the second consecutive month. The Trust continues to expand its use of DrDoctor to support patient self-management of appointments.</p> <p><b>Assure (2) ICE for Ordering vs paper - agreed locations to move paperless during March and feedback.</b></p> <p>The Task and Finish group continues to work up the Trustwide roll out plan with the new equipment to support this ordered and awaiting delivery. The remaining pilot areas are moving paperless next week with a weekly review of issues. The add on form is now live Trust wide for Pathology tests. Pathology reporting is now paperless, and 60% of Radiology is paperless currently.</p>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| <b>RECOMMENDATION:</b>                         | Members are asked to note the content of the report.   |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| <b>Implications associated with this item:</b> | <table border="0"> <tr><td>Council of Governors</td><td><input type="checkbox"/></td></tr> <tr><td>Environmental Sustainability</td><td><input type="checkbox"/></td></tr> <tr><td>Equality, Equity, Diversity &amp; Inclusion</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Financial</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Health Inequalities</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Operational Performance</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>People (inc Staff, Patients)</td><td><input type="checkbox"/></td></tr> <tr><td>Public Consultation</td><td><input type="checkbox"/></td></tr> <tr><td>Quality</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Regulatory</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Strategy/Transformation</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>System</td><td><input checked="" type="checkbox"/></td></tr> </table> | Council of Governors | <input type="checkbox"/> | Environmental Sustainability | <input type="checkbox"/> | Equality, Equity, Diversity & Inclusion | <input checked="" type="checkbox"/> | Financial | <input checked="" type="checkbox"/> | Health Inequalities | <input checked="" type="checkbox"/> | Operational Performance | <input checked="" type="checkbox"/> | People (inc Staff, Patients) | <input type="checkbox"/> | Public Consultation | <input type="checkbox"/> | Quality | <input checked="" type="checkbox"/> | Regulatory | <input checked="" type="checkbox"/> | Strategy/Transformation | <input checked="" type="checkbox"/> | System | <input checked="" type="checkbox"/> |
| Council of Governors                           | <input type="checkbox"/>   |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Environmental Sustainability                   | <input type="checkbox"/>   |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Equality, Equity, Diversity & Inclusion        | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Financial                                      | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Health Inequalities                            | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Operational Performance                        | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| People (inc Staff, Patients)                   | <input type="checkbox"/>   |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Public Consultation                            | <input type="checkbox"/>   |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Quality  | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Regulatory                                     | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| Strategy/Transformation                        | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |
| System   | <input checked="" type="checkbox"/>  |                      |                          |                              |                          |   |                                     |           |                                     |                     |                                     |                         |                                     |                              |                          |                     |                          |         |                                     |            |                                     |                         |                                     |        |                                     |

|                                  |                  |                                     |
|----------------------------------|------------------|-------------------------------------|
| <b>CQC Assessment Framework:</b> | Safe             | <input checked="" type="checkbox"/> |
|                                  | Effective        | <input checked="" type="checkbox"/> |
|                                  | Caring           | <input checked="" type="checkbox"/> |
|                                  | Responsive       | <input checked="" type="checkbox"/> |
|                                  | Well-Led         | <input checked="" type="checkbox"/> |
|                                  | Use of Resources | <input checked="" type="checkbox"/> |

| Report History:<br>Committees/Meetings at which the item has been considered:  | Date                       | Outcome                  |
|--|----------------------------|--------------------------|
| Finance & Performance Committee (Operational / Finance Performance)  | 06/04/2026                 | Pending                  |
| Trust Management Group   | 23/04/2026                 | Pending                  |
| Quality Committee  | 07/04/2026                 | Pending                  |
| <b>Reason for submission to the Board (or, as applicable, Council of Governors) in Private Only (where relevant)</b> | Commercial confidentiality | <input type="checkbox"/> |
|  | Patient confidentiality    | <input type="checkbox"/> |
|  | Staff confidentiality      | <input type="checkbox"/> |
|  | Other exceptional reason   | <input type="checkbox"/> |

## BOARD OF DIRECTORS - PART 1 MEETING

Meeting Date: 11 March 2026

| ESCALATION and ASSURANCE REPORT – Alert, Advise, Assure |  |
|---|--|
| <b>Report from:</b>                                     | Charitable Funds Committee – Chair’s Report  |
| <b>Presented by:</b>                                    | Femi Macaulay, Chair of the Charitable Funds Committee   |
| <b>Agenda items discussed:</b>                          | <p>At its meeting held on <b>16 February 2026</b>, the Committee received reports on the following:</p> <ul style="list-style-type: none"> <li>• Investment Update</li> <li>• Finance Report – Q3</li> <li>• Fundraising Report – Q3</li> <li>• Fundraising Strategy</li> <li>• Fundraising Policies</li> <li>• Committee’s Terms of Reference</li> <li>• Committee’s Governance Cycle</li> <li>• Risk Register</li> </ul> <p>In addition, the Committee received various proposals and business cases for approval and three business cases for recommendation to Board to approve.</p>   |
| <b>ALERT</b>  | There is nothing to alert the Board.   |
| <b>ASSURE</b>   | <ol style="list-style-type: none"> <li>1. The charity’s financial performance is excellent, with a total income of £3.4 million to the end of the 3<sup>rd</sup> quarter against a plan of £2.7 million, a positive variance of £0.7 million. The charity is on track to raise more than £4 million for the full financial year 2025-2026.</li> <li>2. Given the healthy balance of total charity funds (£19 million as of 31<sup>st</sup> Dec 2025) it is reassuring to see that the number of charity funding applications have increased along with the amounts being requested. The Charitable Funds Committee is reviewing the fundraising and spending strategy to ensure that the initiatives that have the biggest impact on improving patient care and staff experience are prioritised.</li> <li>3. The Committee wishes to assure the Board that while onsite lottery canvassing was approved (within the scope of the Board’s 2024 decision to establish a UHD lottery), we remain acutely mindful of the ethical sensitivities of fundraising within a hospital environment. Robust safeguards are in place, including the use of fully regulated providers, strict adherence to the Code of Fundraising Practice and Gambling Commission requirements, and hospital-specific protocols to protect patients, relatives and staff in vulnerable circumstances. The Committee will maintain rigorous oversight, with defined KPIs, regular reviews, and the ability to pause or amend activity should any ethical, reputational or</li> </ol> |

|                                |  |
|--------------------------------|--|
|                                | operational concerns arise, ensuring the lottery is managed responsibly and in keeping with the values of University Hospitals Dorset NHS Charity.   |
| <b>ADVISE</b>                  | <p>The Charitable Funds Committee wishes to advise the Board that:</p> <ul style="list-style-type: none"> <li>The Charitable Funds Committee recommends that the Board approve funding for <i>Return to Wellbeing</i>, an 18-month, evidence-based rehabilitation programme to reduce long-term sickness absence related to stress and mental ill-health. The £309,884 non-recurrent investment is primarily staffing-based, funding a defined multidisciplinary team and programme delivery, evaluation and sustainability planning, with costs fully scoped, time-limited and including a 5% contingency. Additional in-kind support from the Psychological Support and Counselling Service enhances value for money. Given the current £3.28m annual cost of stress-related absence, even modest reductions would offset the investment, with a realistic prospect of positive return.</li> </ul> |
| <b>Review of Risks</b>         | Review of the charity risk register did not show any major risks.  |
| <b>Celebrating Outstanding</b> | N/A  |

**BOARD OF DIRECTORS - PART 1 MEETING**

**Meeting Date: 11 March 2026**

| <b>ESCALATION and ASSURANCE REPORT – Alert, Assure, Advise</b> |   |
|--|---|
| <b>Report from:</b>  | Finance and Performance Committee – Chair’s Report  |
| <b>Presented by:</b>   | Alastair Matthews, Chair of the Finance and Performance Committee.  |
| <b>Agenda items discussed:</b>                                 | <p>At its meeting held on <b>2 March 2026</b>, the Committee received reports on the following:</p> <ul style="list-style-type: none"> <li>• 2025/26 Financial Performance Month 10</li> <li>• Efficiency Improvement Programme</li> <li>• Key Areas of Judgment and Estimation within the Annual Accounts</li> <li>• Going Concern</li> <li>• Operational Budget</li> <li>• New Hospitals Programme: Cashflow and Contract</li> <li>• STP Wave 1, and BEACH building project out turn report</li> <li>• Operational Performance Month 10</li> <li>• HealthSet Programme and EPR Stability</li> <li>• Private Patients update</li> </ul> <p>The Committee recommend the Board approve the following:</p> <ul style="list-style-type: none"> <li>• 3<sup>rd</sup> Surgical Robot business case</li> <li>• Laproscopic energy devices &amp; consumables contract</li> <li>• Committee’s Terms of Reference</li> </ul> <p>The Committee approved:</p> <ul style="list-style-type: none"> <li>• EPR Graphnet extension contract</li> </ul>    |
| <b>ALERT</b>   | <p>(1) Emergency Department performance continues to be a significant concern with 4 hour performance having fallen every month for the last 6 months and with a widening of the gap between the revised agreed trajectory and actual for the last 4 months. Various internal and external reviews have been undertaken and action plans developed/reports awaited. However, as yet those actions have not been effective in addressing the overall performance. With the planned transformation in the Summer to a single ED at RBH this is an increasing concern.</p> <p>(2) The level of No Criteria to Reside bed occupancy also continues to be a significant concern. There are actions being taken across the health and care system to help address this but the level remains well above 200 beds, making the trajectory needed to reduce this to 140 by mid 2026 look more and more challenging.</p> <p>(3) The Trust will fall c£36m short of its recurrent savings target for 2025/6 which has resulted in the need for a</p> |

|                                |  |
|--------------------------------|--|
|                                | <p>very high level savings requirement for 2026/7 in order to deliver a breakeven plan.</p>  |
| <b>ASSURE</b>                  | <p>(1) The Trust remains in line with the financial plan at January 2026. Whilst there continue to be significant operational and directly related financial pressures the Trust has identified mitigations delivery of which are expected to offset the financial risk and enable the Trust to end the year at the planned breakeven position.</p> <p>(2) Progress has been made towards finalising the operation plan for 2026/7. F&amp;PC has requested that the Care Group sign-offs include the operational as well as financial plans. There remain a number of allocations that will need to be made to the Care Group plans in the first quarter of the year and the CFO will progress these and update F&amp;PC once completed. The key risks identified were: (1) the level of efficiency requirement; (2) the requirement to reduce the NCTR level to 140; (3) a new contractual requirement to significantly improve the timeliness of coding of activity; (4) the risk that UEC activity will significantly exceed the commissioned level; and (5) there is a high level of operational productivity improvement in the plan. FPC reviewed the mitigations and will continue to focus on these as we move into the financial new year.</p>  |
| <b>ADVISE</b>                  | <p>(1) Having the new wards (COAST) available to the Trust in early June is a critical enabler to delivering the major transformation planned July/August 2026.</p> <p>(2) The recently submitted 2026/27 Operating Plan includes an efficiency requirement of £69m. This will be challenging in a year when there is major transformational activity planned, including the move to make RBH the Emergency Care site and Poole the Planned Care site. At this stage many of the identified schemes are at an early stage of development and there remain £21m yet to be identified. The rapid identification and progression of these schemes to deliver early in the new financial year will be critical to underpin delivery of the plan. F&amp;PC will be tracking this closely, looking to understand how the forecast monthly delivery of the developing plans matches the monthly delivery profile in the plan, noting that there is a significant increase in that profile for the second half of 2026/27.</p> <p>(3) The Committee were briefed on c£3m of funding being made available at short notice by NHSE to provide a new discharge facility at RBH. Due to the timing this case will come direct to the Board at its March meeting.</p> |
| <b>Review of Risks</b>         | <p>(1) The Committee reviewed the aspects of the Risk Register relevant to its terms of reference.</p>   |
| <b>Celebrating Outstanding</b> | <p>(1) The Committee noted that whilst performance in UEC remained very challenging there were a large number of areas where performance if strong, including the cancer targets, diagnostics and several aspects of the waiting lists.</p>  |

**BOARD OF DIRECTORS - PART 1 MEETING**

**Meeting Date: 11 March 2026**

| ESCALATION and ASSURANCE REPORT – Alert, Assure, Advise |  |
|---|--|
| <b>Report from:</b>                                     | People and Culture Committee – Chair’s Report  |
| <b>Presented by:</b>                                    | Sharath Ranjan, Chair of the People and Culture Committee  |
| <b>Agenda items discussed:</b>                          | <p>At its meeting on <b>2 March 2026</b>, The Committee received the following:</p> <ul style="list-style-type: none"> <li>• Chief People Officer’s Report, including: <ul style="list-style-type: none"> <li>○ Dorset Provider Collaborative</li> <li>○ ICS System Collaboration</li> </ul> </li> <li>• Board Assurance Framework and People and Culture risk register</li> <li>• Integrated Performance Report – People Breakthrough Objective</li> <li>• People and Culture SLA &amp; KPI: <ul style="list-style-type: none"> <li>○ Occupational Health</li> <li>○ Recruitment</li> </ul> </li> <li>• People service improvement projects: <ul style="list-style-type: none"> <li>○ Band 5 Nurses</li> <li>○ On call</li> </ul> </li> <li>• Audit and fraud report action plans</li> <li>• Communications: a well-informed workforce</li> <li>• Workforce Operational Efficiency and Reduction Plan (WORP)</li> <li>• Guardian of Safe Working Hours</li> <li>• Resident Doctors Plan</li> <li>• Gender Pay Gap</li> <li>• Safe staffing: Maternity</li> <li>• Freedom to Speak Up Report</li> <li>• Staff Survey Report</li> <li>• Committee Terms of Reference</li> <li>• Committee Governance Cycle</li> <li>• HR policies</li> <li>• People and Culture Group Escalation Report</li> <li>• Health and Safety Group Escalation Report</li> <li>• Mandatory Learning Oversight Group Escalation Report</li> </ul> |
| <b>ALERT</b>  | <p>The Committee wishes to alert members of the Board that:</p> <p><b>Sickness across UHD</b></p> <p>UHD has continued to experience increased sickness rates, remaining above the upper control limit for the past four months. While seasonal fluctuations are expected, current data shows a</p>  |

|               |  |
|---------------|--|
|               | <p>sustained level of sickness compared with previous years. The top three causes are anxiety, stress, depression and other psychiatric illness; back problems; and other musculoskeletal (MSK) issues.</p> <p>The committee discussed this in detail and reviewed the findings from the Staff Survey, which provided insight into potential contributory factors. Care Groups are examining this through the A3 lens and are working through prioritised sickness cases with HR support. A range of actions including upskilling line managers, improving clarity around policies, developing SLAs for Occupational Health, utilising tools to address work-related stress, and strengthening the management of sickness absence are contributing to improvements.</p> <p>Some of these approaches have already resulted in positive reductions, including in Maternity where sickness decreased from 7.8% in December to 5.3% in January. The committee will continue to monitor and review the position.</p> <p><b>Workforce Operational Efficiency and Reduction Plan</b></p> <p>As of M10 UHD is not achieving a balanced plan with an adverse variance against M12 (March 2026) plan:</p> <ul style="list-style-type: none"> <li>• Total WTE: 173.29</li> <li>• Substantive WTE: 215.89</li> <li>• Bank WTE: -9.09</li> <li>• Agency WTE: -33.51</li> </ul> <p>There is limited assurance UHD will achieve the reduction plan – which is symptomatic of the current operational position aligned to winter pressures, no criteria to reside, industrial action, higher than expected front door demand, additional elective activity to meet targets and opening of escalations beds.</p> <p>Additionally, there is an increasing volume of A&amp;C vacancies being brought through the Trust Vacancy Review Panel creating pressure against delivery of agreed A&amp;C workforce reduction targets.</p> |
| <b>ASSURE</b> | <p>The Committee wishes to assure members of the Board that:</p> <p><b>Internal Communications Channels and Engagement</b></p> <p>The committee received assurance from James Donald regarding the effectiveness of internal communications channels and the plans to improve engagement across UHD. The scale of reach and the number of initiatives supported by the team are impressive. The UHD App is a standout product, downloaded by more than 9,000 users, and is due for an agreed upgrade that will further enhance the user experience and engagement.</p>   |
| <b>ADVISE</b> | <p>The Committee wishes to advise the Board that:</p>  |

|                                       |   |
|---------------------------------------|---|
|                                       | <p><b>Appraisals – Completion and Quality</b></p> <p>The committee has noted improvements to the appraisal completion rate and were reassured about plans to address this using the A3 approach.</p> <p><b>People Service Improvement Project – Band 5 Nurses</b></p> <p>Following the recent letter from Jo Lenaghan, Director General for People at NHS England and DHSC (Interim), regarding <i>Actions to deliver the Agenda for Change uplift and a fairer deal for nurses</i>, the committee received a verbal update on the ongoing collaborative work with the Trust Partnership Forum to progress this programme. A more detailed progress update will be presented to the committee in May. There remains a significant scale of work required to ensure completion by the summer, and the Board is reminded of its responsibility for overseeing the implementation and management of the Agenda for Change (AfC) system.</p> <p><b>Safe Staffing – Maternity and Guardian of Safe Working Hours</b></p> <p>The committee reviewed both these reports, and it will be presented at the Board meeting for further discussion. There were no items for escalation noted on these reports. Rachael Ford has now taken on the role of Guardian of Safe Working Hours from Paul Froggatt. The committee noted its thanks to Paul for his dedication to this role.</p> |
| <p><b>Review of Risks</b></p>         | <p>The committee reviewed the risks currently on the register, with discussion focused on Risk 1202 – <i>Understaffing in the Obstetrics and Gynaecology medical rota</i> (score 12). Lorraine Tonge provided an update on the actions undertaken to date and highlighted the gaps that still need to be addressed.</p> <p>The committee recognised that people-related risk - specifically those linked to the People function are not yet fully articulated or presented within the risk register. Two new risks were referenced: <i>Capacity and skills within the Temporary Staffing Team</i> (score 12) and <i>WTE staffing controls and Workforce Plan</i> (score 12). These risks were not included in the circulated papers and will be reviewed and discussed at future meetings.</p>  |
| <p><b>Celebrating Outstanding</b></p> | <p>None to be raised from this meeting.</p>   |

## BOARD OF DIRECTORS - PART 1 MEETING

Meeting Date: 11 March 2026

| ESCALATION and ASSURANCE REPORT – Alert, Assure, Advise |  |
|---|--|
| <b>Report from:</b>                                     | Quality Committee – Chair’s Report   |
| <b>Presented by:</b>                                    | Michael Marsh, Chair of the Quality Committee  |
| <b>Agenda items discussed:</b>                          | <p>At its meeting held on <b>3 March 2026</b>, the Committee received the following:</p> <ul style="list-style-type: none"> <li>• Service Deep Dive: Intensive Care Unit</li> <li>• Risk Register: risks rated 12 – 25 (Quality &amp; Safety)</li> <li>• Integrated Performance Report</li> <li>• Antimicrobial resistance</li> <li>• Maternity and Neonatal Safety Champions Report:</li> <li>• Safeguarding Report</li> <li>• Complaints and Patients Experience Report</li> <li>• Terms of Reference</li> <li>• Governance Cycle</li> <li>• Report from the Clinical Governance Group</li> </ul>  |
| <b>ALERT</b>  | <p>The Committee wishes to alert members of the Board that:</p> <ul style="list-style-type: none"> <li>• A high number of critical care patients are on Non-Invasive Ventilation (NIV), and the care could be better provided in a different facility. Split site working provides some challenges including to elective surgical activity. The service requests that critical care discharges are given priority by wards.</li> </ul>   |
| <b>ASSURE</b>   | <p>The Committee wishes to assure members of the Board that:</p> <ul style="list-style-type: none"> <li>• The medical and nurse lead for critical care presented data supporting that the service is of high quality overall with good risk adjusted mortality (12-14%) statistics. The ICNARC quality indicator board is largely positive with exception of unplanned readmissions.</li> <li>• The integrated performance report was scrutinised and NCTR remains a real challenge with over 200 patients. The 4-hour target continues to deteriorate. There have been 2 new MRSA cases.</li> <li>• The HSMR has risen marginally for the 3<sup>rd</sup> consecutive month so a review on cases and coding has been started. The SHMI remains below expected at 0.87. An audit of practice against the Learning from Deaths Policy has commenced.</li> <li>• There is evidence that UHD has good practice in relation to use of antimicrobials, performing well against national</li> </ul> |

|                                |  |
|--------------------------------|--|
|                                | <p>targets (total use of antibiotics and use of broad-spectrum antibiotics). Though future targets are not yet known, UHD is in a good position to achieve the likely ambition.</p> <ul style="list-style-type: none"> <li>• Maternity and neonatal data was reviewed as usual and no concerns were raised.</li> <li>• The quarterly safeguarding report was reviewed and changes in training approach for level 3 discussed. UHD's performance on the Oliver McGowan training shows we are not an outlier.</li> <li>• The quarter 3 patient experience report was reviewed, and complaints performance remains a challenge.</li> <li>• The work of the Clinical Governance Committee continues to be positive and proactive.</li> </ul> |
| <b>ADVISE</b>                  | <p>The Committee wishes to advise the Board that:</p> <ul style="list-style-type: none"> <li>• Critical care moved into the Beach building nearly a year ago and has adjusted to the work environment with adopting new ways of working. This has been a positive experience and staff feel safe. Discharges to the ward frequently experience delays.</li> <li>• The Maternity Incentive Scheme Compliance submission has been accepted by NHSE.</li> <li>• The PLACE report will be reviewed next month.</li> <li>• The revised Terms of Reference were accepted in principle, though some discussion is required outside of the meeting about attendance.</li> <li>• The Governance cycle was approved for the committee.</li> </ul>  |
| <b>Review of Risks</b>         | <ul style="list-style-type: none"> <li>• Work continues addressing issues on the risk register with some focused work on the governance of point of care testing we should see a reduction in the next 2-3 months.</li> </ul>  |
| <b>Celebrating Outstanding</b> | <ul style="list-style-type: none"> <li>• The Critical Care teams successful move into BEACH Building and high quality outcomes national audit programme (ICNARC).</li> </ul>   |

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.1**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |  |
|--|--|
| <b>TITLE:</b>  | Statement of the work of NREC 2025/26  |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant   |
| <b>Presented by:</b>                                     | Judy Gillow, Interim Trust Chair   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Decision/Approval  |
| <b>Executive summary:</b>                                | <p>The purpose of this report is to present the work of the Nominations, Remuneration and Evaluation Committee (NREC) during 2025/26.</p> <p>Following Council of Governors’ approval, sections of the report will be included within the Trust’s Annual Report.</p> <p>The Annual Report must explain the work of the Trust’s nomination committee(s), covering the appointments process, succession planning and how these support a diverse leadership pipeline. It should describe the Board evaluation, the external evaluator’s involvement, the outcomes and actions, and how these inform future Board composition. It must outline the Trust’s diversity and inclusion policy, including disability, its objectives and alignment to the Trust vision, progress made, and the ethnic and gender diversity of the Board and senior managers with reference to WRES indicator nine. It should also assess how far the Board reflects the workforce and local communities.</p> <p>The Report must additionally set out the remuneration committee’s membership, the number of meetings held and individual attendance, and name anyone who provided material advice or services. Where an adviser is not a director or employee, the report must describe their role, how they were appointed and selected, and the fees paid.</p> |
| <b>ALERT:</b>  | N/A  |
| <b>ASSURE:</b>   | N/A  |

|  |   |  |
|--|---|--|
| <b>ADVISE:</b>                                 | N/A   |  |
| <b>Celebrating Outstanding:</b>                | N/A   |  |
| <b>RECOMMENDATION:</b>                         | The Council of Governors is asked to approve the statement of the work of NREC 2025/26  |  |
| <b>Implications associated with this item:</b> | Council of Governors <input checked="" type="checkbox"/><br>Environmental Sustainability <input type="checkbox"/><br>Equality, Equity, Diversity & Inclusion <input type="checkbox"/><br>Financial <input type="checkbox"/><br>Health Inequalities <input type="checkbox"/><br>Operational Performance <input type="checkbox"/><br>People (inc Staff, Patients) <input type="checkbox"/><br>Public Consultation <input type="checkbox"/><br>Quality <input type="checkbox"/><br>Regulatory <input checked="" type="checkbox"/><br>Strategy/Transformation <input type="checkbox"/><br>System <input type="checkbox"/><br><br>Compliance requirements with NHS Foundation Trust Annual Reporting Manual 2025/26. |  |
| <b>CQC Assessment Framework:</b>               | <u>Safe</u> <input type="checkbox"/><br><u>Effective</u> <input type="checkbox"/><br><u>Caring</u> <input type="checkbox"/><br><u>Responsive</u> <input type="checkbox"/><br><u>Well-Led</u> <input checked="" type="checkbox"/><br>Use of Resources <input type="checkbox"/>   |  |

| <b>Report History:<br/>Committees/Meetings at which the item has been considered:</b>                                | <b>Date</b>  | <b>Outcome</b>  |
|--|--|---|
| Nominations, Remuneration and Evaluation Committee   | 01/04/2026   | The Committee endorsed the report with recommendation to the Council of Governors to approve. |
| <b>Reason for submission to the Board (or, as applicable, Council of Governors) in Private Only (where relevant)</b> | Commercial confidentiality <input type="checkbox"/><br>Patient confidentiality <input type="checkbox"/><br>Staff confidentiality <input type="checkbox"/><br>Other exceptional reason <input type="checkbox"/> |   |

## Nominations, Remuneration and Evaluation Committee

Our Council of Governors is required to establish a Committee consisting of all or some of its members to assist in carrying out specified functions relating to the appointment and remuneration of the Trust Chair and Non-Executive Directors. The Committee also reviews the structure, size and composition of the Board. It is chaired by the Trust's Chair, or in their absence, the Vice Chair.

### Committee membership

Members of our Nominations, Remuneration and Evaluation Committee:



**Judy Gillow**  
Trust and NREC  
Chair

**Michele Whitehurst**  
Public Lead Governor,  
Poole and Rest of  
Dorset

**Carrie Stone**  
Public Governor,  
Poole and Rest of  
Dorset

**Shelley Thompson**  
Appointed Governor,  
Bournemouth  
University

**Rob Flux**  
Staff Governor,  
Non-clinical

**Sharon Collett**  
Public Governor,  
Bournemouth



**Sandra Wilson**  
Public Governor,  
Christchurch,  
East Dorset and  
Rest of England

**Councillor Beryl Ezzard**  
Appointed Governor,  
Dorset Council

\*Vacancy for the Christchurch, East Dorset and Rest of England

## Committee

The Committee met four times during the period, with members having attended meetings as follows, each having been quorate:

| Name  | Constituency   | Meeting dates |             |             |              |            |
|---|--|---------------|-------------|-------------|--------------|------------|
|   |  | 30-May-2025   | 23-Jun-2025 | 25-Jul-2025 | 24-Sept-2025 | 7-Jan-2026 |
| Judy Gillow   | Trust Chair  | ✓             | ✓           | ✓           | ✓            | ✓          |
| Sharon Collett  | Public Governor: Bournemouth                                   | ✓             | ✓           | ✓           | ✓            | ✓          |
| Carrie Stone  | Public Governor: Poole and Rest of Dorset                      | ✓             | ✓           | ✓           | ✓            | ✓          |
| Michele Whitehurst                                      | Public Governor: Poole and Rest of Dorset, Lead Governor       | ✓             | A           | ✓           | ✓            | ✓          |
| Rob Flux  | Staff Governor: Clinical                                       | A             | A           | A           | ✓            | ✓          |
| Cllr Beryl Ezzard<br><i>Member until 31 August 2025</i> | Appointed Governor: Dorset Council                             | A             | ✓           | ✓           |              |            |
| Sandra Wilson<br><i>Member until 2 October 2025</i>     | Public Governor: Christchurch, East Dorset and Rest of England | ✓             | ✓           | ✓           | A            |            |
| Shelley Thompson<br><i>Member since 14 January 2026</i> | Appointed Governor: Bournemouth University                     |               |             |             |              |            |

**Key:**

✓ - attended the meeting

A – did not attend/apologies sent

■ - N/A

In addition, Irene Mardon, Acting Chief People Officer, attended various meetings of the Committee to assist and advise with its consideration of matters related to the recruitment and remuneration of Non-Executive and Associate Non-Executive Directors.

## Work of the Committee

| Meeting Date | Committee Business Considered   |
|--------------|---|
| 30-May-2025  | <p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Non-Executive Director recruitment process: clinical</li> <li>• Non-Executive Director recruitment: audit and finance</li> </ul>  |
| 23-Jun-2025  | <p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Non-Executive Director (clinical): recommendation for appointment</li> <li>• Outcome of the Chair's and Non-Executive Directors' annual performance evaluation; Fit and Proper Persons Test</li> <li>• Nominations, Remuneration and Evaluation Committee Terms of Reference</li> <li>• Governors' attendance at the Council of Governors meetings</li> </ul>   |
| 25-Jul-2025  | <p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Non-Executive Director (audit and finance): recommendation for appointment</li> <li>• Governors' attendance at the Council of Governors meetings</li> </ul>   |
| 24-Sept-2025 | <p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Composition of Board of Directors: Amendment to Trust's Constitution</li> <li>• Review the balance of skills, knowledge, experience and diversity on the Board and in light of this evaluation, describe the role and capabilities required for the appointment of Non-Executive Directors, including the Trust Chair.</li> <li>• Nominations Remuneration and Evaluation Committee's Governance Cycle</li> <li>• Governors' attendance at the Council of Governors meetings</li> </ul> |
| 7-Jan-2026   | <p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Reappointment of Non-Executive Directors</li> <li>• Interim Chair and Interim SID tenure extension</li> <li>• Appointment of Interim Vice Chair of the Board</li> <li>• Trust Chair and Non-Executive Directors' 2025/26 performance evaluation (previously agreed)</li> <li>• NREC membership</li> </ul>   |

During this period, on the recommendation of the Committee, the Council of Governors approved:

- The audit and finance NED recruitment process
- The appointment of Michael Marsh and Alastair Matthews as NED's
- The outcomes of the Chair and NED's annual performance evaluations
- The Chair and NED's 2025/26 performance evaluation process
- NREC Terms of Reference
- The proposed amendment to the Trust's Constitution
- The extension of Judy Gillow's Interim chair appointment
- The extension of Claire Whitaker's Interim SID appointment
- The reappointment of Sharath Ranjan, Judy Gillow, Dr Helena McKeown and Claire Whitaker as NEDs for a further three-year term.

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.1**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |  |
|--|--|
| <b>TITLE:</b>  | Nominations, Remuneration and Evaluation Committee Terms of Reference  |
| <b>Prepared by:</b>                                      | Klaudia Zwolinska, Deputy Company Secretary  |
| <b>Presented by:</b>                                     | Judy Gillow, Interim Trust Chair   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Decision/Approval  |
| <b>Executive summary:</b>                                | <p>The purpose of this document is to present updated Nominations, Remuneration and Evaluation Committee Terms of Reference as a part of the annual review.</p> <p>The Terms of Reference have also been refreshed using the new corporate template introduced through the <i>Organising for Success</i> corporate project, which aims to streamline and standardise governance arrangements across the Trust.</p>   |
| <b>ALERT:</b>  | N/A  |
| <b>ASSURE:</b>   | N/A  |
| <b>ADVISE:</b>   | N/A  |
| <b>Celebrating Outstanding:</b>                          | N/A  |
| <b>RECOMMENDATION:</b>                                   | The Council of Governors is asked to consider and, if thought fit, approve the report.   |
| <b>Implications associated with this item:</b>           | Council of Governors <input checked="" type="checkbox"/><br>Environmental Sustainability <input type="checkbox"/><br>Equality, Equity, Diversity & Inclusion <input type="checkbox"/><br>Financial <input type="checkbox"/><br>Health Inequalities <input type="checkbox"/><br>Operational Performance <input type="checkbox"/><br>People (inc Staff, Patients) <input type="checkbox"/><br>Public Consultation <input type="checkbox"/><br>Quality <input type="checkbox"/><br>Regulatory <input checked="" type="checkbox"/> |

|                                  |                                |                                     |
|----------------------------------|--------------------------------|-------------------------------------|
|                                  | Strategy/Transformation System | <input type="checkbox"/>            |
| <b>CQC Assessment Framework:</b> | <u>Safe</u>                    | <input type="checkbox"/>            |
|                                  | <u>Effective</u>               | <input type="checkbox"/>            |
|                                  | <u>Caring</u>                  | <input type="checkbox"/>            |
|                                  | <u>Responsive</u>              | <input type="checkbox"/>            |
|                                  | <u>Well-Led</u>                | <input checked="" type="checkbox"/> |
|                                  | Use of Resources               | <input type="checkbox"/>            |

| <b>Report History: Committees/Meetings at which the item has been considered:</b>                                    | <b>Date</b>                | <b>Outcome</b>  |
|--|----------------------------|---|
| NREC   | 01/04/2026                 | A recommendation to the Council of Governors to approve the new corporate template to standardise governance arrangements across the Trust. |
| <b>Reason for submission to the Board (or, as applicable, Council of Governors) in Private Only (where relevant)</b> | Commercial confidentiality | <input type="checkbox"/>  |
|  | Patient confidentiality    | <input type="checkbox"/>  |
|  | Staff confidentiality      | <input type="checkbox"/>  |
|  | Other exceptional reason   | <input type="checkbox"/>  |

# TERMS OF REFERENCE

for the

University Hospitals Dorset NHS Foundation  
Trust

**Nominations, Remuneration and  
Evaluation Committee**

## DOCUMENT DETAILS

|  |                               |
|--|-------------------------------|
| <b>Author:</b>                           | Klaudia Zwolinska             |
| <b>Job Title:</b>                        | Deputy Company Secretary      |
| <b>Signed:</b>                           | [Insert author's e-signature] |
| <b>Date:</b>                             | 01/04/2026                    |
| <b>Version No:</b><br>(Author Allocated) | 1.0                           |
| <b>Next Review Date:</b>                 | 01/04/2027                    |

|                                  |  |
|----------------------------------|--|
| <b>Approving Body/Committee:</b> | Council of Governors                                     |
| <b>Chair:</b>                    | Judy Gillow, Interim Chair                               |
| <b>Signed:</b>                   | Insert e-signature of Chair of Approving Committee/Group |
| <b>Date Approved:</b>            | April 2026   |
| <b>Target Audience:</b>          | Council of Governors                                     |

| Document History |             |                   |                 |                                  |                                 |
|------------------|-------------|-------------------|-----------------|----------------------------------|---------------------------------|
| Date of Issue    | Version No: | Next Review Date: | Date Approved:  | Person responsible for Change    | Nature of Change                |
| April 2026       | 1.0         | April 2027        | [16 April 2026] | Director of Corporate Governance | New Terms of Reference template |

## TERMS OF REFERENCE

|                       |   |
|-----------------------|---|
| <b>COMMITTEE:</b>     | <b>Nominations, Remuneration and Evaluation Committee</b>   |
| <b>PURPOSE (1.2):</b> | <p>The Nominations, Remuneration and Evaluation Committee (NREC) is established to support the Council of Governors in carrying out its statutory responsibilities relating to:</p> <ul style="list-style-type: none"> <li>• The processes for selecting, appointing, evaluating and recommending the Trust Chair and Non-Executive Directors;</li> <li>• monitoring their performance; determining remuneration and terms of office; and reviewing the structure, size and composition of the Board of Directors in relation to Non-Executives.</li> </ul> |

|                                |  |
|--------------------------------|--|
| <b>RESPONSIBILITIES (2.1):</b> | <p>The Committee will advise and/or make recommendations to the Council of Governors on:</p> <ul style="list-style-type: none"> <li>• Evaluation of the performance of the Trust Chair and Non-Executive Directors.</li> <li>• Remuneration, allowances and other terms and conditions of office for the Trust Chair and Non-Executive Directors.</li> <li>• Composition and skill mix of the Board of Directors from a Non-Executive Director perspective.</li> <li>• Recruitment criteria and processes for the selection of the Trust Chair and Non-Executive Directors, including seeking, shortlisting and interviewing candidates, and making appointment recommendations.</li> <li>• Considering the suitability and continuing tenure of absentee Governors.</li> <li>• Recommending a Non-Executive Director candidate for the position of Vice Chair.</li> </ul> |
|--------------------------------|--|

|                                      |   |                            |                                  |  |   |
|--------------------------------------|---|----------------------------|----------------------------------|--|---|
| <b>MEMBERS (3.1):</b>                | <p>Membership of the Committee comprises:</p> <ul style="list-style-type: none"> <li>• <b>One Governor from each public constituency</b></li> <li>• <b>One appointed Governor</b></li> <li>• <b>One staff Governor</b></li> </ul> <p>If the Lead Governor is not already part of this group, they are automatically co-opted as a member. Governors are nominated by constituency; if multiple nominations occur, a constituency ballot takes place. Members serve a three-year term, renewable once.</p> |                            | <b>STANDING ATTENDEES (3.2):</b> | <p>Standing attendees:</p> <ul style="list-style-type: none"> <li>• <b>Director of Corporate Governance</b></li> </ul>   |   |
| <b>CHAIR (3.3):</b>                  | <b>Trust Chair</b>  | <b>DEPUTY CHAIR (3.3):</b> | <b>Vice Chair</b>                | <b>SECRETARY (5.5):</b>  | <b>The Director of Corporate Governance</b> or their nominee. will be responsible for preparing minutes and updating action log |
| <b>MEETING TIMING (FREQUENCY AND</b> | <p>The Committee will meet <b>at least twice per year</b> with additional meetings scheduled as requested by the Committee Chair.</p>   |                            | <b>QUORUM (5.2)</b>              | <p>Meetings will be quorate if at least <b>three members</b> are present:</p> <ul style="list-style-type: none"> <li>• <b>one of whom must be a</b></li> </ul> |   |

|  |   |  |   |
|--|---|--|---|
| <b>DURATION)<br/>(5.1):</b>                                    |   |  | <b>publicly elected<br/>Governor.</b>   |
| <b>ACCOUNTABLE<br/>TO: (the<br/>Accountable<br/>Group) (6)</b> | The Committee is accountable directly to the <b>Council of Governors.</b> | <b>REPORTING<br/>GROUPS<br/>(6.5):</b> | <p>The Committee receives reports from the groups and individuals connected to its responsibilities, including HR Services and any external advisers supporting recruitment or remuneration work.</p> <p>The Committee reports to:</p> <ul style="list-style-type: none"> <li>• The <b>Council of Governors</b>, to whom the Committee Chair provides a report after each meeting.</li> </ul> |

DRAFT

## UNIVERSITY HOSPITALS DORSET NHS FOUNDATION TRUST

### TERMS OF REFERENCE

#### 1. PURPOSE

- 1.1 The Trust's vision is to positively transform its health and care services as part of the Dorset Integrated Care System. Its mission is to provide excellent healthcare for its patients and wider community and be a great place to work now and for future generations.
- 1.2 The purpose of the Committee and how it will achieve its purpose is as set out above.
- 1.3 The Committee has no executive powers other than those specifically delegated in these terms of reference.

#### 2. RESPONSIBILITIES

- 2.1 The responsibilities of the Committee are set out above.

#### 3. MEMBERSHIP/ ATTENDANCE

- 3.1 Membership of the Committee is set out above.
- 3.2 Standing attendees are set out above. In addition, other individuals may be invited to attend with agreement of the Chair (or in their absence the Deputy Chair).
- 3.3 The Committee will be chaired by the role holder above. A Deputy Chair may be nominated. In the absence of the Chair and/or an appointed Deputy Chair, the remaining members will elect another member to present to chair the meeting (which, in the case of a Board Committee will be a Non-Executive Director).
- 3.4 Subject to paragraph 3.2 above, only members of the Committee have the right to attend meetings. If a standing member is unable to attend, they may exceptionally send a deputy to the meeting. (In the case of a Board Committee, a deputy will not have voting rights at the meeting). The Chair or other person chairing the meeting may ask any or all of those who attend, but who are not members, to withdraw to facilitate open and frank discussion of particular matters.
- 3.5 Committee members should aim to attend all scheduled meetings but in any event are expected to attend a minimum of three quarters of all meetings. For the purposes of calculating attendance, a deputy attending on behalf of a member will not count towards the members' attendance. A record of members' attendance will be maintained.

#### 4. AUTHORITY

- 4.1 The Committee is authorised to approve its governance cycle.

- 4.2 The Committee is authorised by the Board to investigate/review any activity within the Terms of Reference.
- 4.3 The Committee is authorised by the Board to obtain any external advice it requires to discharge its duties and to request the attendance of individuals and authorities from outside the Trust with relevant experience and expertise if it considers this necessary for or expedient to the exercise of its functions.
- 4.4 The Committee is authorised to obtain such internal information as is necessary and expedient to the fulfilment of its functions.

## **5. CONDUCT OF BUSINESS**

- 5.1 The Committee will normally meet at the frequency set out above and at such other times as the Chair will require.
- 5.2 Meetings of the Committee will be quorate if there are at least the members present set out above for a quorum.
- 5.3 If a meeting of the Committee is inquorate, then the meeting can progress if those present determine. However, no business will be transacted.
- 5.4 Meetings of the Committee will be called by the Secretary at the request of the Chair. The Secretary of the Committee will be as stated above.
- 5.5 The Secretary (or their nominee) is responsible for preparing the agenda for agreement by the Committee Chair. The Secretary (or their nominee) will collate and circulate papers to Committee members. Unless otherwise agreed by the Committee Chair, papers should be provided not less than seven working days before the meeting and the agenda and papers should be circulated not less than five working days before the meeting.
- 5.6 Under exceptional circumstances, in the case of emergency or urgency, items of business may be conducted outside of formal meetings. This should normally be agreed by the Committee in advance and carried out either by: Chair's action, calling an extraordinary meeting or reaching consensus on a decision by e-mail. Any decisions made in this manner must be formally ratified by the Committee at the next meeting.
- 5.7 Committee business may be transacted through virtual media (including, but not limited to video conferencing). At the start of each meeting taking place without all parties physically present, the Chair will be responsible for determining that the meeting is quorate.
- 5.8 Proceedings and decisions made will be recorded in the form of minutes or notes (as specified above), which will be submitted to the next meeting of the Committee for approval.

- 5.9 Members will be expected to conduct business in line with the Trust's values and objectives.

## **6. RELATIONSHIPS AND REPORTING**

- 6.1 The Committee will be accountable to the group set out above (the Accountable Group), to whom it will make recommendations in relation to issues that require decision or resolution.
- 6.2 The Committee will present a report summarising the proceedings of each of its meetings at the next meeting of the Accountable Group. For the avoidance of doubt, where practicable, this will be a written report, with a verbal update being provided as necessary.
- 6.4 The Committee may refer to the other groups specified above any matters requiring review or decision in such forum(s).
- 6.5 The Committee will receive reports from the Reporting Groups set out above.

## **7. MONITORING**

- 7.1 Attendance will be monitored at each Committee meeting. A matrix (see example at Appendix A) of membership attendees will be used for monitoring purposes.
- 7.2 The Trust's Annual Report will include attendance of members, frequency of meetings and whether meetings were quorate.
- 7.3 On an annual basis, the Committee will provide a self-assessment report to the Accountable Group detailing how the Committee has discharged its obligations as set out within its terms of reference, specifically incorporating an assessment of its effectiveness and making recommendations for improvement, where appropriate.

## **8. REVIEW**

- 8.1 These Terms of Reference will be reviewed annually or sooner if appropriate.
- 8.2 The position of the Chair of the Committee will be reviewed at least every three years.

**APPENDIX A**

**ATTENDANCE AT COMMITTEE MEETINGS**

|  |                            |  |  |  |  |  |  |  |  |  |  |  |
|--|----------------------------|--|--|--|--|--|--|--|--|--|--|--|
| <b>NAME OF COMMITTEE/</b><br>[Amend as appropriate:]                       | [Insert name of Committee] |  |  |  |  |  |  |  |  |  |  |  |
| <b>Present (include names of members present at the meeting)</b>           | <b>Meeting Dates</b>       |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
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|  |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
| <b>In Attendance</b>   |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                            |  |  |  |  |  |  |  |  |  |  |  |
| Was the meeting quorate? Y / N<br><br>(Please refer to Terms of Reference) |                            |  |  |  |  |  |  |  |  |  |  |  |

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.2**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |  |
|--|--|
| <b>TITLE:</b>  | Effectiveness Group Report   |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant   |
| <b>Presented by:</b>                                     | Carrie Stone, Public Governor for Poole and the Rest of Dorset   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Information  |
| <b>Executive summary:</b>                                | <p>The Effectiveness Group met on 26 March 2026. We welcomed Peter Fitzmaurice as a new member. Agenda items included a discussion on the strategic priorities for equality and diversity moving forward with Non-Executive Directors as identified at the development day. The group agreed that the focus should be on the effectiveness and assurance role with close collaboration with the Non-Executive Directors. A joint away day with Non-Executive Directors was proposed to discuss and align strategic priorities so that progress against measurable objectives was not lost.</p> <p>The group scrutinised the outcome of the Council of Governors Annual Self-assessment of performance and agreed that benchmarking tables would be provided at this meeting for comparison. The importance of sharing outcomes with the Non-Executive Directors was discussed. A review of the timing of the self-assessment was discussed in light of the fact that there were a number of only recently elected governors who were asked to complete the self-assessment.</p> <p>The future Development plan for 2026/2027 was discussed and proposals made.</p> |

|  |  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
|--|--|----------------------|-------------------------------------|------------------------------|--------------------------|---|--------------------------|-------------------|--------------------------|---------------------|-------------------------------------|-------------------------|--------------------------|------------------------------|--------------------------|---------------------|--------------------------|---------|--------------------------|------------|-------------------------------------|-------------------------|--------------------------|--------|--------------------------|
|  | Engagement with seldom heard groups was raised under any other business.   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ALERT:</b>                                  | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ASSURE:</b>                                 | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ADVISE:</b>                                 | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>Celebrating Outstanding:</b>                | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>RECOMMENDATION:</b>                         | Members are asked to note the content of the report.   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>Implications associated with this item:</b> | <table border="0"> <tr><td>Council of Governors</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Environmental Sustainability</td><td><input type="checkbox"/></td></tr> <tr><td>Equality, Equity, Diversity &amp; Inclusion</td><td><input type="checkbox"/></td></tr> <tr><td>Financial</td><td><input type="checkbox"/></td></tr> <tr><td>Health Inequalities</td><td><input type="checkbox"/></td></tr> <tr><td>Operational Performance</td><td><input type="checkbox"/></td></tr> <tr><td>People (inc Staff, Patients)</td><td><input type="checkbox"/></td></tr> <tr><td>Public Consultation</td><td><input type="checkbox"/></td></tr> <tr><td>Quality</td><td><input type="checkbox"/></td></tr> <tr><td>Regulatory</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Strategy/Transformation</td><td><input type="checkbox"/></td></tr> <tr><td>System</td><td><input type="checkbox"/></td></tr> </table> | Council of Governors | <input checked="" type="checkbox"/> | Environmental Sustainability | <input type="checkbox"/> | Equality, Equity, Diversity & Inclusion | <input type="checkbox"/> | Financial         | <input type="checkbox"/> | Health Inequalities | <input type="checkbox"/>            | Operational Performance | <input type="checkbox"/> | People (inc Staff, Patients) | <input type="checkbox"/> | Public Consultation | <input type="checkbox"/> | Quality | <input type="checkbox"/> | Regulatory | <input checked="" type="checkbox"/> | Strategy/Transformation | <input type="checkbox"/> | System | <input type="checkbox"/> |
| Council of Governors                           | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Environmental Sustainability                   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Equality, Equity, Diversity & Inclusion        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Financial                                      | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Health Inequalities                            | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Operational Performance                        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| People (inc Staff, Patients)                   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Public Consultation                            | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Quality  | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Regulatory                                     | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Strategy/Transformation                        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| System   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>CQC Assessment Framework:</b>               | <table border="0"> <tr><td><u>Safe</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Effective</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Caring</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Responsive</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Well-Led</u></td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Use of Resources</td><td><input type="checkbox"/></td></tr> </table>   | <u>Safe</u>          | <input type="checkbox"/>            | <u>Effective</u>             | <input type="checkbox"/> | <u>Caring</u>                           | <input type="checkbox"/> | <u>Responsive</u> | <input type="checkbox"/> | <u>Well-Led</u>     | <input checked="" type="checkbox"/> | Use of Resources        | <input type="checkbox"/> |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Safe</u>                                    | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Effective</u>                               | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Caring</u>                                  | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Responsive</u>                              | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Well-Led</u>                                | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Use of Resources                               | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |

| <b>Report History:<br/>Committees/Meetings at which the item has been considered:</b>                                | <b>Date</b>   | <b>Outcome</b>             |                          |                         |                          |                       |                          |                          |                          |  |
|--|---|----------------------------|--------------------------|-------------------------|--------------------------|-----------------------|--------------------------|--------------------------|--------------------------|--|
| N/A  | N/A   | N/A                        |                          |                         |                          |                       |                          |                          |                          |  |
| <b>Reason for submission to the Board (or, as applicable, Council of Governors) in Private Only (where relevant)</b> | <table border="0"> <tr><td>Commercial confidentiality</td><td><input type="checkbox"/></td></tr> <tr><td>Patient confidentiality</td><td><input type="checkbox"/></td></tr> <tr><td>Staff confidentiality</td><td><input type="checkbox"/></td></tr> <tr><td>Other exceptional reason</td><td><input type="checkbox"/></td></tr> </table> | Commercial confidentiality | <input type="checkbox"/> | Patient confidentiality | <input type="checkbox"/> | Staff confidentiality | <input type="checkbox"/> | Other exceptional reason | <input type="checkbox"/> |  |
| Commercial confidentiality   | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |
| Patient confidentiality  | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |
| Staff confidentiality  | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |
| Other exceptional reason   | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |

## COUNCIL OF GOVERNORS - PART 1 MEETING

Meeting Date: 16 April 2026

Agenda item: 8.2

| COVER SHEET – ALERT, ASSURE, ADVISE                      |  |
|--|--|
| <b>TITLE:</b>  | Council of Governors’ Assessment of Collective Performance - summary 2025-26   |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant   |
| <b>Presented by:</b>                                     | Carrie Stone, Public Governor for Poole and the Rest of Dorset   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Decision/Approval  |
| <b>Executive summary:</b>                                | <p>The purpose of this paper is to outline:</p> <ul style="list-style-type: none"> <li>the outcome of the Council of Governors Assessment of Collective Performance questionnaire; and</li> <li>areas suggested by Governors for future development, based on responses received to the questionnaire distributed to Governors in January 2026.</li> </ul> <p>The questionnaire approved by the Council of Governors was based on the recommendation from the Informal Governors’ Effectiveness Group and included an updated set of questions to support the assessment of the Council of Governors’ collective performance and to identify areas for development.</p> <p>As part of NHS England Code of Governance for NHS provider trusts (effective 2023), section C: Composition, succession and evaluation:</p> <p>C4.8 Led by the chair, foundation trust councils of governors should periodically assess their collective performance and regularly communicate to members and the public how they have discharged their responsibilities, including their impact and effectiveness on:</p> |

|  |  |                      |                                     |                              |                          |   |                          |           |                          |
|--|--|----------------------|-------------------------------------|------------------------------|--------------------------|---|--------------------------|-----------|--------------------------|
|  | <ul style="list-style-type: none"> <li>• holding the non-executive directors individually and collectively to account for the performance of the board of directors</li> <li>• communicating with their member constituencies and the public and transmitting their views to the board of directors</li> <li>• contributing to the development of the foundation trust's forward plans.</li> </ul> <p>The council of governors should use this process to review its roles, structure, composition and procedures, taking into account emerging best practice.</p> <p>At the January 2025 Council of Governors meeting, the Council approved the recommended questionnaire. For benchmarking, the same form was shared with the Governors on 30 January 2026, with the completion deadline on 28 February 2026.</p> <p>There were 16 respondents to the survey (with respondents invited to confirm on a scale whether they strongly agreed to strongly disagreed to statements presented). In addition, there was an option to provide free text comment on what had gone well and what could be improved.</p> <p>Improvement themes from responses received:</p> <ul style="list-style-type: none"> <li>• The importance of active participation and engagement by all Governors.</li> <li>• The importance of having an effective feedback loop to support feedback provided by members of the public through Governors being listened to and acted upon by the Trust.</li> <li>• Development sessions being an opportunity to enhance communications and building of relationships.</li> <li>• Increased Governor engagement in shaping the Trust's strategic direction.</li> <li>• Potential need for more opportunities to interact with Non-Executive Directors</li> </ul> <p>The Effectiveness Group will consider actions following on from the assessment.</p> |                      |                                     |                              |                          |   |                          |           |                          |
| <b>ALERT:</b>                                  | N/A  |                      |                                     |                              |                          |   |                          |           |                          |
| <b>ASSURE:</b>                                 | N/A  |                      |                                     |                              |                          |   |                          |           |                          |
| <b>ADVISE:</b>                                 | N/A  |                      |                                     |                              |                          |   |                          |           |                          |
| <b>Celebrating Outstanding:</b>                | N/A  |                      |                                     |                              |                          |   |                          |           |                          |
| <b>RECOMMENDATION:</b>                         | The Council of Governors is asked to consider and if thought fit approve the outcomes from its Annual Assessment of Collective Performance   |                      |                                     |                              |                          |   |                          |           |                          |
| <b>Implications associated with this item:</b> | <table> <tr> <td>Council of Governors</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Environmental Sustainability</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Equality, Equity, Diversity &amp; Inclusion</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Financial</td> <td><input type="checkbox"/></td> </tr> </table>  | Council of Governors | <input checked="" type="checkbox"/> | Environmental Sustainability | <input type="checkbox"/> | Equality, Equity, Diversity & Inclusion | <input type="checkbox"/> | Financial | <input type="checkbox"/> |
| Council of Governors                           | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |           |                          |
| Environmental Sustainability                   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |           |                          |
| Equality, Equity, Diversity & Inclusion        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |           |                          |
| Financial                                      | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |           |                          |

|                                  |                              |                                     |
|----------------------------------|------------------------------|-------------------------------------|
|                                  | Health Inequalities          | <input type="checkbox"/>            |
|                                  | Operational Performance      | <input type="checkbox"/>            |
|                                  | People (inc Staff, Patients) | <input type="checkbox"/>            |
|                                  | Public Consultation          | <input type="checkbox"/>            |
|                                  | Quality                      | <input type="checkbox"/>            |
|                                  | Regulatory                   | <input checked="" type="checkbox"/> |
|                                  | Strategy/Transformation      | <input type="checkbox"/>            |
|                                  | System                       | <input type="checkbox"/>            |
| <b>CQC Assessment Framework:</b> | <u>Safe</u>                  | <input type="checkbox"/>            |
|                                  | <u>Effective</u>             | <input type="checkbox"/>            |
|                                  | <u>Caring</u>                | <input type="checkbox"/>            |
|                                  | <u>Responsive</u>            | <input type="checkbox"/>            |
|                                  | <u>Well-Led</u>              | <input checked="" type="checkbox"/> |
|                                  | Use of Resources             | <input type="checkbox"/>            |

| Report History:<br>Committees/Meetings at<br>which the item has been<br>considered:  | Date                       | Outcome                  |
|--|----------------------------|--------------------------|
| N/A  | N/A                        | N/A                      |
| <b>Reason for submission to the<br/>Board (or, as applicable,<br/>Council of Governors) in<br/>Private Only (where relevant)</b> | Commercial confidentiality | <input type="checkbox"/> |
|  | Patient confidentiality    | <input type="checkbox"/> |
|  | Staff confidentiality      | <input type="checkbox"/> |
|  | Other exceptional reason   | <input type="checkbox"/> |

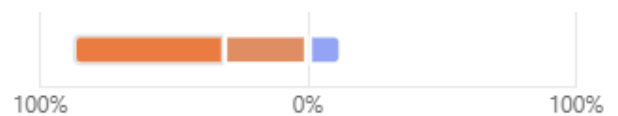
## Council of Governors assessment of collective performance 2025/26

Responses Overview: **16** responses over **44** days

### Council of Governors' role and responsibilities

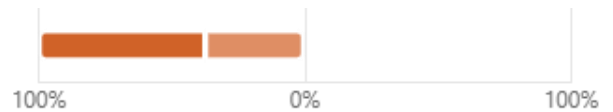
I understand the following roles and responsibilities:

|                  |       |
|------------------|-------|
| ● Strongly agree | 56.3% |
| ● Agree          | 31.3% |
| ● Disagree       | 12.5% |



I understand the role of the Council of Governors in relation to the following statutory duties:

|                  |       |
|------------------|-------|
| ● Strongly agree | 62.5% |
| ● Agree          | 37.5% |

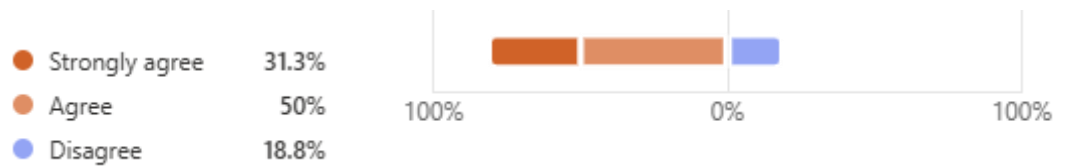


### Key Themes:

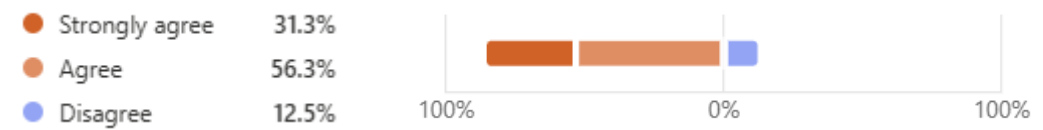
- Governors highlighted the need to continue the buddy system and developmental sessions for new members, supported by a two-stage induction programme. They suggested introducing a programme for potential governors to provide insight into the role.
- Attendance by NEDs at Council of Governors meetings and events was seen as valuable in improving understanding of roles and responsibilities, alongside opportunities for governor shadowing.
- Governors noted the importance of further training and emphasised that, while substantial information had been provided, members must actively engage.
- Additional development sessions were recommended for governors who attend less frequently or contribute less actively.

### Council of Governors

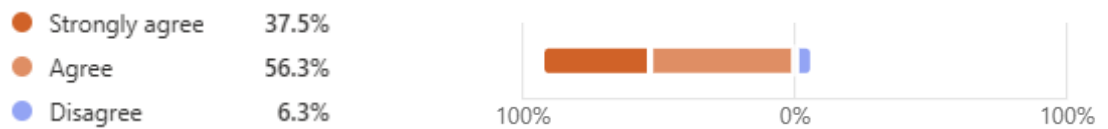
**Value:**



**Skills, Training & Development:**



**Relationships & Communication:**



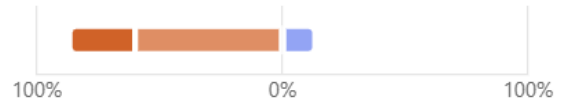
**Key Themes:**

- Governors requested the need for improved IT skills, stronger communication and support from the Board and NEDs, and better recognition of the Staff Governor role.
- They requested greater transparency in how Elected Governors engage their constituencies and more opportunities for Staff Governors to participate in public events.
- Some Governors felt isolated under new arrangements, citing unequal involvement and limited updates on key committee discussions.
- Concerns were raised about an EDI session that focused mainly on ethnicity.
- Overall, Governors praised staff professionalism and the strong leadership of the Council and Chair.

### Council of Governors Enablers

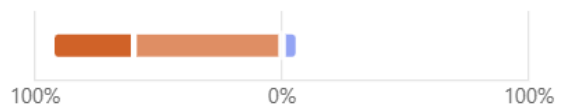
#### Processes:

|                  |       |
|------------------|-------|
| ● Strongly agree | 26.7% |
| ● Agree          | 60%   |
| ● Disagree       | 13.3% |



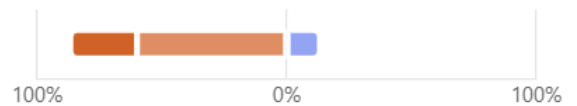
#### Communications:

|                  |       |
|------------------|-------|
| ● Strongly agree | 31.3% |
| ● Agree          | 62.5% |
| ● Disagree       | 6.3%  |



#### Information:

|                  |       |
|------------------|-------|
| ● Strongly agree | 31.3% |
| ● Agree          | 56.3% |
| ● Disagree       | 12.5% |

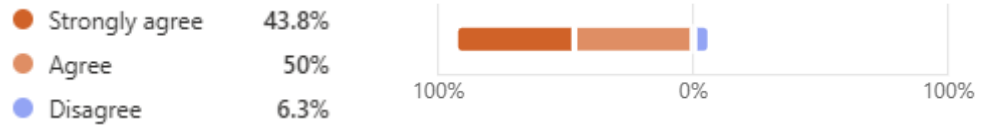


#### Key Themes:

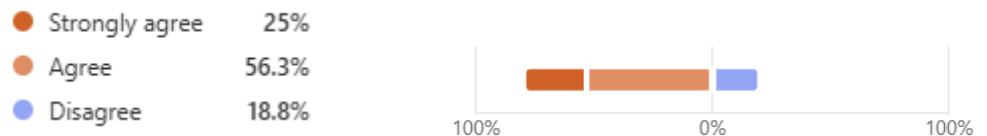
- Governors noted that large information packs would be more manageable if circulated earlier, with shorter papers and summary sheets to aid preparation.
- They raised concerns about limited access to Board sub-committee papers, poor sound quality on Teams for those unable to attend in person, and the sometimes late distribution of meeting papers.
- Some highlighted inconsistent communication on issues likely to attract media attention, and that the IPR is sometimes out of date.
- Governors also commented on the need for stronger support from the Communications Team and expressed concern that contentious decisions have occasionally been made without meaningful consultation.
- Lengthy meetings finishing late were seen as reducing concentration and limiting effective challenge.
- Despite these challenges, Governors reported that presentations are effective, communication often works well, and they receive high-quality information that supports robust discussion.

## Statutory duties – governance

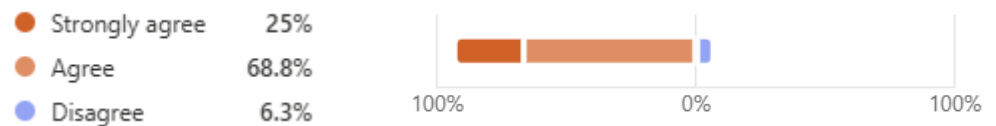
### Constitution:



### Strategy:



### Annual Report & Accounts:



### Key Themes:

- Governors noted limited involvement in previous Constitution reviews, highlighting that full Council input was only sought once the final report was presented, with insufficient explanation of proposed changes.
- They felt Governors should have earlier sight of draft documents and the rationale for revisions.
- Some Governors observed that, while engagement is encouraged and treated seriously, it is unclear how much feedback influences final decisions.
- They also reported limited involvement in shaping the Trust's strategic direction.
- Concerns were raised about the restricted time allocated to reviewing the Annual Report and Accounts, particularly since the removal of the Governor observer from the Audit Committee, which has reduced early visibility.
- Governors suggested simplifying the accounts to improve understanding for those without financial expertise.

## Statutory duties - relationships with Non-Executive Directors

### Non-Executive Director Recruitment, Appraisal & Remuneration:



### Holding Non-Executive Directors to account:



### Key Themes:

- Governors recognised the hard work and effective reporting of NEDs but suggested that regular one-to-one sessions could strengthen scrutiny and engagement.
- They noted that limited completion of appraisal questionnaires, restricted opportunities for dialogue, and reduced ability to observe NEDs hinder effective assessment.
- Governors felt that NEDs should proactively introduce themselves, interact more with Governors, and contribute more visibly to discussions.
- Limited access to committee papers and the closed nature of many meetings were seen as barriers to holding the Board to account, with few opportunities to observe NED challenge in practice.
- They also highlighted that remote attendance via Teams reduces opportunities for interaction and observation compared to in-person meetings.

## Statutory duties - representing the interests of Members & General Public

### Representing the interests of Members & General Public:



### Ideas on how the methods employed by the Council of Governors to represent the interests of Members and the General Public could be improved

- Governors shared mixed views on engagement, with some suggesting the current approach works well and others proposing improvements. Suggestions included clearer triage of public enquiries, alternative language to replace “membership,” stronger outward promotion by Governors, and occasional informal public-Governor events.
- Governors felt that engagement varies widely depending on individual effort and noted that while many attend public events to raise awareness, the MEG strategy requires further development, clearer processes, and a stronger feedback loop.
- Several Governors reported that the current assessment format makes it difficult to respond to statements individually and that there is no consistent mechanism or meeting time for sharing feedback, resulting in important insights being lost.

**Benchmarking: Council of Governors assessment of collective performance comparison  
2024/25 to 2025/26**

|  |               |  |               |  |         |  |       |
|--|---------------|--|---------------|--|---------|--|-------|
|  | Decrease in % |  | Increase in % |  | Equal % |  | New % |
|--|---------------|--|---------------|--|---------|--|-------|

| Area to Access  | 2024/25   | 2025/26   | Consistent Key Themes   |
|---|---|---|---|
| <b>ROLES AND RESPONSIBILITIES</b>   |   |   |   |
| <b>Response Overview</b>  | 13 responses<br>Over 29 days  | 16 responses<br>Over 44 days  | 3 new governors in 2025/6   |
| <b>I understand the roles and responsibilities of the: Trust Chair, Senior Independent Director and Lead/Deputy Lead Governors.</b>   | Strongly agree: <b>69.2%</b><br>Agree: <b>30.8%</b><br>Disagree: -<br>Strongly disagree: -            | Strongly agree: <b>56.3%</b><br>Agree: <b>31.3%</b><br>Disagree: <b>12.5%</b><br>Strongly disagree: - | 1. Continue the buddy system and developmental sessions for new members, supported by a two-stage induction programme. They suggested introducing a programme for potential governors to provide insight into the role.   |
| <b>I understand the role of the Council of Governors' statutory duties:</b><br><br><ul style="list-style-type: none"> <li>Recruitment, appraisal and remuneration of the Trust Chair.</li> <li>Approving, with the Board, any amendments to the Trust's Constitution.</li> <li>Recruitment, appraisal and remuneration of Non-Executive Directors.</li> <li>Holding Non- Executive Directors to account for performance of the Board.</li> <li>Representing the interests of members, and the general public</li> </ul> | Strongly agree: <b>76.9%</b><br>Agree: <b>23.1%</b><br>Disagree: -<br>Strongly disagree: -            | Strongly agree: <b>62.5%</b><br>Agree: <b>37.5%</b><br>Disagree: -<br>Strongly disagree: -            | 2. Attendance by NEDs at Council of Governors meetings and events was seen as valuable in improving understanding of roles and responsibilities, alongside opportunities for governor shadowing.<br><br>3. Actively encourage all Governors to attend training and development sessions.<br><br>4. Additional development sessions were recommended for governors who attend less frequently or contribute less actively. |
| <b>SKILLS, DEVELOPMENT, RELATIONSHIPS AND COMMUNICATIONS</b>  |   |   |   |
| <b>Value</b><br><br><ul style="list-style-type: none"> <li>As a member of the Council, I feel I make a real contribution to the Trust, and the communities it serves.</li> <li>As a member of the Council, I feel a valued part of the Trust organization</li> </ul>  | Strongly agree: <b>38.5%</b><br>Agree: <b>38.5%</b><br>Disagree: <b>23.1%</b><br>Strongly disagree: - | Strongly agree: <b>31.3%</b><br>Agree: <b>50%</b><br>Disagree: <b>18.8%</b><br>Strongly disagree: -   | 1. Stronger communication and support from the NEDs.<br><br>2. Some Governors felt isolated under new arrangements, citing unequal involvement and limited updates on key committee discussions.<br><br>3. Development sessions are a very useful way of helping Governors to improve their knowledge and skills, and to network in a less formal environment.  |
| <b>Skills, training and development</b><br><br><ul style="list-style-type: none"> <li>I have undertaken all the required mandatory</li> </ul>   | Strongly agree: <b>38.5%</b><br>Agree: <b>42.6%</b><br>Disagree: <b>15.4%</b><br>Strongly disagree: - | Strongly agree: <b>31.3%</b><br>Agree: <b>56.3%</b><br>Disagree: <b>12.5%</b><br>Strongly disagree: - |   |

|  |   |  |   |
|--|---|--|---|
| <p>Governor training (within the required timescale?)</p> <ul style="list-style-type: none"> <li>• Governors are equipped with the tools, skills and knowledge they need to perform their role.</li> <li>• Governors are given the appropriate training to enable them to undertake their statutory duties.</li> <li>• The Council of Governors induction programme provides relevant and sufficient information for new Governors.</li> <li>• Council of Governors development sessions are valuable and effective.</li> <li>• The Council of Governors has an overall development plan to ensure that it is equipped to meet future challenges.</li> </ul> |   |  | <p>4. Promote active participation and engagement among all Governors, fostering interaction and collaboration.</p>   |
| <p><b>Relationships and communication</b></p> <ul style="list-style-type: none"> <li>• The Trust encourages open and honest communication between the Council and the Board members.</li> <li>• The Council of Governors operates in a way that ensures all views are heard and everyone can contribute to meetings.</li> <li>• The Council of Governors work effectively together and individually.</li> </ul>  | <p>Strongly agree: <b>30.8%</b><br/>Agree: <b>46.2%</b><br/>Disagree: <b>23.1%</b><br/>Strongly disagree: -</p> | <p>Strongly agree: <b>37.5%</b><br/>Agree: <b>56.3%</b><br/>Disagree: <b>6.3%</b><br/>Strongly disagree: -</p> |   |
| <b>PROCESSES, COMMUNICATIONS AND INFORMATION FLOWS</b>   |   |  |   |
| <p><b>Processes</b></p> <ul style="list-style-type: none"> <li>• The Council of Governors meets at the most appropriate times to allow maximum effective participation.</li> <li>• The administrative arrangements relating to the Council of Governors meetings and its groups are effective (including circulation of minutes and papers, accessibility of meeting packs, and forward planning).</li> <li>• Processes are in place to</li> </ul>   | <p>Strongly agree: <b>23.1%</b><br/>Agree: <b>69.2%</b><br/>Disagree: <b>7.7%</b><br/>Strongly disagree: -</p>  | <p>Strongly agree: <b>26.7%</b><br/>Agree: <b>60%</b><br/>Disagree: <b>13.3%</b><br/>Strongly disagree: -</p>  | <p>1. Governors noted that large information packs would be more manageable if circulated earlier, with shorter papers and summary sheets to aid preparation.</p> <p>2. Lengthy meetings finishing late were seen as reducing concentration and limiting effective challenge.</p> <p>3. Some highlighted inconsistent communication on issues likely to attract media attention, and that the IPR is sometimes out of</p> |

|   |   |   |  |
|---|---|---|--|
| <p>ensure that sufficient debate is possible, for major decisions or contentious issues.</p> <ul style="list-style-type: none"> <li>The quality of discussions around individual issues is of a sufficiently high standard.</li> </ul>  |   |   | <p>date.</p>   |
| <p><b>Communications</b></p> <ul style="list-style-type: none"> <li>The Trust encourages open and honest communication between the Council and Board members.</li> <li>Governors have support where they need it, to engage with their constituency (members and the general public).</li> </ul>  | <p>Strongly agree: <b>30.8%</b><br/>Agree: <b>69.2%</b><br/>Disagree: -<br/>Strongly disagree: -</p>            | <p>Strongly agree: <b>31.3%</b><br/>Agree: <b>62.5%</b><br/>Disagree: <b>6.3%</b><br/>Strongly disagree: -</p>  | <p>4. Governors also commented on the need for stronger support from the Communications Team and expressed concern that contentious decisions have occasionally been made without meaningful consultation.</p> <p>5. Despite these challenges, Governors reported that presentations are effective, communication often works well, and they receive high quality information that supports robust discussion.</p> |
| <p><b>Information</b></p> <ul style="list-style-type: none"> <li>Receive regular information from the Trust, which is sufficiently useful (accurate, timely and clear) to enable them to understand the general business of the organisation.</li> <li>The quality of papers and presentations to the Council of Governors is sufficient for it to be effective.</li> <li>The Council is informed of any issues that could cause public or media interest, before they become general knowledge.</li> </ul> | <p>Strongly agree: <b>28.5%</b><br/>Agree: <b>46.2%</b><br/>Disagree: <b>15.4%</b><br/>Strongly disagree: -</p> | <p>Strongly agree: <b>31.3%</b><br/>Agree: <b>56.3%</b><br/>Disagree: <b>12.5%</b><br/>Strongly disagree: -</p> |  |
| <b>GOVERNANCE MECHANISMS</b>  |   |   |  |
| <p><b>Constitution</b></p> <ul style="list-style-type: none"> <li>The Council of Governors' approval process for revisions to the Constitution is efficient and effective.</li> </ul>   | <p>Strongly agree: <b>23.1%</b><br/>Agree: <b>76.9%</b><br/>Disagree: -<br/>Strongly disagree: -</p>            | <p>Strongly agree: <b>43.8%</b><br/>Agree: <b>50%</b><br/>Disagree: <b>6.3%</b><br/>Strongly disagree: -</p>    | <p>1. Governors noted limited involvement in previous Constitution reviews.</p> <p>2. They felt Governors should have earlier sight of draft documents and the rationale for revisions.</p>  |
| <p><b>Strategy</b></p> <ul style="list-style-type: none"> <li>Governors are engaged in formulating the strategic direction of the Trust.</li> <li>Governors have the</li> </ul>   | <p>Strongly agree: <b>15.4%</b><br/>Agree: <b>53.8%</b><br/>Disagree: <b>30.8%</b><br/>Strongly disagree: -</p> | <p>Strongly agree: <b>25%</b><br/>Agree: <b>56.3%</b><br/>Disagree: <b>18.8%</b><br/>Strongly disagree: -</p>   | <p>3. Some Governors observed that, while engagement is encouraged and treated seriously, it is unclear how much feedback</p>  |

|  |   |   |   |
|--|---|---|---|
| <p>opportunity to be briefed on, and are able to voice opinions on, the Trust's strategy.</p>  |   |   | <p>influences final decisions.</p> <p>4. They also reported limited involvement in shaping the Trust's strategic direction.</p>   |
| <p><b>Annual report and accounts</b></p> <ul style="list-style-type: none"> <li>Governors can understand the key points in the Trust's report and accounts.</li> <li>Governors can ask relevant questions on the report and accounts</li> </ul>  | <p>Strongly agree: <b>30.8%</b><br/>Agree: <b>53.8%</b><br/>Disagree: <b>30.8%</b><br/>Strongly disagree: -</p> | <p>Strongly agree: <b>25%</b><br/>Agree: <b>68.8%</b><br/>Disagree: <b>6.3%</b><br/>Strongly disagree: -</p>  | <p>5. Much effort is made to inform Governors, check understanding and discussion is supported.</p> <p>6. Governors suggested simplifying the accounts to improve understanding for those without financial expertise.</p>  |
| <p><b>INTERACTION BETWEEN THE COUNCIL OF GOVERNORS AND NON-EXECUTIVE DIRECTORS</b></p>   |   |   |   |
| <p><b>Non-Executive Director Recruitment, Appraisal and Remuneration</b></p> <ul style="list-style-type: none"> <li>The process for Non-Executive Director recruitment is clear and understandable.</li> <li>The annual appraisal process by the Council of Governors of the performance of the Trust Chair is effective.</li> <li>The annual appraisal process by the Council of Governors of the performance of the Non-Executive Directors is effective</li> </ul>  | <p>Strongly agree: <b>46.2%</b><br/>Agree: <b>53.8%</b><br/>Disagree: -<br/>Strongly disagree: -</p>            | <p>Strongly agree: <b>25%</b><br/>Agree: <b>62.5%</b><br/>Disagree: <b>12.5%</b><br/>Strongly disagree: -</p> | <p>1. Governors recognised the hard work and effective reporting of NEDs but suggested that regular one to one sessions could strengthen scrutiny and engagement.</p> <p>2. They noted that limited completion of appraisal questionnaires, restricted opportunities for dialogue, and reduced ability to observe NEDs hinder effective assessment.</p> <p>3. Governors felt that NEDs should proactively introduce themselves, interact more with Governors, and contribute more visibly to discussions.</p> |
| <p><b>Holding Non-Executive Directors to account</b></p> <ul style="list-style-type: none"> <li>Governors have sufficient opportunity for dialogue with Non-Executive Directors, and other key stakeholders within the Trust, to enable them to carry out their statutory duty to hold the Non-Executive Directors to account for the performance of the Board.</li> <li>Governors have opportunities to observe Non-Executive Directors at Board and other meetings.</li> <li>The Governors hold the</li> </ul> | <p>Strongly agree: <b>38.5%</b><br/>Agree: <b>46.2%</b><br/>Disagree: <b>15.4%</b><br/>Strongly disagree: -</p> | <p>Strongly agree: <b>18.8%</b><br/>Agree: <b>56.3%</b><br/>Disagree: <b>25%</b><br/>Strongly disagree: -</p> | <p>4. Limited access to committee papers and the closed nature of many meetings were seen as barriers to holding the Board to account, with few opportunities to observe NED challenge in practice.</p> <p>5. They also highlighted that remote attendance via Teams reduces opportunities for interaction and observation compared to in person meetings.</p>  |

|  |  |  |  |
|--|--|--|--|
| Non-Executive Directors to account effectively.  |  |  |  |
| <b>REPRESENTING THE INTERESTS OF MEMBERS AND GENERAL PUBLIC</b>  |  |  |  |
| <p><b>Representing the interests of Members and general public</b></p> <ul style="list-style-type: none"> <li>The Council of Governors has an effective Membership Engagement Strategy, and specific plans to implement it.</li> <li>The Council of Governors communicates effectively with, and listens and responds to, members and other stakeholders.</li> <li>Governors keep themselves informed about the views of members and the general public and represent their interests effectively.</li> <li>Governors have sufficient opportunities to gather information from members and the general public about the Trust's services.</li> <li>Governors have adequate opportunities to share feedback with the Trust.</li> <li>As Constituency representatives, Governors feel their voice and opinions are heard and listened to.</li> </ul> | <p>Strongly agree: <b>30.8%</b><br/>         Agree: <b>46.2%</b><br/>         Disagree: <b>23.1%</b><br/>         Strongly disagree: -</p> | <p>Strongly agree: <b>43.8%</b><br/>         Agree: <b>37.5%</b><br/>         Disagree: <b>18.8%</b><br/>         Strongly disagree: -</p> | <ol style="list-style-type: none"> <li>Governors felt that engagement varies widely depending on individual effort and noted that while many attend public events to raise awareness, the MEG strategy requires further development, clearer processes, and a stronger feedback loop.</li> <li>The need for a simple mechanism for the Council of Governors to share member/public feedback with the Trust, with timely and consistent feedback loop from the Trust.</li> <li>Greater support and information from the Communications team and greater facilitated engagement</li> </ol> |

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.3**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |  |
|--|--|
| <b>TITLE:</b>  | MEG Report   |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant   |
| <b>Presented by:</b>                                     | Keith Mitchell, Public Governor for Bournemouth  |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Information  |
| <b>Executive summary:</b>                                | <p>The Chair met with James Donald, Sarah Herbert, Vivian Alividza and Laura Northeast to explore how the work of the Membership Engagement Group (MEG) can be more closely aligned with the Trust’s Forward Plan, particularly in relation to engagement with patients and members of the public.</p> <p>The Committee reviewed the current Membership Engagement Strategy and agreed that a further dedicated session would be arranged to undertake a full review and develop a refreshed strategy aligned to Trust priorities.</p> <p>The annual calendar of events was discussed. Governors representing constituencies are encouraged to organise at least one listening event and one health talk within their areas. It was agreed that sharing notes and feedback from constituency meetings would improve collective understanding, strengthen coordination, and promote greater teamwork across constituencies.</p> <p>Sue Comrie, in her role as the appointed governor for volunteers, provided feedback reflecting volunteer perspectives and experiences.</p> <p>Membership figures were reviewed, and the Committee requested additional demographic analysis to better understand representation and inform future engagement activity.</p> |

|  |  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
|--|--|----------------------|-------------------------------------|------------------------------|--------------------------|---|--------------------------|-------------------|--------------------------|---------------------|-------------------------------------|-------------------------|--------------------------|------------------------------|--------------------------|---------------------|--------------------------|---------|--------------------------|------------|-------------------------------------|-------------------------|--------------------------|--------|--------------------------|
|  | <p>James Donald provided an update on the work of the Communications Team, highlighting the wide range of events and external talks delivered. The Committee requested that a standard slide promoting Trust membership be incorporated into these presentations. It was noted that the current presentation materials and supporting literature are in the process of being updated.</p> <p>The Chair proposed a minor amendment to the Committee's Terms of Reference, which will be progressed in line with governance processes.</p>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ALERT:</b>                                  | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ASSURE:</b>                                 | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ADVISE:</b>                                 | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>Celebrating Outstanding:</b>                | N/A  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>RECOMMENDATION:</b>                         | Members are asked to note the content of the report.   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>Implications associated with this item:</b> | <table border="0"> <tr><td>Council of Governors</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Environmental Sustainability</td><td><input type="checkbox"/></td></tr> <tr><td>Equality, Equity, Diversity &amp; Inclusion</td><td><input type="checkbox"/></td></tr> <tr><td>Financial</td><td><input type="checkbox"/></td></tr> <tr><td>Health Inequalities</td><td><input type="checkbox"/></td></tr> <tr><td>Operational Performance</td><td><input type="checkbox"/></td></tr> <tr><td>People (inc Staff, Patients)</td><td><input type="checkbox"/></td></tr> <tr><td>Public Consultation</td><td><input type="checkbox"/></td></tr> <tr><td>Quality</td><td><input type="checkbox"/></td></tr> <tr><td>Regulatory</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Strategy/Transformation</td><td><input type="checkbox"/></td></tr> <tr><td>System</td><td><input type="checkbox"/></td></tr> </table> | Council of Governors | <input checked="" type="checkbox"/> | Environmental Sustainability | <input type="checkbox"/> | Equality, Equity, Diversity & Inclusion | <input type="checkbox"/> | Financial         | <input type="checkbox"/> | Health Inequalities | <input type="checkbox"/>            | Operational Performance | <input type="checkbox"/> | People (inc Staff, Patients) | <input type="checkbox"/> | Public Consultation | <input type="checkbox"/> | Quality | <input type="checkbox"/> | Regulatory | <input checked="" type="checkbox"/> | Strategy/Transformation | <input type="checkbox"/> | System | <input type="checkbox"/> |
| Council of Governors                           | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Environmental Sustainability                   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Equality, Equity, Diversity & Inclusion        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Financial                                      | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Health Inequalities                            | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Operational Performance                        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| People (inc Staff, Patients)                   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Public Consultation                            | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Quality  | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Regulatory                                     | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Strategy/Transformation                        | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| System   | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>CQC Assessment Framework:</b>               | <table border="0"> <tr><td><u>Safe</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Effective</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Caring</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Responsive</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Well-Led</u></td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Use of Resources</td><td><input type="checkbox"/></td></tr> </table>   | <u>Safe</u>          | <input type="checkbox"/>            | <u>Effective</u>             | <input type="checkbox"/> | <u>Caring</u>                           | <input type="checkbox"/> | <u>Responsive</u> | <input type="checkbox"/> | <u>Well-Led</u>     | <input checked="" type="checkbox"/> | Use of Resources        | <input type="checkbox"/> |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Safe</u>                                    | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Effective</u>                               | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Caring</u>                                  | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Responsive</u>                              | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Well-Led</u>                                | <input checked="" type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Use of Resources                               | <input type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |

| <b>Report History:<br/>Committees/Meetings at which the item has been considered:</b>                                | <b>Date</b>   | <b>Outcome</b>             |                          |                         |                          |                       |                          |                          |                          |  |
|--|---|----------------------------|--------------------------|-------------------------|--------------------------|-----------------------|--------------------------|--------------------------|--------------------------|--|
| N/A  | N/A   | N/A                        |                          |                         |                          |                       |                          |                          |                          |  |
| <b>Reason for submission to the Board (or, as applicable, Council of Governors) in Private Only (where relevant)</b> | <table border="0"> <tr><td>Commercial confidentiality</td><td><input type="checkbox"/></td></tr> <tr><td>Patient confidentiality</td><td><input type="checkbox"/></td></tr> <tr><td>Staff confidentiality</td><td><input type="checkbox"/></td></tr> <tr><td>Other exceptional reason</td><td><input type="checkbox"/></td></tr> </table> | Commercial confidentiality | <input type="checkbox"/> | Patient confidentiality | <input type="checkbox"/> | Staff confidentiality | <input type="checkbox"/> | Other exceptional reason | <input type="checkbox"/> |  |
| Commercial confidentiality   | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |
| Patient confidentiality  | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |
| Staff confidentiality  | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |
| Other exceptional reason   | <input type="checkbox"/>  |                            |                          |                         |                          |                       |                          |                          |                          |  |

| Bournemouth  | Christchurch  | Poole      | Staff      | Appointed  |
|--|---|------------|------------|------------|
| <p><b>30 April</b><br/>RBH Atrium<br/>Listening Event</p> <p><b>May</b><br/>Hospital Talk to Tangent<br/>Group</p> <p><b>16 June</b><br/>St Saviours Church<br/>Health Talk on the Heart</p> <p><b>December</b><br/>RBH Atrium<br/>Christmas Event</p> | <p><b>26 May</b><br/>RNLI Blue Light Day<br/>Mudford Quay</p> | <p>TBC</p> | <p>N/A</p> | <p>N/A</p> |

Governors are invited to attend engagement events organised by the Communications Team to promote membership opportunities.

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.4**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |  |
|--|--|
| <b>TITLE:</b>  | Quality Group Report   |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant   |
| <b>Presented by:</b>                                     | Kani Trehorn, Staff Governor: Clinical   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Information  |
| <b>Executive summary:</b>                                | <p>The meeting was quorate and held on 4 September 2025. The next meeting is scheduled for 19 May.</p> <p>Jo Sims delivered a comprehensive presentation on the Patient Safety Incident Response Framework (PSIRF) and the Trust’s accompanying organisational plan. She explained the move away from traditional serious incident investigations towards a proportionate, system-based, and compassionate approach to managing patient safety incidents. PSIRF shifts the emphasis from a singular focus on root cause analysis to system-wide learning, acknowledging that incidents usually result from multiple contributory factors and broader system issues. The framework also enables the use of a range of investigative approaches, selected according to the nature and complexity of each incident.</p> <p>Jo also highlighted the importance of meaningful and compassionate involvement of staff, patients, and families throughout the response process, ensuring that patient experience remains central to learning and improvement. She provided an update on progress against national and local patient safety priorities for 2024–2026, including thematic</p> |

|  |   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
|--|---|----------------------|-------------------------------------|------------------------------|--------------------------|---|--------------------------|-------------------|--------------------------|---------------------|-------------------------------------|-------------------------|--------------------------|------------------------------|--------------------------|---------------------|--------------------------|---------|--------------------------|------------|-------------------------------------|-------------------------|--------------------------|--------|--------------------------|
|  | <p>reviews, service improvements, and ongoing challenges. National priorities are set through the National Patient Safety Strategy, while local priorities are informed by incident data, complaints, staff and stakeholder feedback, and clinical governance forums, and are not benchmarked due to their local context.</p> <p>Discussions focused on five key areas: inpatient falls, pressure ulcer prevention with team-based ownership, VTE missed doses and risk assessment, deteriorating patients, and term admissions to NICU. Updates included data collection, policy development, executive oversight, immediate reviews, monthly meetings, and confirmation that national targets are being met. Lead Governor Michelle emphasised patient and family involvement in safety investigations. On skin integrity, Chair Kani Trehorn proposed developing an IT-based auto-alert system to support new and agency staff in preventing skin breakdown. Diane Smelt acknowledged the hard work from all concerned to improve quality within UHD care delivery to the patients.</p> <p>If anyone would like more information, kindly contact the Company secretarial Team for the formal minutes of the meeting.</p> |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ALERT:</b>                                  | N/A   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ASSURE:</b>                                 | N/A   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>ADVISE:</b>                                 | N/A   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>Celebrating Outstanding:</b>                | N/A   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>RECOMMENDATION:</b>                         | Members are asked to note the content of the report.  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>Implications associated with this item:</b> | <table border="0"> <tr><td>Council of Governors</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Environmental Sustainability</td><td><input type="checkbox"/></td></tr> <tr><td>Equality, Equity, Diversity &amp; Inclusion</td><td><input type="checkbox"/></td></tr> <tr><td>Financial</td><td><input type="checkbox"/></td></tr> <tr><td>Health Inequalities</td><td><input type="checkbox"/></td></tr> <tr><td>Operational Performance</td><td><input type="checkbox"/></td></tr> <tr><td>People (inc Staff, Patients)</td><td><input type="checkbox"/></td></tr> <tr><td>Public Consultation</td><td><input type="checkbox"/></td></tr> <tr><td>Quality</td><td><input type="checkbox"/></td></tr> <tr><td>Regulatory</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Strategy/Transformation</td><td><input type="checkbox"/></td></tr> <tr><td>System</td><td><input type="checkbox"/></td></tr> </table>  | Council of Governors | <input checked="" type="checkbox"/> | Environmental Sustainability | <input type="checkbox"/> | Equality, Equity, Diversity & Inclusion | <input type="checkbox"/> | Financial         | <input type="checkbox"/> | Health Inequalities | <input type="checkbox"/>            | Operational Performance | <input type="checkbox"/> | People (inc Staff, Patients) | <input type="checkbox"/> | Public Consultation | <input type="checkbox"/> | Quality | <input type="checkbox"/> | Regulatory | <input checked="" type="checkbox"/> | Strategy/Transformation | <input type="checkbox"/> | System | <input type="checkbox"/> |
| Council of Governors                           | <input checked="" type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Environmental Sustainability                   | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Equality, Equity, Diversity & Inclusion        | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Financial                                      | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Health Inequalities                            | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Operational Performance                        | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| People (inc Staff, Patients)                   | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Public Consultation                            | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Quality  | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Regulatory                                     | <input checked="" type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Strategy/Transformation                        | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| System   | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <b>CQC Assessment Framework:</b>               | <table border="0"> <tr><td><u>Safe</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Effective</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Caring</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Responsive</u></td><td><input type="checkbox"/></td></tr> <tr><td><u>Well-Led</u></td><td><input checked="" type="checkbox"/></td></tr> <tr><td>Use of Resources</td><td><input type="checkbox"/></td></tr> </table>  | <u>Safe</u>          | <input type="checkbox"/>            | <u>Effective</u>             | <input type="checkbox"/> | <u>Caring</u>                           | <input type="checkbox"/> | <u>Responsive</u> | <input type="checkbox"/> | <u>Well-Led</u>     | <input checked="" type="checkbox"/> | Use of Resources        | <input type="checkbox"/> |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Safe</u>                                    | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Effective</u>                               | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Caring</u>                                  | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Responsive</u>                              | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| <u>Well-Led</u>                                | <input checked="" type="checkbox"/>   |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |
| Use of Resources                               | <input type="checkbox"/>  |                      |                                     |                              |                          |   |                          |                   |                          |                     |                                     |                         |                          |                              |                          |                     |                          |         |                          |            |                                     |                         |                          |        |                          |

| Report History:<br>Committees/Meetings at<br>which the item has been<br>considered:                                    | Date   | Outcome  |
|--|--|--|
| N/A  | N/A  | N/A  |
| Reason for submission to the<br>Board (or, as applicable,<br>Council of Governors) in<br>Private Only (where relevant) | Commercial confidentiality<br>Patient confidentiality<br>Staff confidentiality<br>Other exceptional reason | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> |

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.5**

| <b>COVER SHEET – ALERT, ASSURE, ADVISE</b>               |  |
|--|--|
| <b>TITLE:</b>  | Annual Review of Register of Interests   |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant   |
| <b>Presented by:</b>                                     | Judy Gillow, Interim Trust Chair   |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>   |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None   |
| <b>Purpose of paper:</b>                                 | Decision/Approval  |
| <b>Executive summary:</b>                                | <p>This purpose of this report is to present the Council of Governors' Register of Interests for review.</p> <p>In line with the Foundation Trust Annual Reporting Manual, the Trust is to continue signposting the public to the registers of interests via the annual report.</p> <p>The Council of Governors is therefore asked to approve the publication of the Register of Governors' Interests (as of 31 March 2026) on the Trust's website and its cross-reference in the annual report.</p> <p>It should be noted that receipt of the signed Annual Declaration is currently pending from some Governors (highlighted in the attached).</p> |
| <b>ALERT:</b>  | N/A  |
| <b>ASSURE:</b>   | N/A  |
| <b>ADVISE:</b>   | N/A  |
| <b>Celebrating Outstanding:</b>                          | N/A  |
| <b>RECOMMENDATION:</b>                                   | To consider and, if thought fit, approve the register of interests being uploaded to the Trust's website and cross-referenced in the Trust's annual report.  |
| <b>Implications associated with this item:</b>           | Council of Governors <input checked="" type="checkbox"/><br>Environmental Sustainability <input type="checkbox"/><br>Equality, Equity, Diversity & Inclusion <input type="checkbox"/><br>Financial <input type="checkbox"/>  |

|  |                              |                                     |
|--|------------------------------|-------------------------------------|
|  | Health Inequalities          | <input type="checkbox"/>            |
|  | Operational Performance      | <input type="checkbox"/>            |
|  | People (inc Staff, Patients) | <input type="checkbox"/>            |
|  | Public Consultation          | <input type="checkbox"/>            |
|  | Quality                      | <input type="checkbox"/>            |
|  | Regulatory                   | <input checked="" type="checkbox"/> |
|  | Strategy/Transformation      | <input type="checkbox"/>            |
|  | System                       | <input type="checkbox"/>            |
| Compliance requirements with NHS Foundation Trust Annual Reporting Manual 2026/27. |                              |                                     |
| <b>CQC Assessment Framework:</b>   | <u>Safe</u>                  | <input type="checkbox"/>            |
|  | <u>Effective</u>             | <input type="checkbox"/>            |
|  | <u>Caring</u>                | <input type="checkbox"/>            |
|  | <u>Responsive</u>            | <input type="checkbox"/>            |
|  | <u>Well-Led</u>              | <input checked="" type="checkbox"/> |
|  | Use of Resources             | <input type="checkbox"/>            |

| <b>Report History:<br/>Committees/Meetings at which the item has been considered:</b>                                | <b>Date</b>                | <b>Outcome</b>           |
|--|----------------------------|--------------------------|
| N/A  | N/A                        | N/A                      |
| <b>Reason for submission to the Board (or, as applicable, Council of Governors) in Private Only (where relevant)</b> | Commercial confidentiality | <input type="checkbox"/> |
|  | Patient confidentiality    | <input type="checkbox"/> |
|  | Staff confidentiality      | <input type="checkbox"/> |
|  | Other exceptional reason   | <input type="checkbox"/> |

UNIVERSITY HOSPITALS DORSET NHS FOUNDATION TRUST

REGISTER OF COUNCIL OF GOVERNORS' INTERESTS

As of 31 March 2026, the following interests were declared by members of University Hospitals Dorset NHS Foundation Trust's Council of Governors:

| Name and Role of Governor  | Declaration of Interest   |
|--|---|
| <b>Benjamin Ango</b><br>Elected Governor<br>Clinical staff constituency                                | None  |
| <b>Colin Blebta</b><br>Elected Governor<br>Bournemouth constituency                                    | None  |
| <b>Dr Deniz Cetinkaya</b><br>Elected Governor<br>Bournemouth constituency                              | Full-time employment at Bournemouth University  |
| <b>Sharon Collett</b><br>Elected Governor<br>Bournemouth constituency                                  | None  |
| <b>Sue Comrie</b><br>Appointed Governor<br>Volunteers Group  | None  |
| <b>Marie Cleary</b><br>Elected Governor<br>Poole and Rest of Dorset constituency                       | None  |
| <b>Steve Dickens</b><br>Elected Governor<br>Christchurch, East Dorset and Rest of England constituency | None  |
| <b>Peter Fitzmaurice</b><br>Elected Governor<br>Poole and Rest of Dorset constituency                  | Director of Purple HR Limited   |
| <b>Rob Flux</b><br>Elected Governor<br>Non-clinical staff constituency                                 | None  |
| <b>Colin Hamilton-Welsh</b><br>Elected Governor<br>Non-clinical staff constituency                     | None  |
| <b>Cllr Paul Hilliard</b><br>Appointed Governor<br>Bournemouth, Christchurch and Poole Council         | Bournemouth, Christchurch and Poole Council<br>Councillor<br>Member of Dorset and Wiltshire Fire and Rescue Service Authority |

| Name and Role of Governor  | Declaration of Interest   |
|--|---|
| <b>Malcolm Keith</b><br>Elected Governor<br>Non-clinical Staff constituency                              | None  |
| <b>Roger Mann</b><br>Elected Governor<br>Poole and Rest of Dorset constituency                           | None  |
| <b>Rosie Martin</b><br>Elected Governor<br>Christchurch, East Dorset and Rest of England constituency    | University Hospitals Dorset - Patient Partner Volunteer<br>University Hospitals Dorset staff network member - ProAbility Network, Pride Network and Women's Network<br>Reverse Mentor for Equalities, Diversity and Inclusion Committee and the Culture Committee   |
| <b>Keith Mitchell</b><br>Elected Governor<br>Bournemouth constituency                                    | Trustee, The Holdenhurst Charity<br>University Hospitals Dorset Volunteer   |
| <b>Elizabeth McDermott</b><br>Elected Governor<br>Bournemouth constituency                               | Son works for Dorset Healthcare NHS FT as Head of Sustainability and Fleet.   |
| <b>Andrew McLeod</b><br>Elected Governor<br>Poole and Rest of Dorset constituency                        | None  |
| <b>Jeremy Scrivens</b><br>Elected Governor<br>Christchurch, East Dorset and Rest of England constituency | University Hospitals Dorset Volunteer   |
| <b>Diane Smelt</b><br>Elected Governor<br>Bournemouth constituency                                       | University Hospitals Dorset Volunteer<br>University Hospitals Dorset Patient Safety Partner - Governance and Risk<br>Member of the Dorset Patient Engagement Group<br>Digital Champion and member of the Dorset Digital Patient Engagement Group<br>Bournemouth University – PIER Group member<br>Member of the Response Study Citizen Panel member of the HSU SPACE<br>PPG member of local surgery<br>Member of the Dorset System wise Integrated Neighbourhood Teams Co-Production Enablement Group |
| <b>Carrie Stone</b><br>Elected Governor for Poole and Rest of Dorset constituency                        | The Adam Practice Volunteer   |
| <b>Dr Shelley Thompson</b><br>Appointed Governor for Bournemouth University                              | Dean of Education and Student Experience at Bournemouth University<br>Husband also works at Bournemouth University  |
| <b>Kani Trehorn</b><br>Elected Governor<br>Clinical Staff constituency                                   | New Milton Town Councilor   |

|   |  |
|---|--|
| <p><b>Michele Whitehurst</b><br/>Elected Governor Poole and Rest of Dorset constituency</p>                     | <p>Director &amp; Business Owner - Active Research Limited<br/>Director &amp; Owner - Actisense Pty Limited<br/>Owner - Actiholdings<br/>Ongoing UHD volunteer</p> |
| <p><b>Nicholas Williams</b><br/>Elected Governor Christchurch, East Dorset and Rest of England constituency</p> | <p>Stepdaughter works in NICU at UHD</p>   |

Highlighted governors to let the Corporate Governance Team know if there are any changes to their record.

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.6**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |   |
|--|---|
| <b>TITLE:</b>  | The Council of Governors' Governance Cycle  |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant  |
| <b>Presented by:</b>                                     | Judy Gillow, Interim Trust Chair  |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>  |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None  |
| <b>Purpose of paper:</b>                                 | Decision/Approval   |
| <b>Executive summary:</b>                                | <p>The Council of Governors' governance cycle is to be reviewed and approved by the Council of Governors on an annual basis.</p> <p>A draft governance cycle for 2026/27 is attached for review and, if thought fit, approval by the Council of Governors.</p> <p>The Council of Governors' governance cycle is used to guide agendas for each of the meetings throughout the year and to structure the focus on particular governance aspects during the year.</p> |
| <b>ALERT:</b>  | N/A   |
| <b>ASSURE:</b>   | N/A   |
| <b>ADVISE:</b>   | N/A   |
| <b>Celebrating Outstanding:</b>                          | N/A   |
| <b>RECOMMENDATION:</b>                                   | To consider and, if thought fit, approve the governance cycle in the form presented or with such amendments as the Council of Governors considers appropriate.  |
| <b>Implications associated with this item:</b>           | Council of Governors <input checked="" type="checkbox"/><br>Environmental Sustainability <input type="checkbox"/><br>Equality, Equity, Diversity & Inclusion <input type="checkbox"/><br>Financial <input type="checkbox"/><br>Health Inequalities <input type="checkbox"/><br>Operational Performance <input type="checkbox"/>   |

|                                  |                              |                                     |
|----------------------------------|------------------------------|-------------------------------------|
|                                  | People (inc Staff, Patients) | <input type="checkbox"/>            |
|                                  | Public Consultation          | <input type="checkbox"/>            |
|                                  | Quality                      | <input type="checkbox"/>            |
|                                  | Regulatory                   | <input checked="" type="checkbox"/> |
|                                  | Strategy/Transformation      | <input type="checkbox"/>            |
|                                  | System                       | <input type="checkbox"/>            |
| <b>CQC Assessment Framework:</b> | <u>Safe</u>                  | <input type="checkbox"/>            |
|                                  | <u>Effective</u>             | <input type="checkbox"/>            |
|                                  | <u>Caring</u>                | <input type="checkbox"/>            |
|                                  | <u>Responsive</u>            | <input type="checkbox"/>            |
|                                  | <u>Well-Led</u>              | <input checked="" type="checkbox"/> |
|                                  | Use of Resources             | <input type="checkbox"/>            |

| <b>Report History:<br/>Committees/Meetings at<br/>which the item has been<br/>considered:</b>                                    | <b>Date</b>                | <b>Outcome</b>           |
|--|----------------------------|--------------------------|
| N/A  | N/A                        | N/A                      |
| <b>Reason for submission to the<br/>Board (or, as applicable,<br/>Council of Governors) in<br/>Private Only (where relevant)</b> | Commercial confidentiality | <input type="checkbox"/> |
|  | Patient confidentiality    | <input type="checkbox"/> |
|  | Staff confidentiality      | <input type="checkbox"/> |
|  | Other exceptional reason   | <input type="checkbox"/> |

**UNIVERSITY HOSPITALS DORSET NHS FOUNDATION TRUST**  
**COUNCIL OF GOVERNORS GOVERNANCE CYCLE**  
**APRIL 2026 - MARCH 2027**

| <b>REGULAR REPORTS</b>   | <b>LEAD</b>   |
|--|---|
| Chair's Update (Part 1)  | Chair   |
| Chief Executive's Update (Part 1)  | CEO   |
| Integrated Performance Report (Part 1)   | Chief Officers                                      |
| Feedback from the Nominations, Remuneration and Evaluation Committee (Part 1/Part 2)   | Chair   |
| Updates from the Council of Governor Informal Groups (Part 1): <ul style="list-style-type: none"> <li>Effectiveness Group</li> <li>Membership and Engagement Group</li> <li>Quality Group</li> </ul> | Informal Group Facilitator/<br>Informal Group Chair |
| Feedback from Governor Observers (Part 1/Part 2)   | Governor Observers                                  |
| Feedback from Staff and Appointed Governors  | Staff and Appointed Governors                       |
| Update from Part 2 meeting of the Board of Directors (Part 2)  | Chair   |

| <b>ANNUAL REPORTS</b>   | <b>QUARTER</b>                     | <b>LEAD</b>  |
|---|------------------------------------|--------------|
| Annual Report/Statement on the work of the Nominations, Remuneration and Evaluations Committee (Part 2) | Q1 - April 2026                    | Chair/Co Sec |
| Governor response to the Quality Account (Part 2)   | Q1 - [June] July 2026 <sup>1</sup> | CNO          |
| Annual Review of the Register of Interests (Part 1)   | Q1 - April 2026                    | Co Sec       |
| Annual Review of the Governance Cycle (Part 1)  | Q1 - April 2026                    | Co Sec       |
| Schedule of Meetings for following year (Part 1)  | Q1 - April 2026                    | Chair/Co Sec |
| Convening of the Annual Members' Meeting (Part 1)   | Q1 – May 2026                      | Co Sec       |
| Outcome of the Council of Governors' Assessment of Collective Performance (Part 1)                      | Q1 – April 2026                    | Chair/Co Sec |

<sup>1</sup> N.B. Given national timelines for submission of Quality Account, this is likely to necessitate an Extraordinary Meeting of the Council of Governors in June

|   |                             |                              |
|---|-----------------------------|------------------------------|
| UHD Charity Update  | Q1 - April 2026             | Charity Director             |
| Summary of Operational Plan (Part 1)  | Q2 - July 2026              | CEO/CSTO                     |
| Outcome of the Chair's and Non-Executive Directors' annual performance evaluation (Part 2)  | Q2 - July 2026              | Chair/SID                    |
| Approve recommendations from Nominations, Remuneration and Evaluation Committee on Chair's and Non-Executive Directors' remuneration/ allowances/ terms & conditions (Part 1) | Q2 - July 2026 <sup>2</sup> | Chair/SID                    |
| Trust's Annual Report & Accounts (Part 1)   | Q2 - July 2026              | CFO                          |
| Financial Accounts – Audit from External Auditors (Part 1)  | Q2 - July 2026              | External Auditors            |
| Annual Audit Committee Report and consult on Terms of Reference (Part 1)  | Q2 - July 2026              | Chair Audit Committee        |
| Board Assurance Framework Annual Report (past year) (Part 1)  | Q2 - July 2026              | CNO                          |
| Board Assurance Framework (new year) (Part 1)   | Q2 - July 2026              | CNO                          |
| Annual Freedom to Speak Up report   | Q2 – July 2026              | Freedom To Speak Up Guardian |
| Annual Effectiveness of External Audit Process (Part 2)   | Q3 - October 2026           | CFO                          |
| Quality Account (six months review) (Part 1)  | Q3 - October 2026           | CNO                          |
| Annual Patient Experience Report (to include Complaints) (Part 1)   | Q3 - October 2026           | CNO                          |
| Report on the Annual Members' Meeting (Part 1)  | Q3 - October 2026           | Chair/ Co Sec                |
| Methodology for the Council of Governors' Assessment of Collective Performance (Part 1)   | Q4 – January 2027           | Chair/Co Sec                 |
| Methodology for performance evaluation for the Chair and Non-Executive Directors  | Q4 – January 2027           | SID/Lead Governor            |
| Board Assurance Framework (six monthly report) (Part 1)   | Q4 - January 2027           | CSTO/CNO                     |
| Annual External Audit Plan (Part 2)   | Q4 - March 2027             | CFO                          |

<sup>2</sup> This is subject to national dependencies

|                                   |                              |          |
|-----------------------------------|------------------------------|----------|
| Operational Plan (draft) (Part 2) | Q4 - March 2027 <sup>3</sup> | CEO/CSTO |
|-----------------------------------|------------------------------|----------|

| AD HOC REPORTS   | LEAD                      |
|--|---------------------------|
| Statement on Engagement with the Board of Directors (last received January 2024) – January 2027  | Chair                     |
| Agree with Nominations, Remuneration and Evaluations Committee the process for nomination of new Chair and Non-Executive Directors   | Chair/SID                 |
| Appoint Chair and Non-Executive Directors  | Chair/SID and CPO         |
| Approval of appointment of Chief Executive   | Chair                     |
| Council of Governors to lead and agree with Audit Committee the criteria for the appointment/reappointment and removal of the Trust's Auditors (appointed from April 2026) | Chair Audit Committee/CFO |
| Letter of Engagement from the Auditors   | Chair/CFO                 |
| Review policy for composition of Council of Governors and Non-Executive Directors<br>Board composition - annual  | Chair                     |
| Review Membership Strategy (July 2026)   | Co Sec                    |
| Review the Terms of Reference of the Nominations, Remuneration and Evaluations Committee (scheduled April 2027)  | Co Sec                    |
| Register of Interests as required when updated in year   | Co Sec                    |
| Process for Lead and Deputy Lead Governor – every three years unless required sooner. Next due January 2027  | Co Sec                    |

CEO = Chief Executive Officer  
 CNO = Chief Nursing Officer  
 CFO = Chief Finance Officer  
 CPO = Chief People Officer  
 CSTO = Chief Strategy and Transformation Officer  
 SID = Senior Independent Director  
 Co Sec = Company Secretary

**April 2026**

<sup>3</sup> Ditto re need for Extraordinary Meeting of the Council of Governors in March

**COUNCIL OF GOVERNORS - PART 1 MEETING**

**Meeting Date: 16 April 2026**

**Agenda item: 8.7**

| COVER SHEET – ALERT, ASSURE, ADVISE                      |   |
|--|---|
| <b>TITLE:</b>  | The Council of Governors' Meeting Schedule  |
| <b>Prepared by:</b>                                      | Stacey Payne, Corporate Governance Assistant  |
| <b>Presented by:</b>                                     | Judy Gillow, Interim Trust Chair  |
| <b>Strategic themes that this item supports/impacts:</b> | Population & System <input type="checkbox"/><br>Our People <input checked="" type="checkbox"/><br>Patient Experience <input type="checkbox"/><br>Quality Outcomes & Safety <input type="checkbox"/><br>Sustainable Services <input type="checkbox"/>  |
| <b>BAF/Corporate Risk Register: (if applicable)</b>      | None  |
| <b>Purpose of paper:</b>                                 | Decision/Approval   |
| <b>Executive summary:</b>                                | <p>The purpose of this paper is to present for approval the proposed Council of Governors, Nominations and Remuneration Committee and Informal Governor Groups' meeting dates for 2027.</p> <p>The proposed meeting dates for the Council of Governors, Nominations, Remuneration and Evaluation Committee, Informal Governor Groups and Development Sessions for 2027 have been considered and are proposed as attached.</p> |
| <b>ALERT:</b>  | N/A   |
| <b>ASSURE:</b>   | N/A   |
| <b>ADVISE:</b>   | N/A   |
| <b>Celebrating Outstanding:</b>                          | N/A   |
| <b>RECOMMENDATION:</b>                                   | To consider and to approve the proposed dates for the Council of Governors, Nominations and Remuneration Committee, Development Sessions and Informal Governor Groups' meeting dates for 2027.  |
| <b>Implications associated with this item:</b>           | Council of Governors <input checked="" type="checkbox"/><br>Environmental Sustainability <input type="checkbox"/><br>Equality, Equity, Diversity & Inclusion <input type="checkbox"/><br>Financial <input type="checkbox"/><br>Health Inequalities <input type="checkbox"/><br>Operational Performance <input type="checkbox"/>   |

|                                  |                              |                                     |
|----------------------------------|------------------------------|-------------------------------------|
|                                  | People (inc Staff, Patients) | <input type="checkbox"/>            |
|                                  | Public Consultation          | <input type="checkbox"/>            |
|                                  | Quality                      | <input type="checkbox"/>            |
|                                  | Regulatory                   | <input checked="" type="checkbox"/> |
|                                  | Strategy/Transformation      | <input type="checkbox"/>            |
|                                  | System                       | <input type="checkbox"/>            |
| <b>CQC Assessment Framework:</b> | <u>Safe</u>                  | <input type="checkbox"/>            |
|                                  | <u>Effective</u>             | <input type="checkbox"/>            |
|                                  | <u>Caring</u>                | <input type="checkbox"/>            |
|                                  | <u>Responsive</u>            | <input type="checkbox"/>            |
|                                  | <u>Well-Led</u>              | <input checked="" type="checkbox"/> |
|                                  | Use of Resources             | <input type="checkbox"/>            |

| <b>Report History:<br/>Committees/Meetings at<br/>which the item has been<br/>considered:</b>                                    | <b>Date</b>                | <b>Outcome</b>           |
|--|----------------------------|--------------------------|
| N/A  | N/A                        | N/A                      |
| <b>Reason for submission to the<br/>Board (or, as applicable,<br/>Council of Governors) in<br/>Private Only (where relevant)</b> | Commercial confidentiality | <input type="checkbox"/> |
|  | Patient confidentiality    | <input type="checkbox"/> |
|  | Staff confidentiality      | <input type="checkbox"/> |
|  | Other exceptional reason   | <input type="checkbox"/> |

### COUNCIL OF GOVERNORS MEETINGS SCHEDULE 2027

|  | JAN                    | FEB             | MAR                    | APR                    | MAY             | JUN                    | JUL                    | AUG | SEP                    | OCT                    | NOV                    | DEC                    |
|--|------------------------|-----------------|------------------------|------------------------|-----------------|------------------------|------------------------|-----|------------------------|------------------------|------------------------|------------------------|
| <b>CoG PART 1</b>                      | Thu 14<br>14:30<br>(F) | -               | -                      | Thu 15<br>16:00<br>(F) | Fri 28<br>10:00 | -                      | Thu 15<br>16:00<br>(F) | -   | -                      | Thu 14<br>16:00<br>(F) | -                      | -                      |
| <b>CoG PART 2</b>                      | Thu 14<br>16:45<br>(F) | -               | -                      | Thu 15<br>18:15<br>(F) | Fri 28<br>11:00 | -                      | Thu 15<br>18:15<br>(F) | -   | -                      | Thu 14<br>18:15<br>(F) | -                      | -                      |
| <b>NREC</b>                            | Wed 06<br>9:00         | -               | -                      | Wed 07<br>9:00         | Fri 28<br>9:00  | -                      | Wed 07<br>9:00         | -   | -                      | Wed 06<br>9:00         | -                      | -                      |
| <b>KEY THEMES BOARD PART 2 MEETING</b> | -                      | Thu 11<br>10:00 | Thu 11<br>10:00<br>(F) | -                      | -               | Thu 17<br>10:00<br>(F) | -                      | -   | Mon 09<br>10:00<br>(F) | -                      | Thu 11<br>10:00<br>(F) | Thu 09<br>10:00<br>(F) |
| <b>CoG DEVELOPMENT SESSIONS</b>        | -                      | -               | Thu 11<br>10:30<br>(F) | -                      | -               | Thu 17<br>10:30<br>(F) | -                      | -   | Mon 09<br>10:30<br>(F) | -                      | Thu 11<br>10:30<br>(F) | -                      |
| <b>QUALITY GROUP</b>                   | -                      | Tue 16<br>10:00 | -                      | -                      | Tue 18<br>10:00 | -                      | -                      | -   | -                      | Tue 12<br>10:00        | -                      | -                      |
| <b>EFFECTIVENESS GROUP</b>             | -                      | -               | Thu 25<br>10:00        | -                      | -               | Thu 24<br>10:00        | -                      | -   | Mon 23<br>10:00        | -                      | -                      | Thu 02<br>10:00        |
| <b>MEG</b>                             | -                      | -               | -                      | Thu 01<br>10:00        | -               | -                      | Thu 01<br>10:00        | -   | Mon 30<br>10:00        | -                      | -                      | Thu 09<br>10:30        |

|                          |                     | 3 April 2025 | 30 May 2025 | 3 July 2025 | 2 October 2025 | 15 January 2026 |
|--------------------------|---------------------|--------------|-------------|-------------|----------------|-----------------|
| Governors Present        | Judy Gillow         |              |             |             |                |                 |
|                          | Benjamin Ango       |              |             |             |                |                 |
|                          | Colin Blebta        |              |             |             |                |                 |
|                          | Robert Buffon       |              |             |             |                | A               |
|                          | Deniz Cetinkaya     |              |             | A           |                |                 |
|                          | Marie Cleary        |              |             |             |                | A               |
|                          | Sharon Collett      |              |             |             |                |                 |
|                          | Sue Comrie          |              |             |             |                |                 |
|                          | Steve Dickens       |              | A           |             |                | A               |
|                          | Beryl Ezzard        |              |             |             |                |                 |
|                          | Richard Ferns       |              |             |             | A              |                 |
|                          | Peter Fitzmaurice   |              |             |             |                |                 |
|                          | Rob Flux            | A            | A           | A           |                |                 |
|                          | Colin Hamilton      |              |             |             |                |                 |
|                          | Paul Hilliard       |              |             |             |                |                 |
|                          | Malcom Keith        |              |             |             |                |                 |
|                          | Rosie Martin        |              |             |             |                |                 |
|                          | Elizabeth McDermott |              |             |             |                |                 |
|                          | Andrew McLeod       | A            |             |             | A              |                 |
|                          | Keith Mitchell      |              |             |             |                |                 |
|                          | Steve Robinson      |              |             |             |                |                 |
|                          | Jeremy Scrivens     |              |             |             |                | A               |
|                          | Diane Smelt         |              |             |             |                |                 |
|                          | Carrie Stone        |              |             | A           |                |                 |
|                          | Kani Trehorn        | A            |             |             |                |                 |
| Shelley Thompson         |                     | A            | A           |             |                |                 |
| Michele Whitehurst       |                     |              |             |             |                |                 |
| Nicholas Williams        |                     |              |             |             |                |                 |
| Sandra Wilson            |                     |              |             |             |                |                 |
|                          | Debbie Anderson     |              |             |             |                |                 |
|                          | Terri Clark         |              |             |             |                |                 |
|                          | Andrew Doe          |              |             |             |                |                 |
|                          | Yasmin Dossabhoy    |              |             |             |                |                 |
|                          | Siobhan Harrington  |              |             |             | A              |                 |
|                          | Sarah Herbert       |              |             |             |                |                 |
|                          | Tracie Langley      |              |             |             |                | A               |
|                          | Femi Macaulay       |              |             |             |                |                 |
|                          | Irene Mardon        |              |             |             |                |                 |
|                          | Michael Marsh       |              |             |             | A              |                 |
|                          | Helen Martin        |              |             |             |                |                 |
|                          | Alastair Matthews   |              |             |             |                |                 |
|                          | Helena McKeown      |              |             |             |                | A               |
|                          | Marie Miller        |              |             |             |                |                 |
|                          | Mark Mould          |              |             |             |                |                 |
|                          | Pete Papworth       |              |             |             |                |                 |
|                          | Sharath Ranjan      |              |             |             |                |                 |
|                          | Richard Renaut      |              |             |             |                |                 |
|                          | Janice Smith GGi    |              |             |             |                |                 |
|                          | Tara Vachell        |              |             |             |                |                 |
| Claire Whitaker          |                     |              |             |             |                |                 |
| Peter Wilson             |                     |              |             |             |                |                 |
| Klaudia Zwolinska        |                     |              |             |             | A              |                 |
| Was the meeting quorate? |                     | Y            | Y           | Y           | Y              | Y               |
| <b>Key</b>               |                     |              |             |             |                |                 |
|                          | In attendance       |              |             |             |                |                 |
|                          | N/A                 |              |             |             |                |                 |
| A                        | Apologies           |              |             |             |                |                 |
|                          | Delegate Sent       |              |             |             |                |                 |