Becoming a Foundation Trust Governor

Your questions answered
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1 **What is a Foundation Trust?**
A NHS Foundation Trust is a Trust that is accountable locally rather than to Government and it has more flexibility to manage its own finances and provide services that better meet the needs of local people. Foundation Trusts are still part of the NHS and continue to provide care free at the point of delivery. An important part of being an NHS Foundation Trust is that Trusts can have real involvement and support from the local community. This can be achieved by people becoming Foundation Trust Members and through the Council of Governors.

2 **Will there be better health care as a consequence of becoming an NHS Foundation Trust?**
By having greater financial freedom we will be able to improve the quality and responsiveness of our services and to do this more quickly and effectively. Also, by engaging more with local people we will have a deeper understanding of local needs that will inform our investment in developing services for the future.

3 **What is membership?**
Each FT has to recruit members from its local population, from the people who use the service and their carers and from its staff. In our case, this means our 6,000 staff providing services for the people who live in the Leicester, Leicestershire and Rutland area. We work with a range of voluntary and statutory organisations in the area.

Membership is free and open to anyone who is 16 years of age or older. Members are people from all walks of life who are interested in community health services in homes, schools and community hospitals, mental health and learning disability issues, and want to help improve local services. We hope they will join us in helping us to influence and reduce the stigma that people with a mental illness face everyday by talking more openly.

It is the Members who vote for the Governors who will represent their views at a higher level.

3 **Why should I become a Governor?**
Because you are interested in health care in your community and want to make sure that local people get the best services possible. You may also have good ideas about improving and developing the way the Trust works.

4 **Will I need special training?**
Yes, some. Governors will be offered induction sessions covering things like the concept of FTs, the way the NHS works, finance and governance regimes and more about the role and responsibilities of being a Governor. There will also be regular training sessions to develop your knowledge on different parts of the service that we provide.
The Council of Governors as individuals or as a group can request additional training or skills in specific areas.

5 **What do Governors do?**
- Host meetings with the Members to listen to views, concerns and ideas
- Participate in meetings and meet with the Board of Directors to make sure that the Trust is aware of that information
- Attend joint meetings with people working in the Trust
- Discuss the Trust’s plans and ideas for development
- Plan how to engage and involve Members in our activities
- You could be a Member of a Trust working group looking at specific issues depending on your interests

6 **How much power will Governors actually have?**
Governors are important because they ensure that the Trust is accountable to local people. Governors have key responsibilities such as:
- The appointment and removal of the Non Executive Directors of the Trust
- The appointment and removal of the Chairman
- The selection of the FT external auditor
- The development of an active membership
- Acting as the eyes and ears of the membership about the quality of the service the FT provides
- Opportunities to work on specific projects

7 **How long will it take – how much time will I have to give up?**
To be efficient, the Council of Governors must meet often enough to carry out its work yet not too often that meetings become of little value.
- It is expected that there will be four Council of Governors meetings a year (apart from the first year of FT authorisation), plus the Annual Members Meeting. These meetings are the core commitment.
- Meetings with Members
- Induction and training meetings
- Governor workshops (though these are not compulsory)
- Some reading to prepare for meetings and to understand the issues
- The Council of Governors may decide to set up some sub groups

8 **Can I apply? How can I apply?**
Any Member of the Trust can apply to be a Governor. If you are not yet a member, you can easily join – Free Phone 0800 0132 530 or visit our website [www.leicspart.nhs.uk](http://www.leicspart.nhs.uk). When we run our elections you will be invited to complete a nomination form. This will ask you for a brief description of why you want to be a Governor and what you could offer. This will be used at the election time so that the voting Members know a little bit about the people they are voting for.

9 **What costs are involved?**
Governors do not get paid but are entitled to claim out of pocket expenses which are incurred through undertaking their role. The reimbursement policy is on the Trust website at [www.leicspart.nhs.uk](http://www.leicspart.nhs.uk) and available upon request from the Membership Office on 0800 0132 530.
10 **If I make a bad decision am I personally liable?**

No, the Trust has collective and individual indemnity in place. It is the Board of Directors who is accountable for ensuring the Trust conducts its business in line with legislation and the terms of the Terms of Authorisation, and for addressing all risks. Governors are bound by the Trust Constitution and the incorporated Standing Orders. You as an individual would not be in a position to make a personal decision; all decisions must be agreed as a Council.

11 **Voting**

As a Member you will be in a particular category – either staff or a member of the public.

- Members of the public can vote for 16 members of the public to be Governors; Leicestershire (8), Leicester (6), Rutland (1), Outside of these geographical areas (1)
- Members of staff will be able to elect 4 Governors
- There will be 11 appointed Governors from our partners, such as a local Primary Care Trust, Local Authorities, Universities and the community sector

12 **How long will I be in office?**

The term of office in the first instance will be either 2 or 3 years (dependent on your total number of votes) so that not all the Governors end their period of office at the same time. Once the first election has taken place, each subsequent election appointment will be for a period of 3 years. The maximum term of office is 6 years.

13 **What if I move – can I still be a Governor?**

You could still be a Member if you continue to live in England. If you move outside the area covered by your constituency you will have to resign as a Governor, but then you could stand as a Governor at the next elections if there is a vacancy in your new constituency.

14 **Support for Governors**

An induction programme will be developed for Governors. Ongoing training and development will be based on identified collective and individual needs. Potential Governors from all sections of society are encouraged and we will provide support to help people carry out this role.
THE COUNCIL OF GOVERNORS
Your Questions Answered

1. What is the key challenge to making the dual model of governance ie Council of Governors and Board of Directors, work well?

Meaningful working relationships between all key parties ie Governors, members, Board members, and staff.

Possibilities to be discussed further by the Council are:

Governors – communications with Executive (Staff)
- Member of staff looking after 4-6 Governors in terms of helping them understand how the Trust works, updating on new events
- Monthly newsletter to all Governors from the Trust Secretary giving latest news, developments, training opportunities etc
- Open door policy for Executives to all Governors
- Attendance at Council of Governor meetings of key staff support eg Executive Directors

Governors – with members
- Council “Open Day/meeting” with Governor led presentations
- Website updates
- Council/Governor information in “People Matters” publication.
- Governor led Members’ Fora exploring issues such as how services could be made more responsive and patient focused.
- Working with our Localities for engagement in different geographical areas.

Governors – communications with Non-Executives Directors (NEDs)
- Briefings for Prospective Governors
- NEDs attendance at Council of Governors events, and supporting governors at constituency events etc
- 1:1 Annual meetings with the Chairman
- Private sessions with the Senior Independent Director

Council of Governors – communications with Board of Directors
- Getting to know you speed dating (including Senior Leaders of the Trust)
- Summarised performance, quality and financial information from Board meetings
- Biannual Away Days with the Trust Board. Topics to be agreed but expected to include “Strategic Direction Review” led by the Board.
- Reports from Board to Council after meetings (and vice-versa).

2. How will the Council of Governors meetings be run?

The Council itself will shape how it is run but it is envisaged that the following principles will be applied:

- Vary the location of meetings around the counties and city
Foundation Trust Governors

Your questions answered

- Ensure locations are accessible
- Format the meetings so round table discussion/briefings are held followed by formal business
- Time meetings for 6.30pm start through to 9pm with sandwiches/drinks available from 6pm.
- Hold 3 to 4 times a year including the Annual General Meeting

3 What induction will Governors receive?

A 1 day induction is planned covering the following topics:

- How the national NHS works – Monitor, Care Quality Commission
- How the local NHS works
- Key facts for the Trust – what we do
- Who is Who – Executives’ responsibilities
- How we stay in control - governance and risk
- Strategic vision
- Current business priorities and planning cycle
- Roles and Duties for Council and Governors
- Council’s Annual Schedule of decisions/reviews/events for Council
- Performance and key issues - briefing process
- Code of Conduct and expenses
- Communications - Board, staff, members, voluntary groups, media
- Support and development training

4 What training and support can I expect?

There will be briefing session from staff and external groups at the Council meetings. Governors will also have access to Trust seminars such as the Clinical Forum programme and its planned for staff to run tailored half day training seminars on the afternoon before Council meetings to cover such areas as:

- Finances – local health economy Trust Finances
- Quality and Patient Experience
- Strategic issues – “The Environment scanning”
- Business planning and Service Developments
- Performance and Risk processes and accountability

5 In addition to Statutory Duties what might the Council get involved in?

There is a wide range of possible topics including:

- Annual health Check by the Care Quality Commission
- Development of our annual Quality Accounts
- Membership development and strategy for engagement
- Evaluating patient experience through membership of pertinent governance committees
- Involvement in service development initiatives
- Working with local community and patient groups
- Trust recruitment of senior posts