

On being a foundation trust staff governor

Introduction

The inception of NHS foundation trusts has not been without its difficulties but generally they have been received positively. Among other benefits, membership of a foundation trust provides an exciting opportunity to be elected as a trust governor. It is a new avenue through which doctors, including trainees, can participate in the upper level of discussions and debates regarding the future direction of a trust and influence it by representing the views of their colleagues to the trust board. This article draws on the authors' experiences as current and recent staff governors for two foundation trusts and provides a background to this role.

Foundation trusts

Foundation trusts, first introduced in 2004, are a relatively new type of NHS hospital run by local managers, staff and members of the public, which are tailored to the needs of the local population. Foundation trusts have much more financial and operational freedom than other NHS trusts and represent the government's commitment to de-escalating the control of public services. On successful application to become a NHS foundation trust, the accountability of a trust to the Department of Health and the Secretary of State for Health is replaced by a new accountability to members and governors, and to the independent regulator, Monitor.

Foundation trusts possess three key characteristics that distinguish them from other NHS trusts:

1. Freedom to decide locally how to meet their obligations
2. Accountability to local people, who can become members and governors

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3. Authorized and monitored by Monitor – independent regulator of NHS foundation trusts.

The benefits of this local approach to governance include a greater sense of ownership and engagement of the people who use the service, their carers, other members of the local public and staff in the running of public services, with a consequent improvement in the quality and responsiveness of services.

Foundation trust membership

Members of public from the catchment area of the trust are encouraged to become members of the foundation trust by filling in a short form; there is no membership fee.

Many current members of foundation trusts are service users or their carers; other members may have other experiences of health issues, e.g. management or policy making, and can therefore contribute much to the development of services and gain from foundation trust membership. There is an active drive to recruit members from all sub-sections of the local population. Permanent staff members working for the trust do not need to apply to become members; most staff are automatically made members of the trust, although they have the right to opt out. East London NHS Foundation Trust (2008), which is a mental health trust, carried out a survey of its members to establish why they decided to become a member. Some of the main reasons included a desire to:

- Be involved in improving services
- Obtain information about services
- Give something back to the community.

People were then asked how they would like to be involved in the life of the trust. The highest percentage of respondents was interested in 'seminars on specific mental health issues' (62%), followed by 'World Mental Health Day celebrations' (62%) and 'events to discuss trust plans for the future' (54%).

Trust members are able to:

- Take an active part in the life of the trust, helping to shape future plans
- Learn more about health and wellbeing through health-care seminars and open days

- Join in tackling the stigma (e.g. around mental illnesses) and discrimination that service users may face
- Help the trust to become more accountable and better at listening to the views of staff, service users, carers and the local communities
- Provide an important link for the trust into the wider community
- Receive a regular newsletter and other information about the trust's work
- Stand for elections or vote to elect governors (also known as council members) to make representations on the board of governors (or members' council) on their behalf (East London NHS Foundation Trust, 2009).

Board of governors and selection process

The trust's board of governors is the representative body, made up of elected members of the public, trust staff and appointed representatives of the trust's partner organizations. *Figure 1* (based on the actual structure of East London NHS Foundation Trust) illustrates the usual position of the board of governors in relation to the board of directors in typical governance arrangement of foundation trusts. The trust membership office coordinates the recruitment of members and their involvement with the foundation trust.

Anyone who has joined the trust as a member is eligible to stand for election to the board of governors. Governors must be at least 16 years of age at the date they are nominated. The statutory provisions of law and the trust constitution set out circumstances where people may not become or continue to be a governor. These exclusions are designed to ensure that only people with the required experience, skills and probity are appointed to the board of governors, and that conflicts of interest are prevented from arising. The exclusions include bankruptcy, conviction of an offence with a sentence of at least 3 months imprisonment or holding a political office.

The trust's constitution also contains the election rules which state how elections should be conducted. These elections,

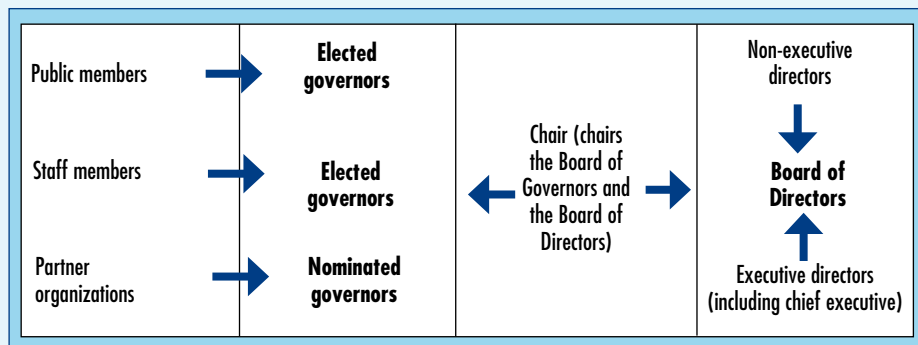


Figure 1. Typical governance arrangements of foundation trusts.

managed by the electoral reform services, are by postal ballot, using the single transferable vote system. Governors hold office for 3 years, and are eligible for re-election for a further term of 3 years. Their terms will end if they become ineligible or are disqualified from becoming or continuing as a governor under the constitution, or if the board of governors resolves to terminate their tenure of office in certain circumstances. The board of governors has allocated seats for partner organizations, including local primary care trusts, local authorities, universities and voluntary organizations.

All governors are expected to participate in induction sessions where they receive a resource pack with information about the trust and their role. The induction programme is an opportunity for the trust to ensure that the governors are clear about and supported in their role and provide a basis for their active involvement. At the induction sessions, governors have the opportunity to meet the trust board and various members of staff. There are presentations on the work of the trust and the role of the board of governors. For those new to the NHS, information is also provided on how the NHS works both nationally and locally. Additionally, governors are usually given an update on the future plans and strategic developments of the trust.

Suitable candidates

Table 1 outlines criteria for eligibility to become a staff governor. As with any public organization, there are rules about how the governor role should work:

- To become a public or staff governor it is necessary to be a member of the trust and be at least 16 years old at the date of nomination

- Public governors must live within one of the public constituencies of the trust
- Staff governors must be a member of staff within the relevant staff group
- Voluntary and temporary staff may become governors if they have worked continuously for the trust for 12 months.

Staff governors come from various backgrounds. It is important for doctors to take this role seriously and nominate able colleagues in order to represent their views to the trust. The diversity of staff putting themselves forward is shown by the current composition of the staff governors at the East London NHS Foundation Trust, which comprises:

- Specialty registrar (ST6)
- Medical secretary
- Consultant old age psychiatrist
- Charge nurse
- Primary care development manager
- Modern matron
- Consultant psychiatrist and psychotherapist.

Governors are required to respect the confidentiality of the information they are privy to as a result of their position on the board of governors. Governors will be expected to abide by the accepted principles of good practice in relation to holding public office. The Committee on Standards in Public Life is an independent public

Table 1. Eligibility criteria for staff governors

Essential criteria	Either current staff with the trust Or member of foundation trust
Desirable criteria	Enthusiasm to make a difference Knowledge of local issues Leadership experience

body which advises the government on ethical standards across the whole of public life in the UK, and has set out seven principles for the benefit of all who serve the public in any way (Committee on Standards in Public Life, 2009). These principles (Table 2) apply to all aspects of public life.

Roles and responsibilities

The board of governors has a number of responsibilities laid out in law and in the trust's constitution. The role of the board of governors is to:

- Advise the board of directors on how the trust can meet the needs of the members and local communities
- Be involved in strategic and forward planning for the trust
- Act as guardians to ensure the trust complies with its obligations
- Act as a link between the trust and local communities, including staff (Committee on Standards in Public Life, 2009).

Powers and duties of the board of governors

The board of governors:

- Must be consulted on forward planning by the board of directors, and the board of directors must have regard to their views
- Is to be presented with the annual report and accounts, and the report of the auditor on them
- Approves the appointment of the chief executive by the non-executive directors
- Appoints the chairman and other non-executive directors of the NHS foundation trust
- Represents the interests of the trust's members and partner organizations in the local health economy in the governance of the trust
- Regularly feeds back information about the trust, its vision and its performance to the constituencies and the stakeholder organizations that either elected or appointed them
- Must act in the best interests of the trust and adhere to its values and code of conduct
- Has to inform the independent regulator if the trust is at risk of breaching the terms of its authorization if these concerns cannot be resolved at a local level.

Table 2. The seven principles of public life

Selflessness	Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends
Integrity	Holders of public office should not place themselves under any financial or other obligation to outside individuals or organizations that might seek to influence them in the performance of their official duties
Objectivity	In carrying out public business, including making public appointments, awarding contracts or recommending individuals for rewards and benefits, holders of public office should make choices on merit
Accountability	Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office
Openness	Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands
Honesty	Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest
Leadership	Holders of public office should promote and support these principles by leadership and example

From Committee on Standards in Public Life (2009)

Limitations of the governors

A major restriction on the role of the board of governors is that although it can make recommendations to the board of directors, it cannot veto decisions made by the chief executive or the board of directors. Where the two boards have contrasting views regarding an issue, unless an amicable solution can be reached, the directors can choose to ignore the recommendations of the governors. This mismatch of power can result in the board of governors being seen merely as a layer of bureaucracy imposed by statute; this concern can (hopefully) be addressed with negotiation, mutual cooperation and by establishing a good working relationship between the directors and the governors.

Time commitments and available support

Governors will be expected to keep in communication with members, and the trust will facilitate and support governors to do so; the board of governors meets at least three times each financial year.

The trust provides support to enable governors to carry out their duties. The trust’s membership office will provide administrative support to the board of governors and its sub-groups and any meetings and events organized by the trust directly relating to the board of governors, governor development and membership.

Governors are expected to attend briefing and development events to gain insight into the workings of the trust and to discuss and develop their roles. In order to provide opportunities to meet governors in other foundation trusts and to get a perspective on national developments, there may be opportunities to attend conferences on behalf of the trust. As more trusts become foundation trusts, there will also be opportunities to meet other local governors.

Foundation trusts produce a quarterly newsletter that is sent to members and local organizations, giving information about the trust and its activities. Trust websites also have information of interest to members and governors and many of the key foundation trust documents can be accessed via this.

By law, governors may not receive any payment for undertaking their duties. However, they are able to claim expenses including travel, childcare or other carer expenses. If, because of a disability, a governor requires extra support at meetings, such as having someone to accompany him/her, he/she can also claim this as an expense.

The authors’ learning experiences

We were lucky that staff governor vacancies arose during the time of our posts with the

trusts. If you are on a rotation for 3 years, there is likely to be at least one opportunity to stand in elections. Lack of clinical seniority should not put you off from the idea of becoming a staff governor; KH became a staff governor while a trainee at ST3 level. You can start by ensuring you are a member of the foundation trust and if you live in the catchment area of another foundation trust, become a member there too. That way you will get regular newsletters and be aware of any upcoming vacancies as there is nothing stopping you from becoming a member of more than one foundation trust. You can stand in elections as a public member for the trust you do not work for, but you can only be a governor for one trust at a time.

The board of governors meets three times in a financial year; the meetings generally last for 2 hours. Other events, such as annual general meeting, induction and training sessions can last longer – some sessions have lasted from lunch-time until 7pm.

There may be potential difficulties around getting authorization to be away from clinical work to attend various meetings and training sessions. However, your time working as a staff governor is recognized as ‘work time’. Such commitments should be discussed with clinical and education supervisors; the authors were able to negotiate time off for these purposes without needing to use study leave.

Views of a recent staff governor (KH)

I was a staff governor in North East London NHS Foundation Trust for 16 months. What I most enjoyed about being a staff governor was being associated with the management of a high quality organization whose purpose is to serve public needs at a time of considerable change, and being in a position to contribute from my own experiences as a doctor.

As a staff governor, I quickly began to learn how ‘management’ works and that decisions which may appear to have been made hastily have actually gone through the board of governors who take their roles seriously. I was also aware of my new found ‘power’, having the ability to hire and fire the chair of trust, which was one of the most important tasks the governors

had within my first year. The governors have varied backgrounds and bring a wealth of experiences with them; together we can influence change within our organization. To succeed in our roles, we received training on how to read and interpret the Trust annual report and attended a development programme that was run exclusively for governors; there we met governors from all over the country, with whom we were able to share examples of good practice.

On a personal level, I particularly enjoyed being a panel member at a 'got a question about mental health?' session held at a local day centre. Foundation trust members and the general public were invited to attend this borough-wide event and put their questions to a panel of staff governors, service managers, clinical and associate medical directors, and the trust chair. It felt rewarding to meet staff, service users and the public, and to share ideas with them; it was also good practice in answering questions on the spot.

Views of a current staff governor (AE)

When I learned of the opportunity to nominate myself for the role of staff governor, I wanted to provide a strong voice for staff on the board of governors. I discussed this with various members of staff, and received a lot of encouragement from my colleagues even though they did not have any experience or knowledge of the role generally. Medical staff were less positive about the possibility of making a real difference through this avenue; I was reminded that, although I may represent the staff views, the trust could choose to ignore those views. I did not allow this to dampen my enthusiasm to play an active part in shaping the future of the trust that I genuinely care about. I looked forward to improving services for patients, carers and staff by representing the views of my dedicated colleagues that are a key part of providing mental health services.

As a governor I have the privilege and opportunity to make significant contributions to the running of the trust and participate in achieving health-care excellence. I provide a bridge between the community and the service providers. I also have an obligation to question and understand past

performance and become involved in future plans. For me, reducing the stigma and discrimination against mental health patients and workers remains an important issue.

Having recently been elected to the board of governors, I am conscious that I am joining a successful team and I feel ready to contribute in a positive way, using my own particular strengths.

Although I am the only trainee psychiatrist on the board of governors, I have received a lot of encouragement and respect from other more senior governors as well as the executive board. My initial anxieties about the time commitment have been outweighed by the job satisfaction.

In an era where 'management experience' has become a buzz phrase, I think being a staff governor provides an exciting opportunity for trainees to gain valuable experience with a role of serious responsibility and to make a real difference – something which is desired by doctors generally.

Benefits of the post

There is a general drive to encourage doctors to participate in management and related activities. The role of a staff governor demonstrates how one can influence change in the workplace as an individual and as part of a larger group. The authors' experiences show that as well as general benefits for training to become a consultant (providing leadership, improved organization and communication skills, and public speaking skills), there are exclusive management training opportunities that are available to post-holders. Various training sessions aimed specifically at the governors include minute and note-taking, chairing meetings, presentation skills, interviewee skills, and stress management

training; these are all skills relevant and useful to both trainees and senior clinicians. In addition, opportunities arise to be involved in events such as policy launches.

The key benefits of the post of staff governor are listed in *Table 3*.

Other related opportunities

Trusts also provide further training, development events and information meetings as required for board of governors. Opportunities also arise for governors to join working groups or committees of the trust; these can be taken up depending on the governor's availability and interests. For example, there may be opportunities to be involved in initiating and leading public meetings, representing the trust nationally, acting as chair of the governors, chairing a working group, assisting with non-executive director appraisal, sitting on appointments panels and promoting membership.

Trainees are often ill-informed of various management opportunities. It is beyond the scope of this article to discuss other opportunities for management experiences but membership of various other committees and groups can help develop an array of skills and provide ways to improve service provision; these include user involvement groups, carers groups, audit committees and physical health monitoring groups to name a few.

Conclusions

Representing the views of your colleagues is a privilege that provides opportunities to improve services and your own skill set, including management experience. As a staff governor, you can learn how the trust functions and help determine the future direction of your organization. Doctors in

Table 3. Key benefits of the post of staff governor

Excellent learning experience
Exposure to management activities
Thorough understanding of trust policies and business
Active participation in future trust plans
Provides insight into the general problems facing the NHS
Sharpens communication skills
Networking
Exclusive training opportunities

training are increasingly encouraged to take on leadership roles. Overall, it is a worthwhile and rewarding post. In the authors' experience, help is available to

integrate this role into busy schedules. The trust membership offices were helpful in answering queries and providing further guidance. [BJHM](#)

Conflict of interest: Dr A Ehjaz is a current staff representative on the East London NHS Foundation Trust Members' Council. Dr K Hussain was a staff governor for the North East London NHS Foundation Trust between April 2008 and August 2009. The views expressed here are only of the authors and not of either trust or their board of governors.

KEY POINTS

- Foundation trusts are accountable to members and governors, and to Monitor.
- As a governor, one can learn about how the trust functions and help determine the future direction of the organization.
- It is important for doctors to take this role seriously and to represent their views to the trust.
- The responsibilities of board of governors are varied but the role of governors is not without its limitations.
- The role does not attract a salary but training is provided and the experience can count towards 'management experience'.

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