

Bundle Council of Governors 8 September 2025

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**Public Meeting of the Council of Governors of the
Royal United Hospitals Bath NHS Foundation Trust**

Monday 8th September 2025, 10:00 – 12:00

**Venue: Room C, Education Centre (E7), Royal United Hospital,
Combe Park, Bath, BA1 3NG**

No	Item	Presenter	Action	Time	Enc.
Opening Business					
1.	Welcome, Introduction and Apologies: Sumita Hutchison, Antony Durbacz, Hannah Morley, Di Benham, Nick Gamble, Alison Born, John Palmer	Liam Coleman, Interim Chair	-	10:00	-
2.	Declarations of Interest		To note		-
3.	Minutes of the Council of Governors Meeting held on 11 th June 2025		For approval		Enc.
4.	Action List and Matters Arising		For approval		Enc.
5.	Presentation of the External Audit Letter	Michelle Hopton, Deloitte	For info	10:05	Enc.
6.	Operational Performance Recovery	Bernie Bluhm, Acting Chief Operating Officer	For info	10:10	Pres.
7.	Update from the Chief Executive and Managing Director Group Update	Cara Charles-Barks, Chief Executive	For info	10:30	Enc.
8.	NED Feedback	Joy Luxford, Non-Executive Director	For info	11:05	Verbal
Governance					
9.	Governor Log of Assurance Questions	All	For disc.	11:15	Enc.
10.	Constitution Approval	Roxy Milbourne, Interim Head of Corporate Governance	For approval	11:20	Enc.
11.	Working Group Proposal	Roxy Milbourne, Interim Head of Corporate Governance	For disc.	11:25	Verbal
12.	Election Update and Timeline	Roxy Milbourne, Interim Head of Corporate Governance	For approval	11:35	Enc.
Governor Updates					
13.	Lead Governor Report	Vivienne Harpwood, Lead Governor	To note	11:40	Verbal
14.	Stakeholder Governor Feedback	All Stakeholder Governors	To note	11:50	Verbal
Closing Business					

15.	Items for Future Work Plan / AOB	Liam Coleman, Interim Chair	For disc.	11:55	Verbal
Date of Next Meeting: 15th December 2025, 14:00 – 16:00 Venue: Room C, Education Centre (E7), RUH					

Key:

Enc. – Paper enclosed with the meeting pack

Pres. – Presentation to be delivered at the meeting

Verbal – Verbal update to be given by the presenter at the meeting

**Minutes of the Public Meeting of the Council of Governors of the
Royal United Hospitals Bath NHS Foundation Trust
Wednesday 11th June 2025, 14:30 – 16:30
Room C, Education Centre, RUH, BA1 3NG**

Present:

Alison Ryan, Chair

Public Governors

Anne- Marie Walker
Paul Newman
Viv Harpwood
Nick Gamble
Anna Beria
Sue Toland
Di Benham
Vic Pritchard
Ian Lafferty
Kate Cozens
Chris Norman

Staff Governors

None

Stakeholder Governors

None

In attendance:

Roxy Milbourne, Interim Head of Corporate Governance
Andrew Hollowood, Interim Managing Director
Paul Fairhurst, Non-Executive Director
Simon Harrod, Non-Executive Director
Sumita Hutchison, Non-Executive Director (*until 15:55*)
Joy Luxford, Non-Executive Director (*until 15:35*)

CG/25/06/01 Chair's welcome, introduction and apologies

The Chair welcomed everyone to the meeting. The Council of Governors noted that as no Staff Governors were in attendance, the meeting was not quorate. It was noted that there were no items for decision on the agenda and on that basis the Council of Governors agreed to proceed

Apologies had been received from Nigel Stevens, Hannah Morley and Antony Durbacz, Non-Executive Directors, and the following Governors:

Public Governors

None

Staff Governors

Craig Jones
Gary Chamberlain
Narinder Tegally
Craig Sanders

Stakeholder Governors

Alison Born
Johnny Kidney
Deborah Wilson
Lucy Baker

CG/25/06/02 Declarations of Interest relevant to items on the agenda

There were no declarations of interest raised.

Author: Roxy Milbourne, Interim Head of Corporate Governance	Date: 11 June 20225
Document Approved by: Alison Ryan, Chair	Version: 1.0
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CG/25/06/03 Approval of the minutes of the Council of Governors meeting held in public on 6th March 2025

The minutes of the meeting held on 6th March 2025 were approved as a true and accurate record of the meeting.

CG/25/06/04 Action List and Matters Arising

The action updates were agreed, and the items listed for closure were approved. The following action CG276 was discussed in further detail and Governors confirmed that they would welcome a written operational manual for Sharepoint. The Interim Head of Corporate Governance confirmed that she would look into this as the system was established by two staff who had left the Trust.

Action: Corporate Governance Specialist

CG/25/06/05 Update from the Interim Managing Director

The Interim Managing Director updates the Governors on the hospital's future direction as a Group, outlining the strategic priorities and planned developments. The Council of Governors asked questions and noted the update.

It was agreed that the Communications Team should be invited to Membership and Outreach meeting to discuss how they could support the Governors with comms to outreach into the community. Governors questioned whether the Trust magazine was being restarted, even if online only, and whether they could share the Friday communications updates with members.

Action: Corporate Governance Specialist & Comms Team

CG/25/06/06 NED Presentation

Joy Luxford introduced herself to Governors and provided an overview of her career and experience. The Council of Governors thanks Joy and welcomed her to the Trust.

CG/25/06/07 Joint Chair Introduction

The Chair welcomed Liam Coleman, Chair of Great Western Hospital NHS FT to the meeting. Liam introduced himself and the Governors spent time asking him questions. The Council of Governors thanked him for his time.

CG/25/06/08 Membership, Community Engagement and Development Strategy Task and Finish Group

Ian Lafferty provided a presentation on the Membership, Community Engagement and Development Strategy Task and Finish Group. Viv Harpwood extended her thanks to the Task and Finish Group for all of their hard work.

The Council of Governors noted the update.

CG/25/06/09 Lead Governor Report

Viv Harpwood provided an update and explained that Governors were keen to keep their working groups going. Together with Nick Gamble, she had attended a meeting with the ICB.

Author: Roxy Milbourne, Interim Head of Corporate Governance	Date: 11 June 20225
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She explained that this was the Chair's last meeting, she thanked the Chair for all of her support to the Governors during her time at the Trust.

The Council of Governors noted the update.

CG/25/06/10 Stakeholder Governor Feedback

There were no Stakeholder Governors in attendance.

CG/25/06/11 Items for Future Work Plan and AOB

The Chair noted that the Membership and Outreach Working Group should receive updates from the Communications Team regarding support with outreaching to the community as well as starting a dialogue with volunteers.

CG/25/06/12 Any Other Business

The Chair advised that the Employment Tribunal decision on Mr S Colbert v the Trust had been published today. She read out the reserved judgement as follows:

The unanimous decision of the tribunal is:

1. The claims for unfair dismissal, wrongful dismissal, victimisation, detriments done on the ground that the claimant made protected disclosures, and automatic unfair dismissal (dismissal for reasons that the claimant made protected disclosures), do not succeed and are dismissed.
2. The claim for harassment related to race was dismissed on withdrawal.

The Chair extended her thanks to Governors for all of their support during the course of her term of office.

The meeting closed at: 16:30

Agenda Item: 4.0

**Action list of the Council of Governors of the Royal United Hospitals Bath NHS Foundation Trust
following the meeting held on 11th June 2025**

Action No	Details	Agenda Item Number	First Raised	Action by	Progress Update & Status	Lead
CG276	Lead Governor Report Corporate Governance Manager to arrange a further SharePoint training session for Governors and to provide some documentation to go alongside this. Update from June 2025 Governors were asked whether they were utilising SharePoint, and whether it would be helpful to provide another training session. They confirmed that they would welcome a written operational manual, and the Interim Head of Corporate Governance confirmed that the Corporate Governance Specialist would be asked to look into this.	CG/25/03/12	March 2025	Dec 2025	This action has not yet been completed. The Corporate Governance Specialist has now left the Trust, and this will be picked up by the Corporate Governance Manager prior to the next meeting in December. Open	Corporate Governance Specialist
CG278	Update from the Interim Managing Director Corporate Governance Specialist and Communications Team to confirm whether the Trust magazine was being restarted, whether online or in print, and whether Governors could share the 'RUH in the News' updates with members.	CG/25/06/05	June 2025	Sept 2025	The Communications Team is in the process of formulating an update. Open	Corporate Governance Specialist / Communications Team

Council of Governors

Date:

8th September 2025

Agenda item:

5

Title:

Annual Audit Letter

Items:

Enclosed



Royal United Hospitals Bath NHS Foundation Trust

**2024/25 External Audit Presentation to the
Council of Governors – 4 September 2025**

Scope of work and approach

We have three key areas of responsibility under the Audit Code

Financial statements

We will conduct our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)), the Code of Audit Practice issued by the Comptroller & Auditor General and applicable law. The Group prepares its accounts under the Group Accounting Manual ("GAM") which is issued by the Department of Health and Social Care.

We are also required to issue separate group reporting to the NAO on the Group's separate return required for the purposes of its audit of the Whole of Government Accounts and departmental accounts.

Annual Report

We are required to consider the completeness of the disclosures in the Annual Governance Statement in meeting the relevant requirements and identify any inconsistencies between the disclosures and the information that we are aware of from our work on the financial statements and other work.

As part of our work we review the remuneration report and annual report and compare with other available information to ensure there are no material inconsistencies. We also review any reports from the Care Quality Commission, NHS England and other relevant regulatory bodies and any related action plans developed by the Group.

Value for Money

We are required to consider the arrangements that the Trust has made securing financial resilience and economy, efficiency and effectiveness in its use of resources, if we identify any significant weaknesses to make recommendations, and to provide a narrative commentary on arrangements.

To perform this work, we are required to:

- Obtain an understanding of the Trust's arrangements sufficient to support our risk assessment and commentary;
- Assess whether there are risks of a significant weakness in the Trust's arrangements, and perform additional procedures if a risk is identified. If a significant weakness is identified, we report this and an accompanying recommendation;
- Report in our audit opinion if we have reported any significant weaknesses; and
- Issue a narrative commentary in our Auditor's Annual Report on the arrangements in place.

Key Findings

Financial performance

Deficit

The Group made a deficit for the year of £2.4m (£2.57m deficit in 2023/24).
The Group's adjusted financial performance deficit was £4.2m (£3.49m deficit in 2023/24).

Cash Position

The Group's cash balance as at 31 March 2025 was £37.55m (£34.53m in 2022/23).

Cost Improvement Programme

The Trust's 2025/26 plan is based upon a forecast deficit on a control total basis of £1.95m. This assumes efficiency savings of £29.7m (4.8% of operating expenditure). This compares to planned efficiency savings for 2024/25 of £36.6m (6.1% of operating expenditure), of which the Trust reported achieving £32.8m, or 89.5% of plan.

We reviewed the Trust's planning process and noted reviews of the assumptions by the following committees (People, Quality Assurance, and Finance and Performance Committees). As at submission of the plan on 26 March 2025, only £25.3m had been identified; with £21.4m of this classified as high risk. £4.4m of its savings target relates to its share of the ICB-wide savings target of £11m.

NHS Oversight Framework

To provide an overview of the level and nature of support required across systems and target support capacity as effectively as possible, NHS England and NHS Improvement have allocated trusts and ICB's to one of four segments. A segmentation decision indicates the scale and general nature of support needs, from no specific support needs (segment 1) to a requirement for mandated intensive support (segment 4).

The Trust was rated as 3 in the current and prior year.

Key Findings

Audit Findings

Financial Statements

We received the financial statements in line with the NHS timetable. During the audit it was noted that immaterial adjustments had been made to the prior year comparative period which is not permissible under accounting standards. This was corrected in the final version.

No further significant changes were made to the initial financial statements provided to audit.

Annual Report (including AGS and Remuneration Report)

The Annual Report was received on the 9th May with the AGS following on the 29th May. We will work with the team to agree a timetable for the Annual Report and AGS to align with the NHS deadlines for FY26.

Controls

Several recommendations were raised relating to control improvements as reported in our Final Report to the Audit & Risk Committee dated 18 June 2024. Good responses to these were provided by management.

Value for Money (VFM)

We identified one significant weakness which was reported in our Final Report to the Audit & Assurance Committee dated 18 June 2025. This related to:

Financial sustainability – The Trust failed to achieve its planned operating surplus of £5.3m during the year, falling short by £7.3m, and achieving an operating deficit of £2.4m. It achieved an adjusted deficit (control) of £4.2m against its plan to breakeven. Additionally, it failed to achieve its entire savings plan, reaching only 89% (£32.8m) of its planned £36.6m.

The savings plan for the 25/26 financial year is £29.7m. However, £18m of this amount remains an opportunity, with £4.4m unidentified. Given the deteriorating financial position of the Trust, we have noted that the Trust may be unable to achieve its 2025/26 financial plan of £1.9m deficit (and an adjusted breakeven position).

Audit Report

Our audit report was unmodified with the exception of reflecting the VFM significant weaknesses noted above.

Purpose of our report and responsibility statement

Our report is designed to help you meet your governance duties

What we report

Our report is designed to provide the Council of Governors of Royal United Hospitals Bath NHS Foundation Trust with the key findings identified during the external audit of the Annual Report and Accounts for 2024/25 in line with the requirements of our terms of engagement.

Our report summarises the findings from our Final Report to the Audit & Risk Committee dated 18 June 2024.

The scope of our work

Our observations are developed in the context of our audit of the financial statements.

Use of this report

This report has been prepared for the Council of Governors of Royal United Hospitals Bath NHS Foundation Trust, as a body, and we therefore accept responsibility to you alone for its contents. We accept no duty, responsibility or liability to any other parties, since this report has not been prepared, and is not intended, for any other purpose. Except where required by law or regulation, it should not be made available to any other parties without our prior written consent.

What we don't report

As you will be aware, our audit was not designed to identify all matters that may be relevant to Royal United Hospitals Bath NHS Foundation Trust.

Also, there will be further information you need to discharge your governance responsibilities, such as matters reported on by management or by other specialist advisers.

Finally, our views on internal controls and business risk assessment should not be taken as comprehensive or as an opinion on effectiveness since they have been based solely on the audit procedures performed in the audit of the financial statements and the other procedures performed in fulfilling our audit plan.

Deloitte LLP

Bristol | 4 September 2025



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Report to:	Public Council of Governors	Agenda item:	6
Date of Meeting:	8 September 2025		

Title of Report:	Operational Performance Recovery
Status:	For Information
Board Sponsor:	Bernie Bluhm, Acting Chief Operating Officer
Author:	Olivia Lynch, Senior Business Manager to Chief Operating Officer
Appendices	None

1.	Executive Summary of the Report
This report provides an update on operational performance and the actions being undertaken to address key risks and issues. The report includes updates on: UEC - July performance - ambulance handover times, 4 hour performance, non-criteria to reside - Risks to Recovery & Key Mitigations Cancer - July performance – 28-day, 31-day and 62-day performance - Risks to Recovery & Key Mitigations Diagnostics - July performance – diagnostic waits - Risks to Recovery & Key Mitigations RTT - July performance – 18 week, over 52 weeks and wait to first outpatient appointment performance - Risks to Recovery & Key Mitigations	

2.	Recommendations (Note, Approve, Discuss)
The Council of Governors are asked to note this report.	

3.	Legal / Regulatory Implications
(Trust Single Oversight Framework)	

4.	Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
This report includes information from the Integrated Performance Report which is linked to the Board Assurance Framework and Risk Register.	

5.	Resources Implications (Financial / staffing)
Resource implications are set out in the report.	

6.	Equality and Diversity
N/A	

7.	References to previous reports/Next steps
New agenda item.	

8.	Freedom of Information
Public	

9.	Sustainability
None identified.	

10.	Digital
None identified.	

RUH Operational Performance Recovery Update

Public Council of Governors - 8th September 2025

The RUH, where you matter

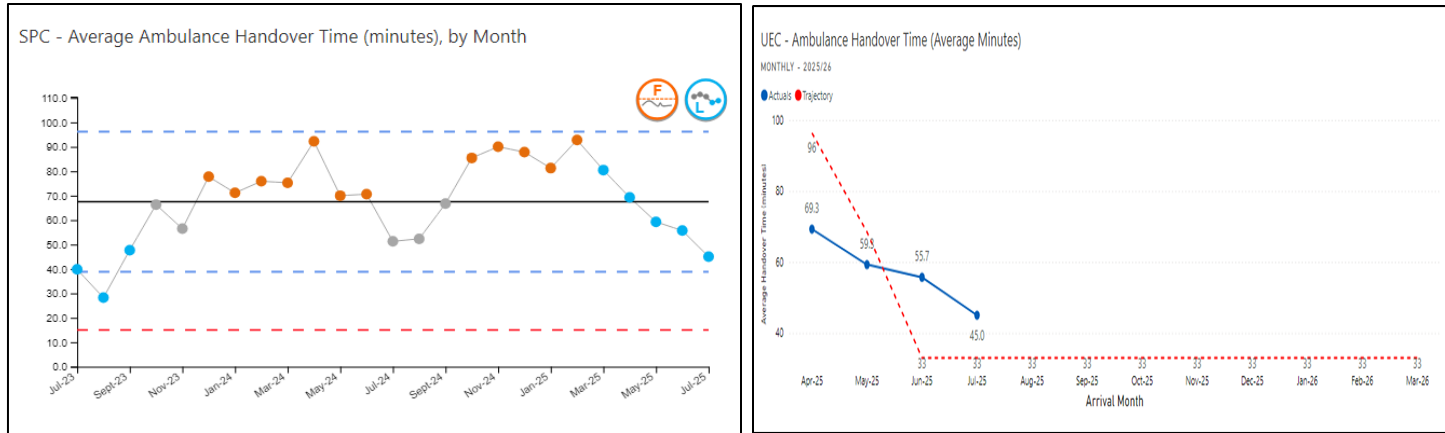
Ambulance Handover Times

We are driving this metric because..

Performance Target:

The Trust is not meeting the national standard of offloading ambulances into our Emergency Department within 15 minutes. The average offload time in Q1 2025 was 80 minutes. Ambulance offload delays reduce emergency response capacity, delay critical care, and strain hospital resources, putting patient safety and community health at risk.

Average ambulance handover = 33mins (30th June 2025)



The average ambulance handover delay for July 2025 was 45.0 minutes, a reduction of 10.7 minutes on average compared to June 2025. Through July 2025 the total hours lost was 1,377. This is a 332-hour decrease compared to last month's lost hours of 1,709.

56.2% of handovers were completed within 30 minutes, an improvement of 16.1% since last month. Additionally, handovers taking place in less than 15 minutes improved from 16.4% to 28%. This tells us that the average handover time is confidently decreasing.

July 2025 performance is 12.03 minutes behind trajectory; August so far is currently showing a worsened position, at 14 minutes behind trajectory (11/08/2025).

Understanding Performance
Blockers to achievement: ED overcrowding due to. - Exit block due to lack of flow into downstream wards - ED used as default capacity when assessment areas are full - Delays in ED senior decision making particularly overnight - Current pit stop being used for extended assessments ED Footprint: - Limited physical space to accommodate additional stretchers - Overcrowding in shared UTC waiting room - Stretchers being over-used by ambulance colleagues and RUH staff

Countermeasures	Owner	Due Date
Repurpose Fit2Sit as 'Ambulatory ED', with a reviewed SOP to support flexible use for ambulatory patients pre/post treatment and awaiting inpatient beds.	Leadership team	04/08/2025 Ongoing improvement.
Attend BSW meetings, engage with change, support the socialisation of process to meet average 33min handover.	TT/BI	Complete, ongoing
Ensure all RUH receiving units are trained in the use of XCAD to prevent ~107.5 breaches (average 56hrs) monthly, excludes ED.	Improvement Team	22/08/2025
Increased focus on early escalation proactive rather than reactive) joint working with clinical site team - liaison role attending regular ED huddles.	SH	Ongoing
Ensure ongoing adherence to standard procedure of the use of resus and high care spaces to offload ambulances.	TT	Ongoing

Risks and Mitigation
- Risk of >45min handover duration. - Site/ED extended handover process in place. - Risk of patient deterioration in an ambulance not offloaded. - RUH ED review of deteriorating pts, QI project in progress.

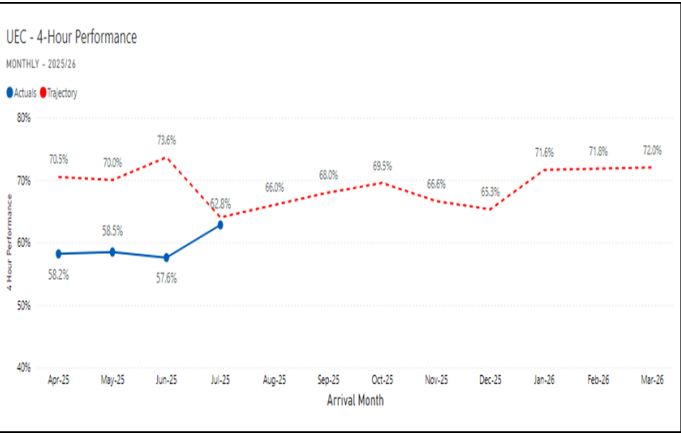
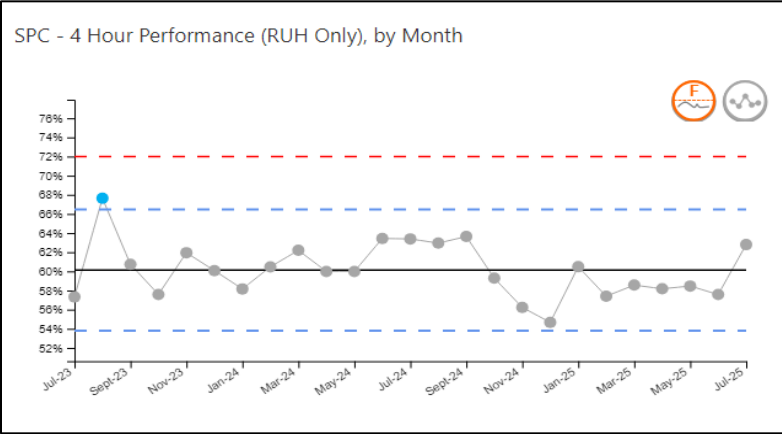
4 Hour Performance

We are driving this metric because..

The Trust is not meeting the national target for 4hr performance, there is a known negative effect on mortality against extended wait times within an emergency department setting.

Performance Target:

78% by March 2026 (72% excl. MIU)



	Admit	Non-admit	Total	Target
ED	30.65%	42.58%	36.48%	42%
CED	74.89%	88.74%	86.76%	95%
UTC	66.22%	88.51%	86.86%	95%
Total	37.58%	73.36%	62.79%	72%

*78% target incl. MIU

Understanding Performance

Blockers to achievement:
ED overcrowding due to.

- Exit block due to lack of flow into downstream wards
- ED used as default when assessment areas are full
- Delays in ED senior decision making particularly overnight
- Delays in speciality response times

UTC

- Streaming and redirection is not consistently applied
- UTC is not closing at midnight as model intended
- UTC clinicians assessing and treating non-UTC activity
- UTC assessment capacity being used by admitting specialties
- Inconsistent GP cover
- Insufficient segregation of UTC and Majors activity

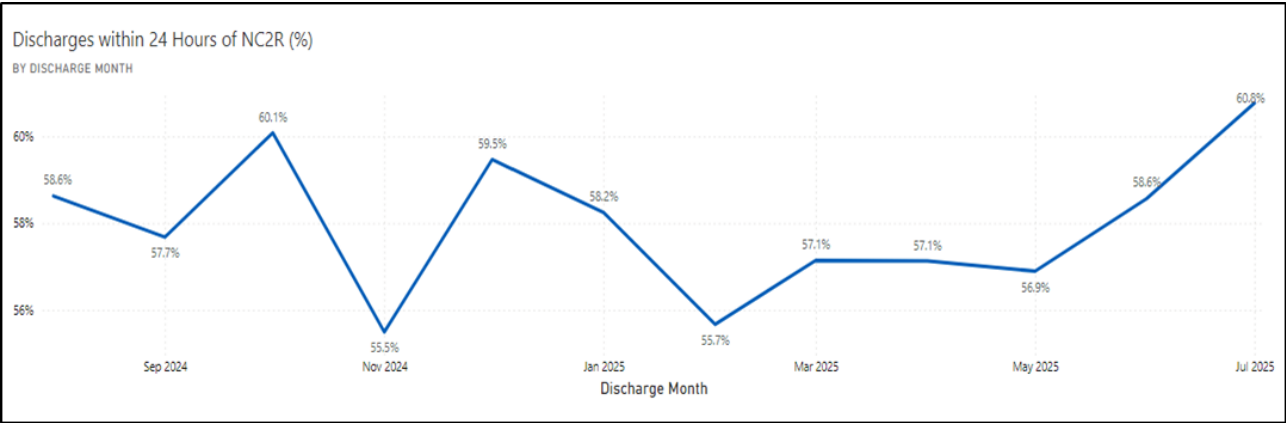
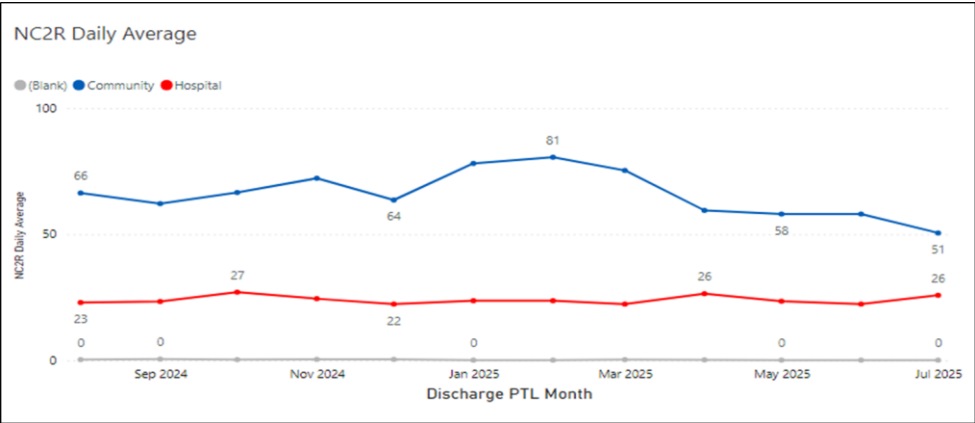
Countermeasures	Owner	Due Date	Risks and Mitigation
Provide draft business case for ED medical staffing to mitigate gaps identified within ECIST demand vs capacity modelling.	MP/BI/CJ	15/08/2025	- Risk of increase mortality due to extended wait times in ED/UC. - Risk of staff burnout and disengagement due to overcrowding. - UEC improvement programme to reduce overcrowding.
Redefine what is a UTC patient criteria, supporting right patient in the right place, at the right time.	JR	18/07/2025 Complete	
Implement front-door streaming in UTC following the launch of UTC patient criteria.	JR/TT	14/08/2025	
Repurpose Fit2Sit as 'Ambulatory ED', with a reviewed SOP to support flexible use for ambulatory patients pre/post treatment and awaiting inpatient beds.	Leadership team	04/08/2025 Ongoing improvement.	

Non-Criteria to Reside

We are driving this metric because..

The Trust is not meeting the national standard for the number of patients, community and hospital responsibility, who no longer have criteria to reside. In July 2025, the average number of NCTR patients per day was 76.5, a reduction of 4 patients compared to June 2025. Discharges within 24 hours of NCTR increased by 2.2% in July to 60.8%. A total of 40 patients per day (community and hospital responsibility) is to be delivered in line with the BSW trajectory, in July this number was a daily average of 51 patients.

Performance Target:



Understanding Performance

Blockers to achievement:

Community capacity for pathway 1 and 2 patients, more specifically in the Wiltshire locality; RUH referral demand exceeds available capacity.

Hospital responsibility NCTR has not significantly reduced compared to April 2025 baseline (26.5 patients), in July reported a daily average of 25.9 patients.

Countermeasures

Home is Best focus on admission avoidance with system colleagues.

Owner

Heather Cooper

Due Date

Q2 25/26

Further embed P0 therapy referral guidance across all wards – aim for zero P0 therapy delays (Hospital responsibility).

Medicine DMT

Q2 2025/26

75% reduction in hospital-related discharge delays (pathways 1-3) and <5 pathway 0 patients 24 hours post NCTR per day.

Medicine DMT

Q1 2025/26

Monitoring of thresholds for discharge post NCTR for P1-P3 and escalation to a new twice weekly tactical NCTR touchpoint to reduce length of stay post NCTR. In place and monitored daily through the BSW Touchpoint call and includes the reporting of P0-P3 discharges against the BSW daily trajectory.

Sarah Hudson

Achieved

Implementation of the NHS Federated Data Platform Optimised Patient Tracking and Intelligent Choices Application (OPTICA) to establish an accurate and reliable data system to identify and track patients without criteria to reside. Platform implemented successfully 20/05/2025, two weeks of parallel working with the previous process and week commencing 02/06/2025 OPTICA used exclusively with no shadow monitoring. Next steps to embed processes and develop output reports to support action completion to increase discharges within threshold.

Sarah Hudson

Achieved

Risks and Mitigation

- Non-delivery of the BSW community responsibility NCTR reduction trajectory to deliver the equivalent of 40 patient per day (or 9-10% of the non-elective bed base). The impact of which will be the non-closure of escalation and core bed capacity in line with the bed reduction plan.

Urgent and Emergency Care

There are some significant issues and risks to the recovery programme for which mitigations are being progressed

Key Risks & Issues	Mitigations
<u>Issues</u> 1) £4m opportunity was based on 30 bed NCTR reduction for 365 days which was unachievable from M1. 2) NCTR position remains above required levels and is not reducing at the level needed to support phased bed reduction plan. 3) NEL demand has increased 7.5% in comparison with Q1 2024/25. 4) ED staff burnout, vacancies, doctors in training shortages and ongoing sickness impacting on the ability to engage in improvement schemes. <u>Risks</u> 1) Current bed reduction plan does not allow for winter escalation capacity. 2) Unable to enact bed reduction plan due to NCTR levels and NEL demand, resulting in inability to deliver cash releasing savings currently identified. 3) Unable to identify further savings opportunities to achieve £4m target. 4) ED senior medical staffing numbers are not aligned to demand profile and cannot be mitigated in the current funded budget 5) Capacity of operational teams to deliver the required improvements across all 4 constitutional standards	1) Continue to closely monitor performance across all workstreams 2) Home is Best programme working collaboratively with community providers and Local Authorities regarding NCTR, including focussing internally on actions to reduce hospital delays and delays across the interface 3) BI team support to review demand increase and potential mitigations 4) ED staffing capacity and demand review and proposal, change management support available to support staff, new rotation of doctors in training due to start in August 5) Ongoing review of further productivity opportunities for UEC including non-elective surgical length of stay 6) GIRFT further faster programme

28 Day Cancer Performance

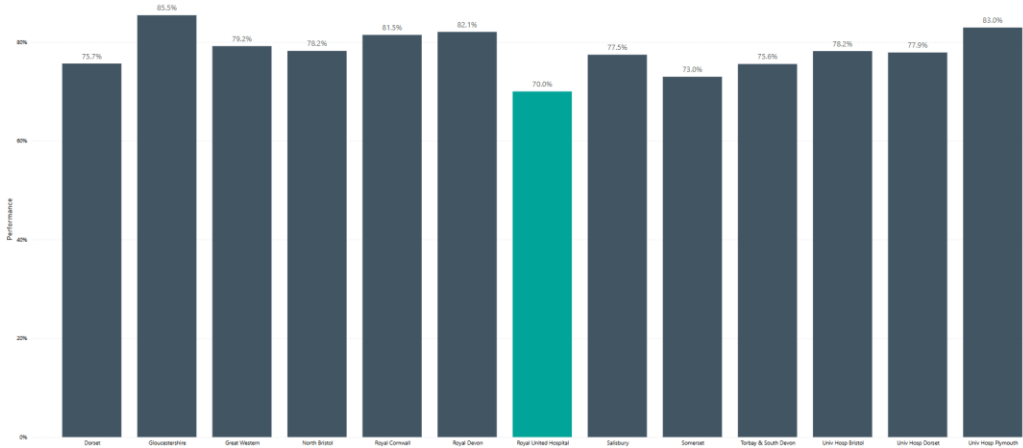
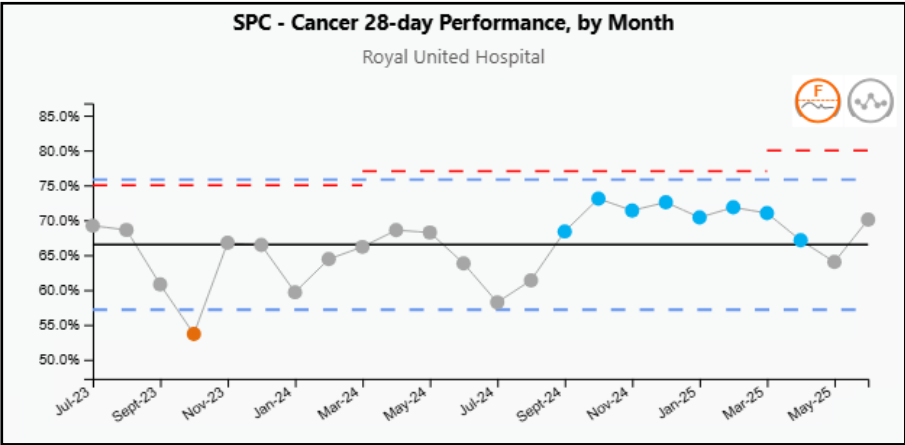
We are driving this metric because..

The Trust is not meeting the national 28 Day Faster Diagnosis Standard target. There is a known link between delayed diagnosis of cancer and poorer outcomes for patients. The Trust is currently in NHSE TIERING for cancer performance.

Performance Target:

80% by March 2026 (increase from 77% in 2024/25)

SPC & supporting data if required



Understanding Performance	Countermeasures	Owner	Due Date	Risks and Mitigation
Performance improved in June to 70.0%. Performance remain consistent in July and August. Recovery initiatives delivering improvement from September-November. Top contributors: Breast, Colorectal, Gynaecology, Urology In month challenges: - Breast improved 14% to 80% with one-stop increasing to full capacity from the beginning of June with locum cover - Colorectal breaches due to Gastro OPA waits for IDA decreased slightly to 25% of total breaches, but Colorectal F2F breaches increased from 36% to 40% - Imaging/report and endoscopy at approximately 3 weeks - Gynaecology improved to 65% - PMB OPA wait and outsourced histology at 3 weeks - Urology improved 16% - prostate MRI report wait increased	Breast 2nd locum - to reduce one-stop waiting time IDA service – Gastro OPA WLIs Increase endoscopy weekend insourcing Gynae PMB WLIs Hysteroscopy clinical guideline change Histology outsourcing – 100 cases per week Prostate pathway STT Radiology resource directed to prostate MRI reporting Revised biopsy protocol	HW TS TS AJ LA EW EJ NA EJ	September 2025 September 2025 August 2025 August 2025 August 2025 August 2025 October 2025 August 2025 September 2025	Risks: - Financial position - Recruitment - Sickness - Agency locums – availability / leave role at short notice - Skin insourcing dependency - Spikes in demand - Pressures from RTT, DM01 - Junior doctor rotation Mitigation: - SWAG/NHSE funding for WLI and in/outsourcing - Telederm - Pathway change (Gynaecology / Prostate)

31 Day Cancer Performance

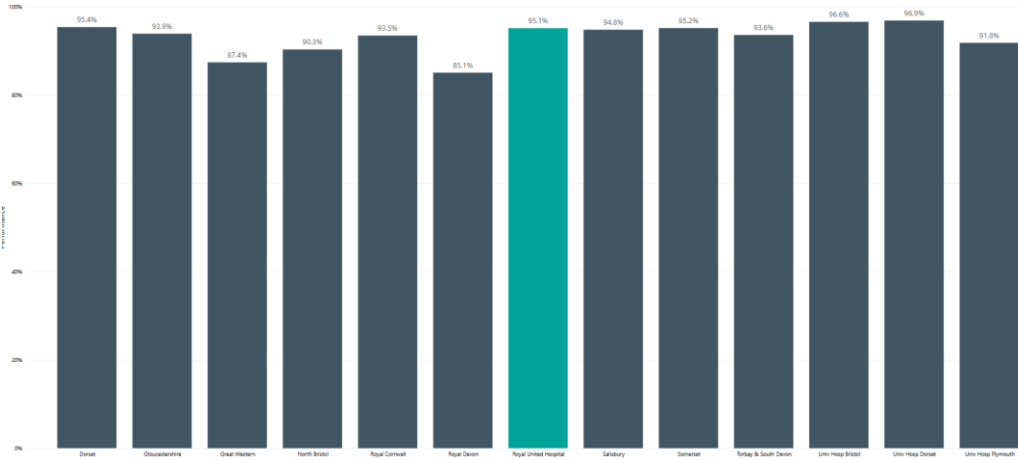
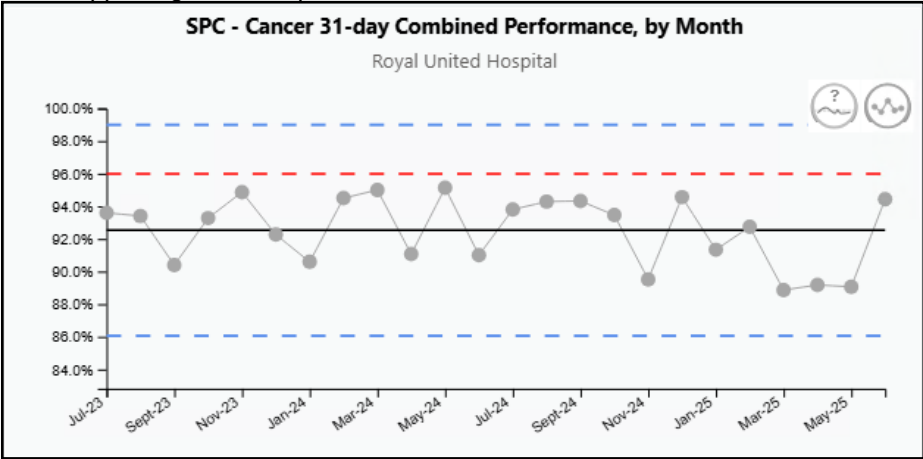
We are driving this metric because..

The Trust is not meeting the 31 Day DTT to Treatment combined standard with patients experiencing longer waits to commence first and subsequent treatments for cancer.

Performance Target:

96%

SPC & supporting data if required



Understanding Performance

Performance improved in June by 6% to 95.1%.

Risk to performance in Q2 due to derm MOPS capacity

Top contributors: Breast, Skin

In month challenges:

- Breast surgeon sickness and locum gap – new locum recruitment, commenced operating 03/07
- WLIs being agreed for August/September
- Full theatre allocation utilised in July
- Dermatology MOPS capacity worsening due to reduced clinical capacity and no uptake of WLIs following pay rate change
- Urology improvement by 7% in month to 96% – remaining breaches due to non-urgent subsequent treatments

Countermeasures

Breast theatre WLIs

Dermatology locum consultant request - approved

MOPS insourcing

Owner

HW

GJ

GJ

Due Date

August 2025

September 2025

September 2025

Risks and Mitigation

Risks:

- Sickness
- Agency locums – availability / leave role at short notice
- Reduction in WLI uptake following pay change (Skin)
- Increases in clinical demand from locums
- Pressures from RTT
- Junior doctor strikes
- Junior doctor August rotation

Mitigation:

- SWAG funding for WLI, outsourcing and locums

62 Day Cancer Performance

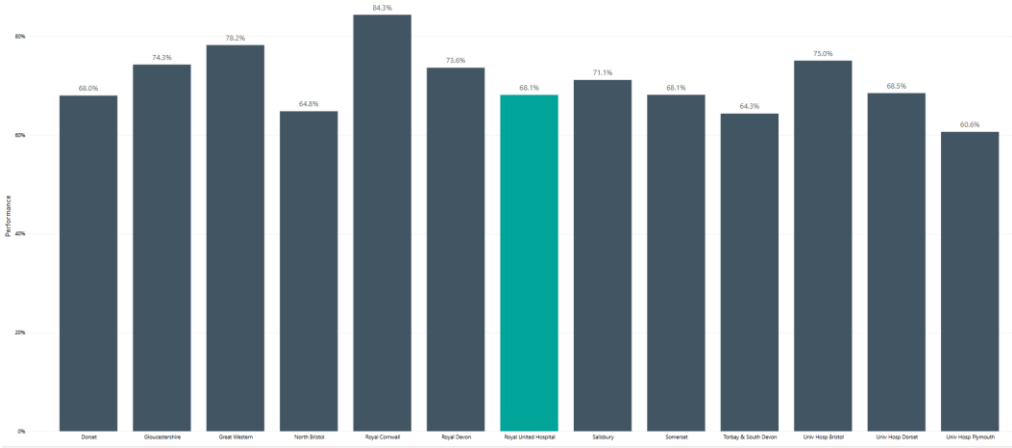
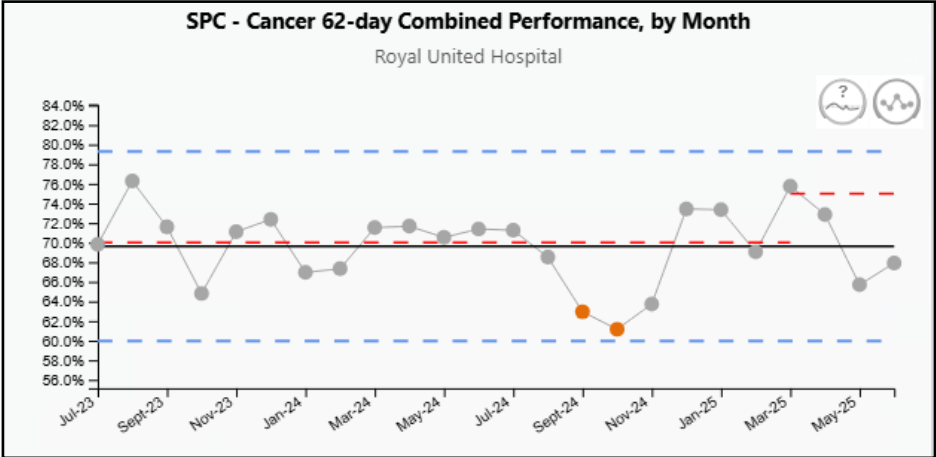
We are driving this metric because..

The 62 Day Referral to Treatment combined standard remains a focus for the Trust as a core access standard. The national target is increasing in 2025/26 to a level which the Trust is not yet achieving.

Performance Target:

75% by March 2026 (increase from 70% in 2024/25)

SPC & supporting data if required



Understanding Performance	Countermeasures	Owner	Due Date	Risks and Mitigation
Performance improved by 3% to 68.1% - Expected to deteriorate August/September before recovering from October Top contributors: Breast, Colorectal, Lung, Urology In month challenges: - Breast surgeon sickness/locum gap – increased waits for surgery and first appointments - Colorectal delivered best performance (65%) - Lung waiting times for CT, CT bx, PET, OPA (resp and onc) resulting in breaches - Urology breaches due to OPA and prostate MRI reporting - LATP still dependent on WLI – nursing capacity deficit - Patient choice breaches impacting several tumour sites - Reduction in Skin performance in July/August due to MOPS capacity – annual leave and junior doctor rotation	Breast theatre WLIs IDA service – Gastro OPA WLIs Endoscopy weekend insourcing increase Radiology WLIs for initial CT Dermatology locum MOPS insourcing Prostate pathway review – reduced OPA demand through STT and reduced LATP demand (GIRFT guidelines) Radiology reporting options review	HW TS TS NA GJ GJ KR NA/RW	August 2025 August 2025 August 2025 September 2025 September 2025 September 2025 September 2025 August 2025	Risks: - Sickness - Recruitment/retirement (Skin) - Agency locums – availability / leave role at short notice - Reduction in WLI uptake – change in pay (Skin) and annual leave over summer - Junior doctor strikes/rotation - Increases in demand - Pressures on resources from RTT, 4 hours, DM01 Mitigation: - SWAG funding for WLI

Cancer

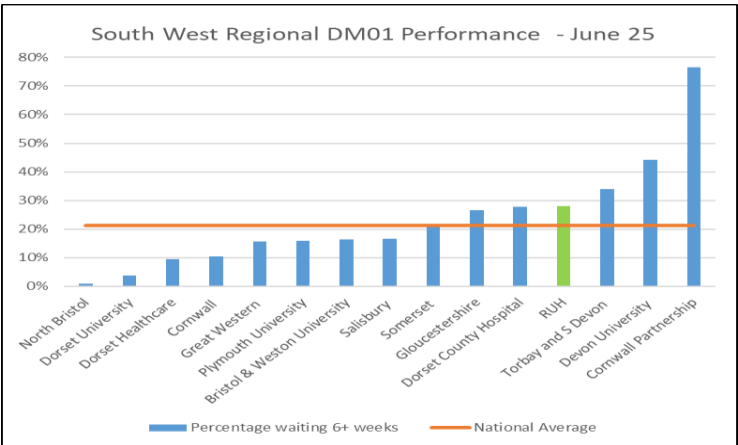
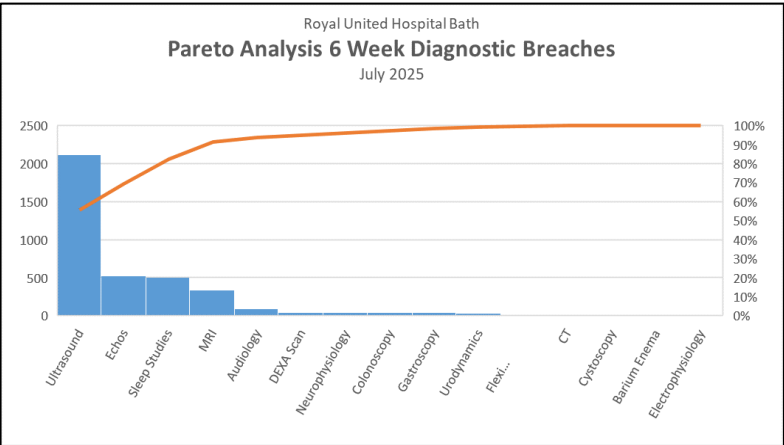
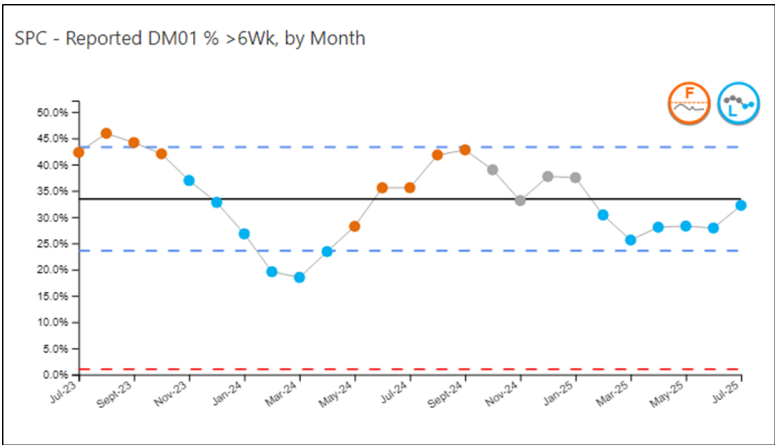
There are some significant issues and risks to the recovery programme for which mitigations are being progressed

Key Risks & Issues	Mitigations
<u>Risks</u> 1) Recruitment/national shortages/sickness of key clinical roles 2) Dependency on insourcing/locums, delays in mobilising additional capacity 3) Impact of resident doctor industrial action 4) Spikes in demand 5) Pressures on critical resources from other national standards 6) Junior doctor rotation (breast, skin)	1) Cancer Alliance/national funding for short term capacity 2) Demand management – tele dermatology, breast pain, prostate pathway revision (STT and reduced biopsies), gynaecology hysteroscopy criteria change (reduced demand) 3) Expansion of STT pathways (Prostate, IDA) 4) Timed pathway performance monitoring – rapid identification of issues/creation of recovery actions

Performance Target: 95% compliance (<5% breaches)

Patients are waiting longer than 6 weeks for their routine diagnostic test (DM01). The Trust is not meeting the national target for DM01 performance, which is ≤5% breaches for 2025/2026.

SPC & supporting data if required



Understanding Performance

- In July, 67.80% of patients received their diagnostic within the 6-weeks against the 71.94% target.
- Performance was 4.14% below trajectory. Total breaches increased by 750, with –261 diagnostics delivered in month when compared to June 25.
- August performance is forecasted at 72.5%.
- The **top contributors** to 6-week breaches were USS, Echo and Sleep Studies.
- Key drivers of underperformance were:
 - Increased demand for routine, urgent and cancer referrals.
 - Impact of Resident Doctor strikes (unplanned), especially on USS activity.
 - USS staffing issues (ongoing sickness/vacancies)
 - Delay in transferring Sleep Studies to Sulis CDC

Countermeasures

Countermeasures	Owner	Due Date
Continuation of WLIs for USS, MRI and Echo.	NA/BI	In place
USS insourcing at weekends	PN/NA	In place
Additional USS activity at Sulis CDC in-week (insourcing)	SH/NA	August 2025
Transfer of Sleep Studies activity to Sulis CDC.	Sulis CDC	Q2 25/26
Weekly review of each modality – performance, demand and activity against trajectory. (~3% performance gain)	NA/JS	In place

Risks and Mitigation

- Risks:**
 - Sickness
 - Funding for additional activity (WLI's, insourcing)
 - USS staffing
 - Additional strikes
- Mitigations:**
 - Productivity improvement (MRI acceleration)
 - Exploring additional sonographer insourcing (RUH and Sulis)

Diagnostics

There are some significant issues and risks to the recovery programme for which mitigations are being progressed

Key Risks & Issues	Mitigations
<u>Risks</u> 1) Ultrasound staffing and mobilisation of capacity 2) Radiology reporting capacity 3) Sleep capacity requires CPAP provision from UHBW to progress 4) RTT recovery activity will increase demand for diagnostic capacity 5) Increase in NEL demand will be a further ask of diagnostic capacity	1) Ultrasound position remains key risk. Additional Sulis capacity now on-line which will support recovery from September. Sulis increasing to 5-day service from 3-day plan. 2) Review underway in August to review options to increase reporting capacity given shortage of capacity. 3) Agreement reached with UHBW for CPAP capacity – sleep recovery plan now in progress

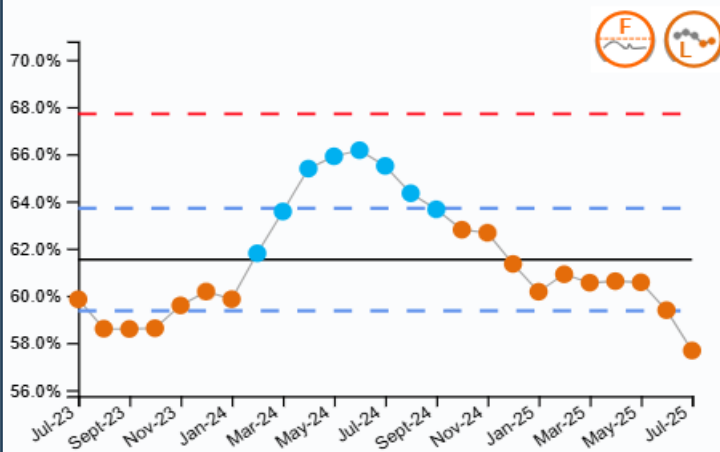
Referral To Treatment (RTT) 18 weeks

We are driving this metric because..
Performance Target: 67.7% by March 2026

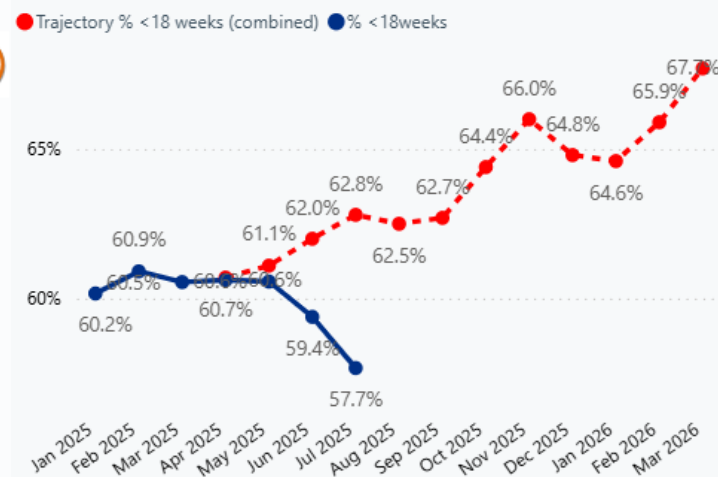
The Trust is not meeting the national Referral to Treatment target and patients are experiencing long waits for their definitive treatment. The national target is for the overall RTT performance to improve by 5% to 67.7% by end of March 26.

SPC Trust - % <18 weeks

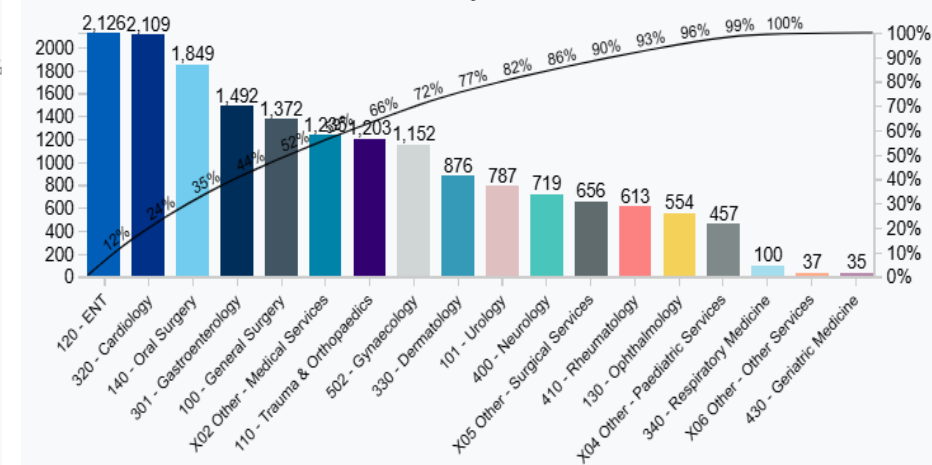
Royal United Hospital



Trust Trajectory - % <18 weeks



Jul 25 Pareto - Incomplete >18 week waiters



Understanding Performance

- RTT performance in July was 57.7% vs a target of 67.7%, trajectory 62.8% for July. This is 1.7% reduction on the previous month
- The top Contributors to over 18 week breaches were in the following 5 specialties.
 - ENT 2126 (39.7%)
 - Cardiology 2109 (49.5%)
 - Oral Surgery 1849 (48.9%)
 - Gastroenterology 1492 (48.9%)
 - General Surgery 1372 (58.9%)

Countermeasures

- ENT – insourcing plan being worked through utilising RTT funding
- Oral Surgery – additional WLI clinics to carry out LA extractions being scoped
- Gastro – review of insourcing outpatient clinics for 400 pts to clear routine over 52 week patients
- Trust taking part in 2nd NHSE validation sprint – 7 July to end of September – admin validation with clinical support as appropriate

Owner

- Division
- Division
- Wilson/Shaw
- Dando

Due Date

- Sept 2025
- July 2025
- Aug 2025
- Sep 2025

Risks and Mitigation

- Risks:**
- Radiology capacity for routine patients v. cancer pts
 - Specialist radiology capacity for Guided injections (T&O but spines in particular)
 - Physical space for gastro, ENT and general surgery
- Mitigation:**
- 2 additional clinic rooms being created in Gastro footprint

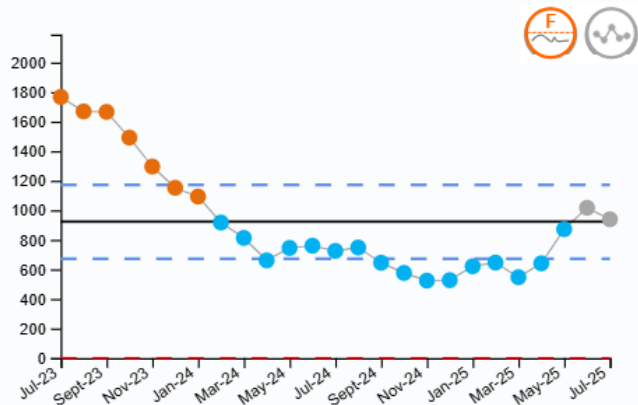
Referral To Treatment (RTT) over 52 weeks

We are driving this metric because..
Performance Target: <1% total waiters >52weeks by March 2026

Too many patients are waiting over 52 weeks for their definitive treatment.

SPC Trust - >52 weeks

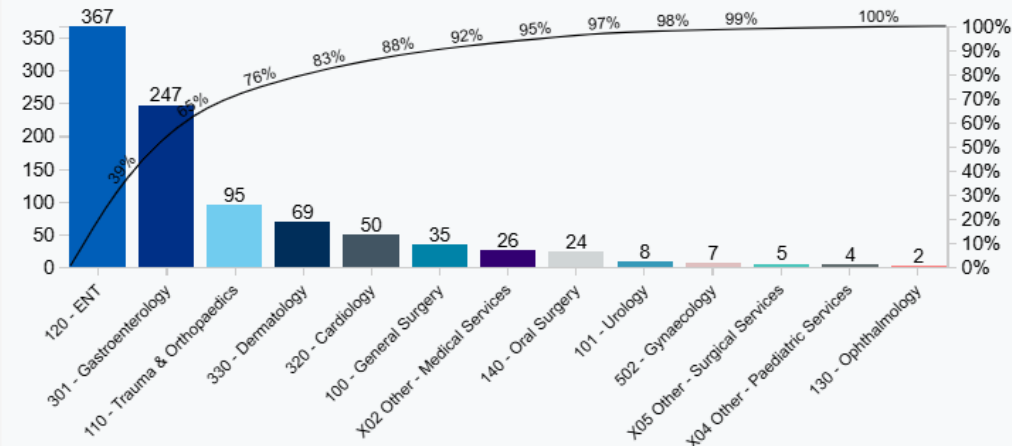
Royal United Hospital



Trust Trajectory - % >52 weeks



Jul 25 Pareto - Incomplete >52 week waiters



Understanding Performance

- The number of >52-week patients decreased from 1017 to 939 (-8%).
- 2.3% of total RTT patients have waited >52 weeks vs target of <1%, trajectory of 1.3% for July
- The top contributors to >52-week breaches (65%) are ENT and Gastroenterology:
 - ENT decreased in July from 501 to 367 patients waiting >52weeks (-27%)
 - Gastroenterology increased in July from 205 to 247 patients waiting >52weeks (+20%)

Countermeasures

T&O - Review of spinal pathway – imaging requests and support from Sulis
Spinal outpatient template review and increase by 2 new patients per clinic - complete

Gastro – IDA pathway change to nurse led freeing up 34 consultant appts for long waiters per week

Increase ENT referrals to Sulis to 160 per month including longest waiting patients

Continue 3 x weekly meetings for all patients waiting over 52 weeks in challenged specialties

Owner

Prosser/Price

Shaw/Wilson

Gillett/Schram

Dando

Due Date

June 25

July 25

July 25

Ongoing

Risks and Mitigation

Risks:

- Radiology guided spinal injection capacity remains a risk – review of pathway
- Routine radiology capacity
- Greater patient choice delays increases during spring/summer
- ENT outpatient capacity

Mitigations:

- Gastro recovery plan refresh
- Super Saturdays for spinal patients planned for August @ RUH

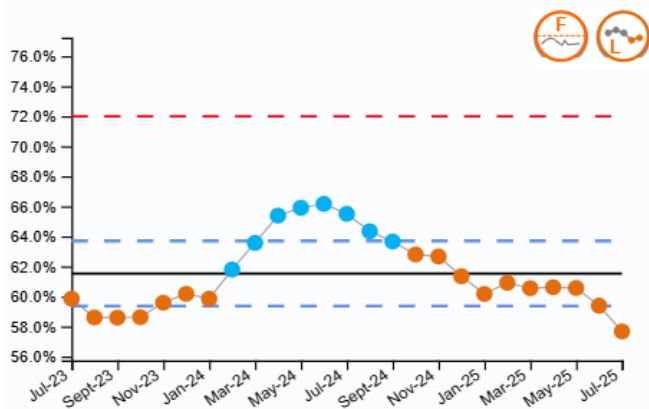
Referral To Treatment (RTT) Wait to 1st Outpatient Appointment

We are driving this metric because:
Performance Target: 72% of patients waiting for New OP Appt <18w by March 2026

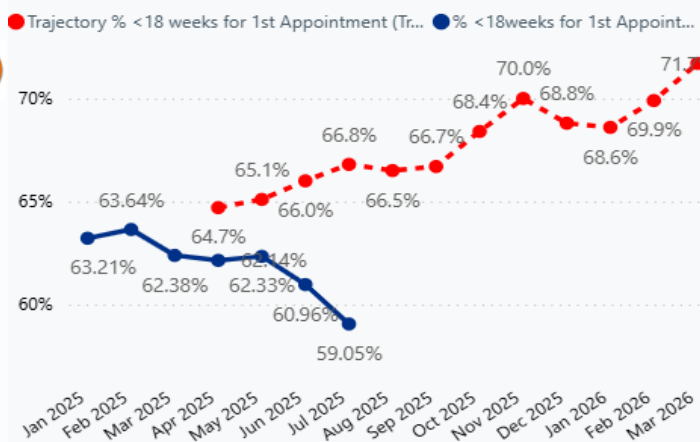
Describe the problem and why it's important
72% of patients waiting for a new OP Appt must be <18weeks by March 2026

SPC Trust - % <18weeks for 1st Appointment

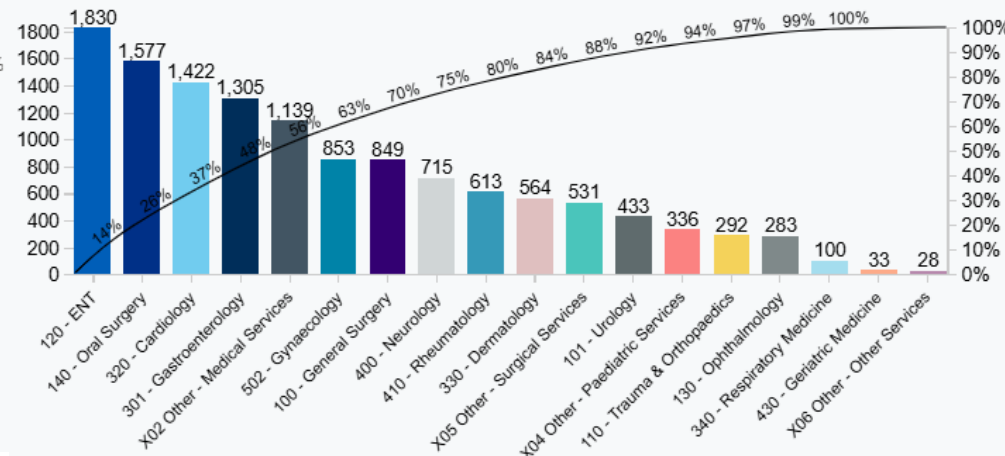
Royal United Hospital



Trust Trajectory - % <18 weeks for 1st Appointment



Jul 25 Pareto - Incomplete >18week waiters for 1st Appointment



Understanding Performance

- 59% of patients were waiting <18 weeks for a 1st outpatient appointment vs a target of 72%, trajectory of 66.8% for July. This is -1.91% on the previous month
- The top contributors of over 18-week breaches for 1st appointments were
 - ENT 1,830 (37.69%)
 - Oral Surgery 1,577 (47.52%)
 - Cardiology 1,422 (54.63%)
 - Gastroenterology 1,305 (47.86%)

Countermeasures

- WLI in Cardiology – delivering 1,000 new appts per year – currently agreed 8 weeks in advance through VCARP
- Short term capacity to recover backlog in Cardiology approved through RTT funding – current gap is 34 patients per week
- Oral Surgery – RTT funding approved for Specialty Dr and 2 Dental nurses to support LA lists in week
- Insourcing plan agreed for ENT – start date September

Owner

- Frape
- Frape
- Gillett/Brown
- Gillett/Ashworth

Due Date

- Ongoing
- August 25
- Oct 25
- Sept 25

Risks and Mitigation

- Risks:**
- ENT physical space
 - Recruitment timelines
- Mitigations:**
- Cardiology Recovery Action Plan being developed including capacity and demand review
 - Gastro recovery plan being refreshed
 - SBAR for additional specialty Dr in Oral Surgery

12 Week RTT Challenge Overview: Kick off 18/08 - 10/11

Strategic Goal	1. Reduce 18 WW 2. Reduce Wait to First 3. Reduce 52WW	Exec Oversight	Bernie Bluhm: A/COO Sufi Husain: D/COO Sarah Richards: C/Champion	Ops Oversight	Divisions & Speciality Tris	Programme Support	Louise Pisani Olivia Lynch Sarah Hudson	Karen Driscoll Vicki Cruze Amelia Price
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Focus Areas

5 Must-Dos Non-Negotiables All Specialties	1 Referral & Triage Management Leads: Helen McCabe & Specialities	2 Booking & Scheduling Leads: Specialities	3 Tracking & Validation Leads: Jenny Dando & Specialities
	Timely, Consistent & Reliable Triage	Time Order Scheduling: Right Patient, Right Priority	Enhanced Validation of patients > 40 weeks Standardise escalation process
	Standardised & Electronic (by end of Sept)	Chronological & Correctly Classified, Clinics Rostered 6 Weeks in Advance	Daily Action: CCS Task Lists, Clinical Letters & Uncached

Enablers

4 Build & Standardise a PTL that reaches from appointment & Scheduling > Exec oversight & assurance (Via Divisions)	5 Articulate, follow & apply RTT guidelines, rules & internal policies
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Opportunities Potential Enhancements Specialty Specific	- SPECIALITY INPUT - FEEDBACK FROM IST AND GIRFT	- Potential theatre session swaps between specialities - Optimise 6-4-2 scheduling meetings - Flex Clinic templates: Shift News to Follow Ups - DRDoctor - Release time to focus on PTL - Consultant weekly updates on individual PTL size and waits
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High Level Plan

Activity	Aug			Sep					Oct				Nov
	11	18	25	01	08	15	22	29	06	13	20	27	3
	Mobilisation	1	2	3	4	5	6	7	8	9	10	11	12
Programme	18/08: Kick Off			Progress & Look Forward									Close & Consolidate
Teams	Speciality Plans Confirmed			Implementation					100% Specialities On Electronic Triage				Final Push

RTT

There are some significant issues and risks to the recovery programme for which mitigations are being progressed

Key Risks & Issues	Mitigations
<u>Risks</u> 1) Delayed mobilisation of recovery schemes 2) Deep dive into PTL management and reporting exposing errors in clock stops that will lead to additional patients being added to waiting lists with extended waits 3) Admin and managerial capacity to undertake recovery 4) Winter demand on non-elective beds impacting on protected surgical elective bed base	1) Recovery schemes tracked through weekly delivery groups where delays are identified and mitigated 2) Detailed validation of waiting lists taking place – plans being put in place to increase validation further from September. 3) NHSE and CSU providing additional managerial and admin support. Remains a risk. 4) RTT 12-week challenge – validate and cleanse waiting lists, improve scheduling and booking processes and standardise PTL governance structure

Report to:	Council of Governors	Agenda item:	7
Date of Meeting:	3 September 2025		
Title of Report:	Group Chief Executive & Managing Directors Report		
Status:	For Information		
Board Sponsor:	Cara Charles-Barks, Group Chief Executive Officer & Andrew Hollowood, Interim Managing Director		
Author:	Helen Perkins, Senior Executive Assistant to Chief Executive		
Appendices	None		

1.	Executive Summary of the Report
The purpose of the Chief Executive's Report is to provide a summary of key concerns and highlight these to the Council of Governors. Updates included in this report are: Chief Executive's Report • National/System ➤ Approach to Assessing Provider Capability ➤ Lead Appointed for National Maternity Investigation ➤ NHS Publishes Strike Impact Data ➤ Tiering Approach for RUH • Group ➤ Joint Committee & Partnerships Agreement ➤ Leadership Team ➤ Group Strategy & 26/27 Planning ➤ Group Governance & Assurance Arrangements & Transition Roadmap ➤ Council of Governors Workshop ➤ Board to Board development MD's Report • Local (RUH) ➤ Operational ➤ Finance ➤ Workforce ➤ Update on Industrial Action By Residential Doctors ➤ The National Cancer Patient Experience Survey 2024 ➤ Decarbonisation of the Site ➤ 2025 Annual General Meeting	

2.	Recommendations (Note, Approve, Discuss)
The Council of Governors is asked to note the report.	

3.	Legal / Regulatory Implications
Not achieving financial duties will impact on the ability for the Trust to secure the economy, efficiency, and effectiveness in its use of resources.	
4.	Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
Strategic and environmental risks are considered by the Board on a regular basis and key items are reported through this report.	
5.	Resources Implications (Financial / staffing)
A significant amount of time is being taken by the Improvement Team to support the recovery programme.	
6.	Equality and Diversity
Recovery actions for the financial position are being overseen by the Improvement Programme Steering Group (IPSG) to ensure the impact on clinical services is considered.	
As part of the development of new Projects, a Quality & Equality Impact Assessment (QEIA) is completed. QEIAs undergo an Executive lead panel review prior to a project being approved to commence.	
The impact on health inequalities is also considered as part of this process.	
7.	References to previous reports/Next steps
The Chief Executive submits a report to every Council of Governors meeting.	
8.	Freedom of Information
Public	
9.	Sustainability
Further opportunities to improve sustainability should be pursued to contribute towards the Finance Improvement Programme.	
10.	Digital
Several projects within the Improvement Programme and the development of the Quality Management System will be reliant on digital solutions.	
There will also be elements of the Digital Strategy that will have a direct link into the Improvement Programme.	

GROUP CHIEF EXECUTIVE AND MANAGING DIRECTOR REPORT

GROUP CHIEF EXECUTIVE'S REPORT

National

Approach to Assessing Provider Capability

NHS England wrote to Provider Chief Executive's on 13th August 2025 providing an update on the approach to assessing Provider capability.

As set out in the recently published NHS Oversight Framework (NOF), NHS England will consider not only an organisation's delivery, as evidenced by its NOF segment, but also its capability. The rating of provider capability will help NHS England inform their response to NOF segmentation and may also inform any decisions about entry into the National Provider Improvement Program (NPIP), as well as Trusts being considered for new FT status.

The aim is to ensure that NHS England has a holistic view of providers, not just focussed on delivery of national programmes but also capturing wider information relevant to grip and governance. It is also intended to be a development tool, helping Boards to reflect on their competencies, develop robust approaches to internal assurance, and encourage continuous improvement.

The capability rating will be based on:

- an annual self-assessment by provider Boards and submission to NHS England, with supporting evidence. The assessment will be based on themes from last year's publication of 'The Insightful Board' (<https://www.england.nhs.uk/publication/the-insightful-provider-board/>)
- a review of the self-assessment, triangulated with the provider's track record to date and any third-party information (including CQC), to provide an overall view on the Board's capability. Whilst ICBs remain jointly responsible and involved in provider oversight we would also seek their views on the provider capability self-assessments for the providers in their systems.
- across the year, NHS England will use the capability rating and self-assessment to inform the relationship with the provider, revising the capability rating should events merit it e.g. if an issue emerges that was not foreseen in the self-assessment.

It is intended that the capability rating will be published alongside the NOF segmentation.

NHS England confirmed on 26th August 2025 that the first stage of this assessment involves Trust Boards assessing their organisation's capability against a range of criteria derived from last year's Insightful Provider Board document and submitting these self-assessments to regions. Oversight teams in each region will then review these, triangulating with their own views of the provider, its track record of delivery and any relevant information from third parties before assigning a capability rating.

Author: Helen Perkins, Senior Executive Assistant to Chair and Chief Executive Document Approved by: Cara Charles-Barks, Chief Executive Officer & Andrew Hollowood, Interim Managing Director	Date: 28 August 2025
Agenda Item: 7	Page 3 of 11

Provider self-assessments are to be completed by 22nd October 2025.

Lead Appointed for National Maternity Investigation

It has been announced that Baroness Amos has been selected to lead the independent investigation into NHS Maternity and Neonatal Care.

The investigation was announced by the Secretary of State in June 2025 and will look at up to ten services in the country. It will also review the maternity and neonatal system, bringing together the findings of past reviews into one clear national set of actions to ensure every woman and baby receives safe, high-quality and compassionate care.

It will begin its work this Summer and produce an initial set of national recommendations by December 2025.

NHS Publishes Strike Impact Data

NHS England published data earlier in the month which outlined the impact of last month's industrial action by Resident Doctors, which showed the results of a more robust approach by NHS leaders with staff working around the clock to keep services open for patients.

The data showed that more care was delivered during the July 2025 Resident Doctors' strike than in the 5-day June 2024 walkout, with NHS analysis estimating that an additional 11,071 appointments and procedures went ahead. Staff absence due to industrial action was lower during this latest round, with around 1,243 fewer staff absent each day on average compared to last June – a 7.5% drop – helping Trusts to maintain more services and protect patient care.

An overview of the industrial action by Resident Doctors across RUH is outlined below:

RUH

We entered a new period of resident doctor industrial action beginning at 7am on Friday 25th July, until Wednesday 30th July 7am. As in previous years, the RUH declared a Business Continuity Incident for the entirety of the strike period and put plans in place to respond. Once again, our focus was to maintain safe care for our patients. Our Deputy Chief Medical Officer chaired our tactical group and through our divisional teams we ensured we prioritised urgent and emergency front door, inpatient cover, and time critical care. Planned and routine care were maintained as much as possible. We did not need to seek any Patient Safety Mitigation ('derogation') requests.

Our data suggests that overall, 46.1% resident doctors that would have been working across the five affected days took strike action. This is fewer than in previous episodes, although we saw variation across different days, grades, and specialties. Our UEC pathway was pressured for the tail end of the strike period, with no fall in demand and challenge with flow even with senior decision makers across the trust.

More planned care activities were maintained than we have for previous periods of strikes. Overall, we postponed 6 Inpatient procedures, 11 Day Case procedures, 26 new outpatient and 58 follow up outpatient appointments. The main driver for cancellation was where consultant rotas were changed to cover on-call or in-patient care.

There has been no notice of further planned industrial action periods. The BMA's current mandate is until Jan 2026. Talks will resume between the BMA and government to negotiate a position, with 'Improving Resident Doctors Lives' remaining a key component of resolution, and we will continue to work on this area.

Tiering Approach for Royal United Hospitals Bath NHS Foundation Trust

NHS England (NHSE) confirmed on 5th August 2025 that following a review of the Royal United Hospitals Bath NHS Foundation Trust performance, that the Trust would move to Tier 1 for Elective, Cancer, Diagnostics and Urgent and Emergency Care (UEC) for quarter two of 2025/26.

Being in Tier 1 will involve regular meetings with attendance from both Regional and National colleagues to discuss delivery progress and any required support from NHS England, including through the new national improvement offers. This may include a diagnostic or onboarding visit, on-site operational support from the National Improvement Support Team (IST) and/or GIRFT as well as clinical expertise (through National Clinical Directors and GIRFT Clinical Advisors). Trusts in UEC Tier 1 will also receive a further offer of direct improvement support for a period of up to six months

RUH Recovery Plan Update

At the end of July, the Trust remains behind trajectory for the Emergency Department (ED), Cancer, Referral to Treatment (RTT) and Diagnostics. Recovery plans have been developed for all four disciplines.

In Tier 1 the Trust can expect a heightened scrutiny from NHSE and the requirement for additional reporting on performance trajectories and improvement plans.

It will be important that the organisation manages this sensibly with our South West NHSE colleagues to avoid any distraction from delivery as a result of duplication of meetings and or reports. It is important that we remain focussed on delivery of our agreed plans and that we use our operational management capacity carefully.

UEC

On 30th June 2025 the Trust commenced a 4-week challenge in the Urgent Treatment Centre to accelerate priority actions which has resulted in an improvement in July across all key UEC metrics. 4-hour performance (type 1) improved from 57.6% to 62.8% against our recovery plan trajectory of 64% and Ambulance handover time reduced by 11 minutes to 45 minutes due to focused collaborative efforts with ED and South Western Ambulance Service NHS Foundation Trust (SWASFT) teams.

On 23rd June 2025, the new Medical Same Day Emergency Care (SDEC) opened its doors to patients, combining the work that was previously done in Ambulatory Care and on Direct Assessment Area (DAA) trolleys. In July 2025, 40.5% of patients admitted as an emergency went via our SDEC pathways. This is over 5% higher than in April. Further work is ongoing to embed the Medical SDEC and review capacity and processes for other SDEC pathways across the Trust.

The UEC Delivery Group is overseeing improvement actions across three key workstreams: UTC, Capacity Management (including SDEC) and Home is Best.

Cancer

For Cancer, 28-day performance is expected to remain consistent until September, whereas performance for 31-day and 62-days is expected to decline until Q3 at which point recovery actions implemented in August and September will take effect. Some key mitigations for Cancer performance include Cancer Alliance/national funding for short term capacity, demand management for priority cancer sites, expansion of Straight to Test (STT) pathways and timed pathway performance monitoring to rapidly identify issues and act accordingly.

RTT

For RTT performance, detailed trajectories have been drafted for all specialties with dedicated action plans that are reviewed weekly. The Trust expects performance recovery to start from September due to the timescales required to mobilise the recovery schemes. These plans include the assumed impact of the 12-week challenge and validation of waiting lists based on sample validation data.

On 18th August the RUH launched a 12-week challenge which will focus on validating and cleansing waiting lists, improving scheduling and booking processes and standardising the Patient Tracking List (PTL) governance structure. Additional managerial and administrative support is being sought from NHSE and Commissioning Support Unit (CSU) with this 12-week challenge.

Diagnostics

The Trust's position year to date is significantly off plan for diagnostics with those waiting over 6 weeks increasing to 32% in July compared to initial trajectory. The ultrasound position remains a key risk, but additional Sulis capacity has been confirmed increasing to a 5-day service, which will support recovery from September. A review is underway to review options to increase reporting capacity, and an agreement has been reached with University Hospitals Bristol and Weston NHS Foundation Trust for Continuous Positive Airway Pressure (treatment for sleep apnea) (CPAP) capacity which will support sleep recovery.

Group Update

Joint Committee & Partnership Agreement

Our second BSW Hospitals Group Joint Committee meeting was held on 16th July in Swindon with focus being on discussion and approval of the proposed Group Operating Model and Leadership Model. Initial corporate services plans were introduced for priority services – Finance, People, Digital, Estates & Facilities and Capital Planning. Proposed clarifications to the Group Partnership Agreement Joint

Author: Helen Perkins, Senior Executive Assistant to Chair and Chief Executive Document Approved by: Cara Charles-Barks, Chief Executive Officer & Andrew Hollowood, Interim Managing Director	Date: 28 August 2025
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Functions and Joint Committee Terms of Reference were approved pending ratification by Boards. The establishment of a Group Strategy and Planning working Group was approved. A report from the July Group Joint Committee has been included with September Trust Board papers.

Leadership Team

September and October will see developments in the Group leadership team. Our three Managing Directors (Lisa Thomas – GWH, John Palmer – RUH, Nick Johnson – SFT), will start in-post on 1st September. Following approval of proposed leadership model by the Remuneration Committees in Common at the end of July a consultation exercise is now underway. The post-consultation report will be considered by the Joint Committee on 29th September. In the short-term we have progressed recruitment to:

- Strategic Clinical Transformation Director. Advertised. Interviews 27th August. Target in-post September.

Group Strategy & 26-27 Planning

The development of our Group Strategy has begun, led by SRO Joss Foster and coordinated by Trust strategy leads. Our Transitional support partner Teneo is supporting this work. The strategy will be developed in close coordination with the 26-27 planning round.

Group Governance and Assurance Arrangements and Transition Roadmap

To support safe and effective mobilisation of our new Operating Model by April 2026, the programme team is focused on developing a detailed governance and assurance roadmap in readiness for consideration by the 29th September Joint Committee. The development of our group risk approach and assurance arrangements will form an important part of this roadmap.

Councils of Governors Workshop

On 5th August the three Councils of Governors came together in Devizes, to start the conversation about opportunities for BSW Hospitals and the 10-Year Plan, to discuss the emerging Operating Model and Council of Governors role. It was agreed that a follow-up meeting would be arranged, so Governors can continue the conversation on Group Development and our response to the 10-Year Plan; this next session will be held on 1st October.

Board to Board Development

We have begun planning for our next Board-to-Board sessions planned on 2nd October and 12th February. Further details will be circulated in early September.

MANAGING DIRECTOR'S REPORT

1. Operational

Ambulance Handover

In July, and in partnership with ambulance colleagues, we commenced the 45-minute “drop and go”, a focused collaborative effort with ED (Emergency Department) and SWASFT (South Western Ambulance Service Foundation Trust) teams, and have seen a significantly improved performance, achieving an average handover time of 45 minutes in July. This is a reduction of 10.7 minutes compared to June. July 2025 also saw a reduction of 332 hours in lost hours.

Overall, we remain behind the 33-minute trajectory. However, this financial year we have been making month on month improvements despite increased demand.

Tier 1 Performance

The RUH has been placed into Tier 1 for RTT (Referral to Treatment), Diagnostics, Cancer and UEC (Urgent and Emergency Care) performance. Recovery plans have been developed for all four disciplines.

There was improvement seen across all key UEC metrics in July, driven by a 4-week challenge to expedite priority actions. The UEC Delivery Group is overseeing improvement actions across three key workstreams: UTC (Urgent Treatment Centre), Capacity Management (including SDEC – Same Day Emergency Care) and Home is Best.

When looking at the progress that has been made in UEC performance, it should be noted that this has been achieved despite the closure of 15 escalation beds, a steady increase in ambulance activity and an increase of non – elective admissions of circa 8%.

Our top risks for UEC remain to be the deficit of senior decision makers based on modelled demand, NCTR (No criteria to reside) remains well above recovery trajectory, with a daily average of 76.5 in July, resulting in exit block and delays in the admitted pathway.

For cancer, 28-day performance is expected to remain consistent until September, whereas performance for 62-days is expected to decline until Q3 at which point recovery actions and additional capacity mobilised in August and September will begin to deliver improvement.

DMO1 (Diagnostics Waiting Times and Activity)

The Trust's position YTD (year to date) is significantly off plan for diagnostics with those waiting over 6 weeks increasing to 32% in July compared to initial trajectory. Key issues are in Ultrasound, Echo, Sleep and MRI. Significant progress has been made to correct capacity and demand mismatch, with the Sulis ultrasound service increasing to a 5-day service, and an agreement being reached with UHBW (University

Author: Helen Perkins, Senior Executive Assistant to Chair and Chief Executive Document Approved by: Cara Charles-Barks, Chief Executive Officer & Andrew Hollowood, Interim Managing Director	Date: 28 August 2025
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Hospitals Bristol and Weston) for CPAP (Continuous Positive Airway Pressure) capacity.

Additional risk to achieving the DMO1 standard will come as a result of the work being undertaken to improve the Trust's RTT performance. As we work through the back of delays to first appointment, we will drive up demand for diagnostic tests.

It is imperative that we understand at a granular level the demand and capacity gaps to support effective planning for short-, medium and long-term interventions. We will carry out on a diagnostic deep dive through September and October.

For RTT performance, detailed trajectories have been drafted for all specialties with dedicated action plans that are reviewed weekly. We expect performance recovery to start from September due to the timescales required to mobilise the recovery schemes. These plans include the assumed impact of the 12-week challenge and validation of waiting lists based on sample validation data. The 12-week challenge was launched on 18th August and is looking at how we manage and govern our waiting lists.

2. Finance

The Trust delivered a deficit of £1.3m for month 4, increasing the year to date deficit to £10.1m. This was an improvement on previous months but was supported by one off benefits of £0.75m.

The key driver of the RUH financial position continues to be the slippage on the delivery of the annual savings target which is £8.4m off plan against a year to date target of £10m. With many of the savings linked to service change, the ability of the Trust to manage demand, deliver performance targets and reduce cost is becoming very challenging. A financial recovery plan for the RUH has been developed that aims to achieve a £10m deficit by the end of the financial year. This would require a £22m improvement against the 'Do Nothing' run rate. The plan has been reviewed and signed off by the management executive and the finance and performance committee.

It will be essential that this financial recovery plan is delivered in order to safeguard the cash position of the Trust. Without a significant improvement in the income and expenditure position for the Trust the cash position for the Trust will become very challenging in the last quarter of the financial year and will require the cash management framework to be implemented.

The delivery of the capital plan continues to be limited, in part driven by decisions to hold back on some capital expenditure in order to support the cash position of the Trust.

3. Update on Industrial Action by Residential Doctors

We entered a new period of resident doctor industrial action beginning at 07:00 on Friday 25th July, until Wednesday 30th July 07:00. As in previous years, the RUH declared a Business Continuity Incident for the entirety of the strike period and put

plans in place to respond. Once again, our focus was to maintain safe care for our patients. Our Deputy Chief Medical Officer chaired our tactical group and through our divisional teams we ensured we prioritised urgent and emergency front door, inpatient cover, and time critical care. Planned and routine care were maintained as much as possible. We did not need to seek any Patient Safety Mitigation ('derogation') requests.

Our data suggests that overall, 46.1% resident doctors that would have been working across the five affected days took strike action. This is fewer than in previous episodes, although we saw variation across different days, grades, and specialties. Our Urgent and Emergency Care pathway was pressured for the tail end of the strike period, with no fall in demand and challenge with flow even with senior decision makers across the trust. More planned care activities were maintained than we have before. This is in keeping with national trends.

There has been no notice of further planned industrial action periods. The British Medical Association's current mandate is until Jan 2026. Talks will resume between the British Medical Association's and government to negotiate a position, with 'Improving Resident Doctors Lives' remaining a key component of resolution, and we will continue to work on this area.

4. The National Cancer Patient Experience Survey 2024

The results of the National Cancer Patient Experience Survey 2024 show a continued year-on-year improvement at the RUH, with the Trust's overall 'experience of care' rising to 9.1 - above the top 'upper expected' range, reflecting the RUHs commitment to supporting the people we care for every step of the way.

For 18 questions in the survey, the Trust scored above the 'expected' (average) range and there were no questions where the score was below the expected range.

We were delighted to hear that patients said that staff provided them with relevant information on available support and that their family or carer was involved as much as they wanted them to be in decisions about treatment options. In addition to receiving a high score for treating patients with privacy and dignity and for team working the patients provided positive feedback about pain control, and the support available to patients to manage side effects from treatment.

We are committed to improving and we will analyse the results further, triangulate them with other insights to make improvements for the people we care for and the people we work with. You can find more information and a breakdown of results for each Trust on the National Cancer Patient Experience Survey website - <https://www.ncpes.co.uk/>

5. Decarbonisation of the Site

We have previously shared that the Trust received a grant of £21.6million from the Department of Energy Security and Net Zero to enable the Trust to deliver 'Project Clean Heat', with the aim to make RUH a greener, healthier cleaner environment for

all those who use it. We are thankful to our partner organisations who are supporting us to achieve our ambition, notably the Carbon Energy Fund, Salix, and Veolia.

The grant is enabling the Trust to install new air and water source heat pumps in addition to funding other important building improvements such as additional solar panelling, better insulation, high-quality LED lighting, and more efficient heating and cooling controls.

Over the last two weeks the water and air source heat pumps have arrived on site and the installation phase has commenced. As such, there are cranes and large pieces of equipment on the Combe Park site. To install the new equipment there will be some disruption to our parking and internal roads. All changes will be shared via our communication channels, and we will ensure our wayfinding is updated during the disruption to the site. If you are visiting for appointments, we advise that you leave a little extra time to get to your appointments.

6. Use of Trust Seal

The Trust seal was used on 23rd July 2025 to seal the licence to alter in relation to Sulis Elective Orthopaedic Centre (SEOC) works at Sulis Hospital Bath Ltd. The seal number is 537.

7. 2025 Annual General Meeting

The Trust will be holding its Annual General Meeting combined with Annual Members' Meeting on Thursday 25th September 2025 from 16:00. To ensure accessibility and to make the most of our available resources, this year's event will be hosted virtually.

Details of the Annual General Meeting will be shared over the coming weeks on our Trust website and directly with members. The event will be a fantastic opportunity to hear about the work that the Trust has been doing over the past year and to ask questions to the Board. If you would like to submit a question in advance of the event or to register your interest in attending, please contact the Membership Office using the details provided in the 'Governor Elections' section of this report.

Report to:	Council of Governors	Agenda item:	9
Date of Meeting:	8 September 2025		

Title of Report:	Governor Log of Assurance Questions and Responses
Status:	For Information
Board Sponsor:	Liam Coleman, Interim Chair
Author:	Abby Strange, Corporate Governance Manager
Appendices	Appendix 1: Governor Log of questions September 2025

1. Executive Summary of the Report

The Council of Governors has a duty to hold the Non-Executive Directors (NEDs) individually and collectively to account for the performance of the Board of Directors.

The role of governors in 'holding to account' is one of assurance of the performance of the Board.

At the RUH, Governors hold the NEDs to account for the performance of the Board by combining the following activities:

- Reading Board papers
- Observing Board meetings
- Observing sub-committees
- Holding discussions with Committee Chairs
- Engaging with NEDs at joint away days.

This report provides an update on the latest questions on the Governors' Log of Assurance Questions and subsequent responses. The Governors' Log of Assurance Questions is a means of tracking the communication between the Governors and the NEDs and is presented to each Council of Governors meeting.

Two new questions, JUNE25A and JUNE25B were raised since the last report was presented in June 2025. JUNE25A sought clarity on endoscopy capacity at Sulis following the cessation of the temporary mobile endoscopy unit. 25B was submitted to seek assurance on plans to sustainably and significantly reduce ambulance handover waiting times.

The questions were sent to the Sulis and Elective Recovery System Lead and The Interim Urgent and Emergency Care Director respectively for response. The responses were shared with the Council of Governors via email and no further questions were received. The questions and subsequent responses are detailed at appendix 1. A summary of the response to JUNE25B has been provided as the full response was provided via a detailed PowerPoint presentation.

The Council of Governors is asked to close assurance questions JUNE25A and JUNE25B.

2. Recommendations (Note, Approve, Discuss)

The Council of Governors is asked to note the report and close assurance questions JUNE25A and JUNE25B.

3.	Legal / Regulatory Implications
The Council of Governors has a duty to hold the Non-Executive Directors individually and collectively to account for the performance of the Board of Directors.	
4.	Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc.)
There are no risks on the risk register.	
5.	Resources Implications (Financial / staffing)
There are no resource or financial implications.	
6.	Equality and Diversity
All Governors, no matter their background, can raise questions of NEDs at any time.	
7.	References to previous reports
This paper is presented to every Public Council of Governors meeting.	
8.	Freedom of Information
Public	
9.	Sustainability
Governors have asked questions on various topics including sustainability. The log of assurance questions is held online.	
10.	Digital
Governors have asked questions on various topics including digital. The log of assurance questions is held online.	

Appendix 1: Governor Log of Assurance Questions

Date:	11th June 2025
Source Channel	Email from Public Governor after the Council of Governors meeting on 11 June 2025.
Date Sent & Responder	Sent to Victoria MacFarlane, Sulis and Elective Recovery System Lead
Question and ID	JUNE25A I understand the mobile Colonoscopy/Gastroscopy unit at Sulis Hospital is to cease operating from its present site and is moving to a new unknown location as of 6th June. What measures are being taken to compensate for this loss?
Process / Action	Sent to Victoria MacFarlane, Sulis and Elective Recovery System Lead. Response shared via email on 17/06/25.
Answer	The purpose of the mobile endoscopy van was to provide additional capacity to clear the specific surveillance backlog. This has now happened, and the backlog has reduced from more than 500 lists to just 5. The totality of the van capacity is therefore not required. Sulis hospital will continue to provide endoscopy services to NHS patients referred on ERS plus CDC patients referred from the RUH. The RUH provides 50 lists per week in existing capacity and will continue insourcing solutions at the weekend to keep pace with demand. We have seen a significant improvement in DM01 performance over this period, and we expect this to continue.
Closed?	Open, shared with the Council of Governors via email and no further questions received. To be closed at the next Council of Governors meeting in September 2025.

Date:	11th June 2025
Source Channel	Email from Public Governor after the Council of Governors meeting on 11 June 2025.
Date Sent & Responder	Sent to Bernie Bluhm, Interim Urgent and Emergency Care Director, and Sufi Husain, Deputy Chief Operating Officer for response on 19/06/25.
Question and ID	JUNE25B Governors seek assurance from the RUH Board that a fully resourced work plan is being implemented, monitored, reviewed and reported to sustainably and significantly reduce Ambulance Handover waiting times across the RUH site. In seeking this assurance, the Governors would look for detail on; current trends, the impact and effectiveness of actions taken so far, insights and learning from such actions and gained from other Trusts, and proposed innovative solutions for mutual benefit of RUH and ambulance service providers.
Process / Action	Sent to Bernie Bluhm, Interim Urgent and Emergency Care Director and Sufi Husain, Deputy Chief Operating Officer. Response shared via email on 11/07/25.
Answer	A full response was shared with the Governors on the 11/07/25. The response provided an overview of work to improve ambulance handover performance through the Urgent and Emergency Care Improvement Programme which consisted of 4 workstreams designed to reduce length of stay. Details were also shared around the Trust's current performance position, the performance metrics that were being measured, and the trajectory to achieve the expectations set by NHS England.
Closed?	Open, shared with the Council of Governors via email and no further questions received. To be closed at the next Council of Governors meeting in September 2025.

Report to:	Council of Governors	Agenda item:	10
Date of Meeting:	8 September 2025		

Title of Report:	Annual Review of Trust Constitution
Status:	For approval
Board Sponsor:	Cara Charles-Barks, Chief Executive
Author:	Roxy Milbourne, Interim Head of Corporate Governance
Appendices	Appendix 1: Draft Foundation Trust Constitution 2025 v22

1. Executive Summary of the Report

The Council of Governors approved a number of amendments to the Trust Constitution in September 2024 to cover changes since the last review. The proposed key changes reflected:

- the establishment of Joint Committees/Committees-in-Common
- the revised Health and Care Act 2022
- holding virtual/hybrid meetings
- various ‘tidying up’ i.e. change of job titles and gender-neutral language.

Prior to the amended constitution being presented to the Board of Directors for approval in May 2025, additional amendments were made to reflect:

- Updates to reflect the Group model.
- Updates to reflect the Fit and Proper Persons (FPPR) regulations.
- Updates to the Board Composition in order to align the Constitution to Great Western Hospitals NHS Foundation Trust and Salisbury NHS Foundation Trust.
- Change of reference to ‘Finance Director’ to ‘Chief Finance Officer’.
- Change of reference to ‘Trust Management Executive’ to ‘Management Executive Committee’.

For ease of identification of key changes, a summary of the main elements of revision since the Council of Governors approved the constitution in September 2024 is included within this document. The full constitution is attached as an appendix.

Changes to the Constitution require approval of both the Board of Directors and Council of Governors. The Board of Directors approved this document at their meeting in May 2025.

2. Recommendations (Note, Approve, Discuss)

The Council of Governors is asked to approve the proposed amendments to the Trust’s Constitution.

3. Legal / Regulatory Implications

The Foundation Trust Constitution is the Trust’s fundamental governance document

4.	Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
None identified	
5.	Resources Implications (Financial / staffing)
None identified	
6.	Equality and Diversity
None identified	
7.	References to previous reports
This paper is produced annually provided that potential amendments have been identified.	
8.	Freedom of Information
Public	
9.	Sustainability
N/A	
10.	Digital
N/A	



Royal United Hospitals Bath
NHS Foundation Trust

Constitution – Table of Amendments

Page number	Section	Current version	Amendment	Rationale
4	Preamble	No information regarding group model	Royal United Hospitals Bath NHS Foundation Trust, Salisbury NHS Foundation Trust, and Great Western Hospitals NHS Foundation Trust approved arrangements to establish a group model to support increased joint working and collaboration between the three organisations and wider system, in line with the powers set out in the Health and Care Act 2022 and with approval from NHS England and Bath and North-East Somerset, Swindon and Wiltshire Integrated Care Board (BSW ICB) In line with current legislation all three Trusts remain as individual statutory organisations with individual constitutions. Therefore, for the purposes of this document references to the chief executive will remain singular and not 'joint' or 'group'.	To reference the Trust's move to a group model with GWH and SFT.
2	Board of Directors – composition	20.2 The Board of Directors is to comprise:	20.2 The Board of Directors is to comprise:	Board Composition has been updated and aligns with Great Western Hospitals NHS

Page number	Section	Current version	Amendment	Rationale
		20.2.1 a Non-Executive Director Chair; and 20.2.2 up to a maximum of 6 other Non-Executive Directors; and 20.2.3 up to a maximum of 6 Executive Directors.	20.2.1 a Non-Executive Director Chair; and 20.2.2 a minimum of 5 other Non-Executive Directors; and 20.2.3 a minimum of 5 Executive Directors.	Foundation Trust and Salisbury NHS Foundation Trust.
26	Board of Directors – composition	20.10.1 any change in the number of Directors is within the range set out in paragraph 20.2 above; and	Remove	No longer required if minimum numbers are documented.
29	24 and 25 (Board and Non-Executive Director appointments)		All appointments must satisfy the requirements of Regulation 5: Fit and Proper Persons: Directors of the Health and Social Care Act 2008 (Regulated Activities Regulations 2014 including all future amendments to the regulation.	Updated to reflect the Fit and Proper Persons (FPPR) regulations.
51	Composition of the Council of Governors – partnership Governors	2.2.2.1 University of Bath; 2.2.2.2 University of Bristol; 2.2.2.3 University of the West of England.	2.2.2.1 University of Bath; 2.2.2.2 University of Bristol; 2.2.2.3 University of the West of England. 2.2.2.4 Bath Spa University.	Addition of Bath Spa University to the University Partner Organisations list as the Trust has developed its relationship with the University and is working much closer together.
Throughout	Throughout	Finance Director Trust Management Executive	Chief Finance Officer Management Executive Committee	Updated job title Updated name of the Committee

**ROYAL UNITED HOSPITALS BATH
NHS FOUNDATION TRUST
(A PUBLIC BENEFIT CORPORATION)

CONSTITUTION**

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PREAMBLE

An NHS Foundation Trust is a Public Benefit Corporation which is authorised under the National Health Service Act 2006 to provide goods and services for the purposes of the health service in England. A Public Benefit Corporation is a body corporate which is constituted in accordance with Schedule 7 of the 2006 Act. The Constitution provides, inter alia, for the Foundation Trust to have Members, Governors and Directors, and determines who may be eligible for membership and how Governors and Directors are appointed and defines their respective roles and powers. Further, Members of the Foundation Trust may attend and participate at Members' meetings, vote in elections to, and stand for election for, the Council of Governors, as provided in this Constitution.

Royal United Hospitals Bath NHS Foundation Trust, Salisbury NHS Foundation Trust, and Great Western Hospitals NHS Foundation Trust approved arrangements to establish a group model to support increased joint working and collaboration between the three organisations and wider system, in line with the powers set out in the Health and Care Act 2022 and with approval from NHS England and Bath and North-East Somerset, Swindon and Wiltshire Integrated Care Board (BSW ICB)

In line with current legislation all three Trusts remain as individual statutory organisations with individual constitutions. Therefore, for the purposes of this document references to the chief executive will remain singular and not 'joint' or 'group'.

1. Interpretation and definitions

1.1 Unless a contrary intention is evident or the context requires otherwise, words or expressions contained in this Constitution shall bear the same meaning as in the 2006 Act as amended by the 2012 Act and the Health and Social Care Act 2022.

~~1.2 Words importing the masculine gender only shall include the feminine gender; words importing the singular shall import the plural and vice-versa.~~

~~4.31.2~~ References in this Constitution to legislation include all amendments, replacements or re-enactments made and include all subordinate legislation made thereunder.

~~4.41.3~~ Headings are for ease of reference only and are not to affect interpretation.

~~4.51.4~~ All annexes and appendices referred to in this Constitution form part of it.

~~4.61.5~~ References to paragraphs are to paragraphs in this Constitution save that where there is a reference to a paragraph in an annex or appendix to this Constitution it shall be a reference to a paragraph in that annex or appendix unless the contrary is expressly stated or the context otherwise so requires.

~~4.71.6~~ In this Constitution:

"2006 Act"

means the National Health Service Act 2006 (as amended);

"2012 Act"

means the Health and Social Care Act 2012;

"2022 Act"

Means the Health and Social Care Act 2022;

"Accounting Officer"

means the person who from time to time discharges the functions specified in paragraph 25(5) of Schedule 7 to the 2006 Act;

"Annual Accounts"

means those accounts prepared by the Trust pursuant to paragraph 25 of Schedule 7 to the 2006 Act;

"Annual Governors' Meeting"

has the meaning ascribed to it in paragraph 3.1 of Appendix 2 of Annex 5 of the Constitution;

"Annual Members' Meeting"

has the meaning ascribed to it in paragraph 40.1 of this Constitution;

"Annual Report"

means a report prepared by the Trust pursuant to paragraph 26 of Schedule 7 to the 2006 Act;

"Applicant Trust"

~~means the Royal United Hospital, Bath NHS Trust, established pursuant to the Royal United Hospital, Bath National Health Service Trust (Establishment) Order 1991, SI 1991/2392, which has made the application to become the Trust;~~

"Appointed Governors"

means a Local Authority Governor, or a Partnership Governor;

"Area of the Trust"

means the area, consisting of all the areas, specified in column 2 of Annex 1 of this Constitution, as an area for a Public Constituency;

"Audit and Risk Committee"

means a committee of the Board of Directors as established pursuant to paragraph 36 of this Constitution;

"Auditor"

means the auditor of the Trust appointed by the Council of Governors pursuant to paragraph 35 of this Constitution;

"Authorisation"

means the authorisation issued to the Trust by Monitor under Section 35 of the 2006 Act;

"Bath and North East Somerset Council"

means the local authority of that name established pursuant to the Local Government Act 1972 (as amended) of the Guildhall, High St, Bath, BA1 5AW;

"Board of Directors"

means the Board of Directors of the Trust as constituted in accordance with this Constitution;

"Chair"

means the person appointed in accordance with the Constitution to ensure that the Board of Directors and Council of Governors successfully discharge their overall responsibilities for the Trust as a whole. The expression "the Chair" shall be deemed to include the Vice Chair or any other Non-Executive Director appointed if the Chair and/or Vice Chair is absent from the meeting or is otherwise unavailable;

"Chief Executive"

means the Chief Executive of the Trust;

"Clear Day"

means a day of the week not including a Saturday, Sunday or public holiday;

"Code of Governance for NHS Providers"

means the best practice advice published by NHS England on 27 October 2022, with effect from 1 April 2023;

"Comptroller and Auditor General"

means the individual engaged in the position of Comptroller and Auditor General to the National Audit Office (UK government department) or its statutory successor from time to time;

"Constitution"

means this Constitution together with the annexes and appendices attached hereto;

"Council of Governors"

means the Council of Governors as constituted in this Constitution;

"Deputy Chief Executive"

means an Executive Director appointed pursuant to paragraph 25.5 of this Constitution;

"Director"

means a member of the Board of Directors;

"Directors' Code of Conduct"

means the Code of Conduct for Directors of the Trust, as adopted by the Applicant Trust and as amended from time to time by the Board of Directors, which all Directors must subscribe to;

"Disclosure and Barring Service"

Means the body corporate to whom the Secretary of State has delegated his-their functions under Part V of the Police Act 1997 in relation to applications for criminal record certificates and enhanced criminal record certificates as established by section 87(1) of the Protection of Freedoms Act 2012;

"Electronic Communication"

has the meaning ascribed to it in Section 1168 of the Companies Act 2006 and the phrase "electronically" (where the context permits) shall be construed accordingly;

"Elected Governor"

means a Public Governor or a Staff Governor;

"Executive Director"

means an executive member of the Board of Directors of the Trust;

"Finance-DirectorChief Finance Officer"

means the Finance-DirectorChief Finance Officer of the Trust;

"Financial Year"

means:

- (a) a period beginning with the date on which the Trust is authorised as an NHS foundation trust and ending with the next 31 March; and
- (b) each successive period of twelve months beginning with 1 April;

"Forward Plan"

means the document prepared by the Trust pursuant to paragraph 27 of Schedule 7 to the 2006 Act;

"Funds held on Trust"

means those funds which the Trust holds at the date of Authorisation, receives on distribution by statutory instrument, or chooses subsequently to accept under powers derived under Section 47(2)(c) of the 2006 Act. Such funds may or may not be charitable;

"Governor"

means a member of the Council of Governors;

"Governors' Code of Conduct"

means the Code of Conduct for Governors of the Trust, as adopted by the Applicant Trust and as amended from time to time by the Board of Directors, which all Governors must subscribe to;

"Health Overview and Scrutiny Committee"

means a local authority overview and scrutiny committee established pursuant to Section 21 of the Local Government Act 2000;

"Health Service Body"

means an NHS Trust or an NHS Foundation Trust.

"Immediate Family Member"

means either a:

- (a) spouse;
- (b) person whose status is that of "Civil Partner" as defined in the Civil Partnerships Act 2004;
- (c) child, step child or adopted child; or
- (d) parent;

~~**"Initial Elected Governors"**~~

~~means those Elected Governors who are elected under the transitional provisions set out in paragraph 5 of Appendix 2 of Annex 5 as Governors at the Initial Elections;~~

~~**"Initial Elections"**~~

~~means the first elections held by the Applicant Trust pursuant to this Constitution, which for the avoidance of doubt includes an election held pursuant to the powers contained in Section 33(4) of the 2006 Act;~~

"Integrated Care Partnership"

An Integrated Care Partnership (ICP) is a formal partnership of organisations (commissioners and providers) working together to improve the health and care of the whole population they serve.

"Integrated Care System"

In England an Integrated Care System (ICS) is a statutory partnership of organisations who plan, buy and provide health and care services in their geographical area. The organisations involved include the NHS, local authorities, voluntary and charity groups, and independent care providers

"Licence"

means the licence granted to the Trust under Section 81 of the 2012 Act;

"Local Authority Governor"

means a member of the Council of Governors appointed by one or more local authorities whose area includes the whole or part of the Area of the Trust;

"Local Authority Partnership Agreement"

means an agreement made under Section 75 of the 2006 Act;

"Member"

means a Member of the Trust and the term "membership" shall be construed accordingly;

"Membership Strategy"

means the document describing the Trust's strategy to set up systems and processes to establish, maintain and develop an active membership;

"Mendip District Council"

means the local authority of that name whose offices are located at Cannards Grave Road, Shepton Mallet, Somerset, BA4 5BT;

"Model Rules for Elections"

means the election rules set out in Annex 4 of this Constitution;

~~"Monitor"~~

~~means the corporate body known as Monitor as provided by Section 61 of the 2012 Act, which from 1 April 2016 is part of NHSEI;~~

"NHS Constitution"

means the document of that name published by the Secretary of State for Health on 21 January 2009, or any revised version of that document published under Sections 3 or 4 of the Health Act 2009;

"NHS Foundation Trust Code of Governance"

means the best practice advice published in July 2014, and as may be amended, varied or replaced by NHS England from time to time;

"NHS England"

The Health and Care Act 2022 has merged "Monitor" and the Trust Development Authority (TDA) into NHS England and removed legal barriers to collaboration and integrated care, making it easier for providers to take on greater responsibility for service planning and putting Integrated Care Systems (ICSs) on a statutory footing.

~~"NHS England"~~

~~Means the body corporate known as NHS England, which became part of NHS England in July 2022;~~

"Nominated Officer"

means an Officer charged with the responsibility for discharging specific tasks within the SOs, the SFIs, or the Scheme of Delegation;

"Non-Executive Director"

means a non-executive member of the Board of Directors of the Trust including the Chair;

"Officer"

means an employee of the Trust or any other person holding a paid appointment or office with the Trust;

"Partnership Governor"

means a member of the Council of Governors other than: a Public Governor; Staff Governor; or Local Authority Governor;

"Partnership Organisation"

means an organisation that may appoint Partnership Governors and which is listed at paragraph 1.3 of Annex 3 of this Constitution;

"Principal Purpose"

means the purpose set out in Section 43(1) of the 2006 Act;

"Public Constituency"

has the meaning ascribed to it in paragraph 8.2 of this Constitution;

"Public Governor"

means a member of the Council of Governors elected by the members of one of the Public Constituencies;

"Registered Dentist"

means a fully registered person within the meaning of the Dentists Act 1984 who holds a license to practice under that Act;

"Registered Medical Practitioner"

means a fully registered person within the meaning of the Medicines Act 1983 who holds a license to practice under that Act;

"Registered Midwife"

means a fully registered person within the meaning of the Nurse and Midwifery Order 2001 (SI 2001/253);

"Registered Nurse"

means a fully registered person within the meaning of the Nurse and Midwifery Order 2001 (SI 2001/253);

"Regulatory Framework"

means the 2006 Act, the Constitution and the Licence;

"Replacement Governor"

has the meaning ascribed to it in paragraph 2.2 of Appendix 2 of Annex 5 of this Constitution;

"RNHRD"

Means the Royal National Hospital for Rheumatic Diseases NHS Foundation Trust ;

"RNHRD Acquisition"

Means the grant of acquisition pursuant to S56A of the 2006 Act to authorise the acquisition of the RNHRD by the Trust

"Scheme of Delegation"

means the Trust's Reservation of Powers to the Board of Directors and Delegation of Powers;

"Secretary"

means the Secretary of the Board of Directors and the Council of Governors or any other person appointed by the Trust to perform the roles and responsibilities as set out in Appendix 5 of Annex 8 of this Constitution;

"Sex Offenders Order"

means either:

- (a) a Sexual Offences Prevention Order made under either Section 104 or Section 105 of the Sexual Offences Act 2003; or
- (b) an Interim Sexual Offences Prevention Order made under Section 109 of the Sexual Offences Act 2003; or
- (c) a Foreign Travel Order made under Section 114 of the Sexual Offences Act 2003; or
- (d) Risk of Sexual Harm Order made under Section 123 of the Sexual Offences Act 2003; or
- (e) an Interim Risk of Sexual Harm Order made under Section 126 of the Sexual Offences Act 2003;

"Sex Offenders Register"

means the notification requirements set out in Part 2 of the Sexual Offences Act 2003, commonly known as the "Sex Offenders Register";

"SFIs"

means the Trust's Standing Financial Instructions, which regulate the conduct of Directors and Nominated Officers in relation to all financial matters with which they are concerned;

"Significant Transaction"

has the meaning ascribed to it in Annex 9;

"Staff Constituency"

has the meaning ascribed to it in paragraph 9.2 of this Constitution;

"Staff Governor"

means a member of the Council of Governors elected by the members of the Staff Constituency;

"Standing Orders for the Board of Directors" or "SOs"

means the Standing Orders set out in Annex 7 of this Constitution and the term "SO" when used in Annex 7 shall be construed accordingly;

"Standing Orders for the Council of Governors" or "SOs"

means the Standing Orders set out in Annex 6 of this Constitution and the term "SO" when used in Annex 6 shall be construed accordingly;

"Trust"

means the Royal United Hospitals Bath NHS Foundation Trust;

"Trust Headquarters"

means the Royal United Hospital, Combe Park, Bath BA1 3NG;

"University of Bath"

means the chartered corporation of that name established by Royal Charter in 1966 of University of Bath, Bath, BA2 7AY;

"University of Bristol"

means the chartered corporation of that name established by Royal Charter in 1909 of University of Bristol, Senate House, Tyndall Avenue, Bristol, BS8 1TH;

"University of the West of England"

means the higher education corporation of that name established under the Education Reform Act 1988 of University of the West of England, Coldharbour Lane, Bristol, BS16 1QY;

"Voluntary Organisation"

means a body other than a public or local authority, the activities of which are not carried on for profit;

"Volunteer"

means a person who provides goods or services to the Trust, but who is not employed to do so by the Trust;

"Vice Chair"

means the Vice Chair of the Trust appointed pursuant to paragraph 24 of this Constitution; and

"Wiltshire Council"

means the local authority of that name established pursuant to the Local Government Act 1972 (as amended) of County Hall, Bythesea Road, Trowbridge, Wiltshire BA14 8JN.

2. Name

- 2.1 The name of the Trust is to be "Royal United Hospitals Bath NHS Foundation Trust".
- 2.2 Pursuant to the RNHRD ~~Acquisition made~~ Acquisition made on 28 January 2015 the Trust is the successor body to the Royal National Hospital for Rheumatic Diseases NHS Foundation Trust

3. Principal Purpose

- 3.1 The Principal Purpose of the Trust is the provision of goods and services for the purposes of the health service in England.
- 3.2 The Trust may provide goods and services for any purposes related to:
 - 3.2.1 the provision of services provided to individuals for or in connection with the prevention, diagnosis or treatment of illness; and
 - 3.2.2 the promotion and protection of public health.
- 3.3 The Trust may also carry on activities other than those mentioned in paragraph 3.2 above for the purpose of making additional income available in order to better carry on its Principal Purpose.
- 3.4 The Trust does not fulfil its Principal Purpose unless, in each Financial Year, its total income from the provision of goods and services for the purposes of the health service in England is greater than its total income from the provision of goods and services for any other purposes.

4. Powers and functions

- 4.1 The Trust is to have all the powers of an NHS foundation trust set out in the 2006 Act.
- 4.2 In the exercise of its powers, the Trust shall have regard to the principles of the NHS and the values of the Trust as set out in Appendix 1 of Annex 8.
- 4.3 All the powers of the Trust shall be exercised by the Board of Directors on behalf of the Trust.
- 4.4 Subject to any restriction contained in this Constitution or in the 2006 Act and to paragraph 4.5 below, any of these powers may be delegated to a committee of Directors or to an Executive Director.

- 4.5 Where the Trust is exercising functions of the managers pursuant to Section 23 of the Mental Health Act 1983 (as amended), those functions may be exercised by any three or more persons authorised by the Board of Directors, each of whom must be neither an Executive Director of the Trust, nor an employee of the Trust.
- 4.6 In performing its NHS functions the Trust shall have regard to the NHS Constitution. For the purposes of this paragraph "NHS functions" means functions under an enactment which is a function concerned with, or connected to, the provision, commissioning or regulation of NHS services and "NHS services" means health services provided in England for the purposes of the health service under Section 1(1) of the 2006 Act.
- 4.7 ~~The Trust may arrange for any functions exercisable by it to be exercised by or jointly with any one or more of the bodies set out in section S 65Z5(i) of the 2006 Act. Where such a function is exercisable jointly the bodies may arrange for the functions to be exercised by joint committees as set out in S5 65Z6 of the 2006 Act.~~
- 4.8 In exercising its powers, the Trust will have regard to:
- 4.8.1 ~~S.63A of the 2006 Act (revised 2022) (duty to have regard to wider effect of decisions), also referred to as the "Triple Aim";~~
- 4.6 4.8.2 ~~S63B of the 2006 Act (revised 2022) (duties in relation to climate change).~~

5. Other purposes

- 5.1 The purpose of the Trust is to provide goods and services, including education, training and research and other facilities for purposes related to the provision of health care, in accordance with its statutory duties.
- 5.2 The Trust may carry out research in connection with the provision of health care and make facilities and staff available for the purposes of education, training or research carried on by others.
- 5.3 The Trust may fulfil the social care functions of any local authority as specified by an agreement made under Section 75 of the 2006 Act.
- 5.4 The Trust may also undertake activities other than those mentioned in paragraphs 5.1 to 5.3 above. These activities must be for the purpose of making additional income available in order to better carry out the Trust's Principal Purpose.

6. Membership and constituencies

The Trust shall have Members, each of whom shall be a Member of one of the following constituencies:

- 6.1 a Public Constituency; or

6.2 the Staff Constituency.

7. Application for membership

- 7.1 Subject to paragraphs 8.6, 9.5 and 9.7 below, an individual who is eligible to become a Member of the Trust may do so on application to the Trust as set out in paragraphs 8 and 9 below.
- 7.2 Subject to paragraphs 8.6, 9.5 and 9.7 below, applicants for membership of the Trust must complete an application in the form prescribed by the Secretary or ~~his~~their delegated Officer.

8. Public Constituency

- 8.1 Subject to the provisions of paragraph 10 below and paragraphs 1 to 3 of Appendix 2 to Annex 8, an individual who lives in an area specified in Annex 1 as an area for a public constituency may become or continue as a Member of the Trust.
- 8.2 Those individuals who live in an area specified for a public constituency are referred to collectively as the "Public Constituency".
- 8.3 The minimum number of Members in each Public Constituency is specified in Annex 1.
- 8.4 An eligible individual shall become a Member upon entry to the Trust's register of Members pursuant to an application by them. The Secretary may require any individual to supply supporting evidence to confirm eligibility.
- 8.5 The Secretary shall, normally within 21 days of receipt of an application for membership, and subject to being satisfied that the applicant is eligible, cause the applicant's name to be entered in the Trust's register of Members.

Members of the RNHRD public or patient constituency, provided that they are eligible to be a member of a public constituency of the Trust were invited to become a member of the Trust. RNHRD members who accepted the Trust's invitation to become members of the Trust were assigned to the relevant public constituency of the Trust by the Secretary.

9. Staff Constituency

- 9.1 An individual who is employed by the Trust under a contract of employment with the Trust may become or continue as a Member of the Trust provided:
 - 9.1.1 ~~he is~~they are employed by the Trust under a contract of employment which has no fixed term or has a fixed term of at least 12 months; or
 - 9.1.2 ~~he has~~they have been continuously employed by the Trust under a contract of employment for at least 12 months.
- 9.2 Those individuals who are eligible for membership of the Trust by reason of the provisions of paragraph 9.1 above are referred to collectively as the "Staff Constituency".
- 9.3 The minimum number of Members of the Staff Constituency is specified in Annex 2.
- 9.4 For the purposes of paragraph 9.1 above, Chapter 1 of Part 14 of the Employment Rights Act 1996 shall apply for the purposes of determining whether an individual has been continuously employed by the Trust or has continuously exercised functions for the purposes of the Trust, as it applies for the purposes of that Act.
- 9.5 An individual who is eligible to become a member of the Staff Constituency under paragraph 9.1 above and who is invited by the Trust to become a member of the

Staff Constituency, shall become a Member of the Trust as a member of the Staff Constituency without an application being made unless ~~he~~they informs the Trust, that ~~he~~they ~~does~~ not wish to do so.

- 9.6 Any individual who is eligible to become a member of the Staff Constituency under paragraph 9.1 above shall become a member upon entry to the Trust's register of Members.
- 9.7 With effect from the date of the RNHRD Acquisition, any member of the RNHRD staff shall, provided that they are eligible to be a member of the staff constituency of the Trust, be deemed to be a member of the Trust. The Secretary shall cause the name of the individual to be entered in the Trust's register of Members.

10. Restriction on membership

- 10.1 An individual, who is a member of a constituency, or of a class within a constituency, may not while membership of that constituency or class continues, be a member of any other constituency or class.
- 10.2 An individual who satisfies the criteria for membership of the Staff Constituency may not become or continue as a member of any constituency other than the Staff Constituency.
- 10.3 All membership is individual and there shall be no facility for corporate membership.
- 10.4 Save as for provided for under paragraph 18.1 below and paragraph 1 of Appendix 2 to Annex 5 of this Constitution, Members are not entitled to receive payments or dividends from the Trust and no Member is entitled to preferential receipt of any goods or services provided by the Trust.
- 10.5 Save as provided for in this Constitution, no Member may represent ~~himself~~themselves, in writing or verbally, as belonging to any category of membership of the Trust:
 - 10.5.1 in a manner which might associate the Trust with the personal opinions expressed by the Member in question;
 - 10.5.2 where this might be misconstrued as a title unless it applies to a factual statement of any type of membership of the Trust in books of reference or in a curriculum vitae; and
 - 10.5.3 save for members of the Staff Constituency, and subject to the provisions of paragraph 32.2.3 below, no Member shall designate the Trust as his personal or professional postal address in any published work or any communication to the media.
- 10.6 Further provisions as to the circumstances in which an individual may not become or continue as a Member of the Trust are set out in Appendix 2 of Annex 8.

11. Council of Governors – composition

- 11.1 The Trust is to have a Council of Governors, which shall comprise both Elected Governors and Appointed Governors.
- 11.2 The composition of the Council of Governors is specified in Annex 3.
- 11.3 The members of the Council of Governors, other than the Appointed Governors, shall be chosen by election by their constituency or, where there are classes within a constituency, by their class within that constituency.
- 11.4 The number of Governors to be elected by each constituency, or, where appropriate, by each class of each constituency, is specified in Annex 3.

12. Council of Governors – election of Governors

- 12.1 Elections for Elected Governors shall be conducted in accordance with the Model Rules for Elections, as may be varied from time to time, and as are attached at Annex 4. Elections for Elected Governors shall be conducted using the first past the post system. Thus, where appropriate, the alternative rules marked "FPP" (First Past the Post) should be used.
- 12.2 The Model Rules for Elections, as published from time to time by the Department of Health or the Foundation Trust Network form part of this Constitution.
- 12.3 A subsequent variation of the Model Rules for Elections by the Department of Health or the Foundation Trust Network shall not constitute an amendment of the terms of this Constitution for the purposes of paragraph 44 of the Constitution.
- 12.4 An election, if contested, shall be by secret ballot.
- 12.5 A person may not vote at an election for or stand for election as an Elected Governor unless within the specified period stated in the Model Rules for Elections ~~he~~they ~~have~~has made a declaration in the forms specified in paragraphs 6.1 and/or 6.2 (as appropriate) of Appendix 2 of Annex 5 of this Constitution. It is an offence (other than in relation to the Staff Constituency) to knowingly or recklessly make such a declaration which is false in a material particular.

13. Council of Governors - tenure

13.1 Elected Governors

- 13.1.1 Subject to the provisions of paragraph 13.2 below, an Elected Governor may hold office for a period of up to 3 years.
- 13.1.2 An Elected Governor shall cease to hold office if ~~he~~they ~~ceases~~ to be a member of the constituency or class by which ~~they were~~he was elected.
- 13.1.3 Subject to paragraph 13.1.4 below, an Elected Governor shall be eligible for re-election at the end of ~~his~~their term.

13.1.4 An Elected Governor may hold office for a maximum of 9 years.

~~13.2 The transitional provisions of paragraph 5 of Appendix 2 of Annex 5 relating to the Initial Elections shall apply in relation to the Initial Elected Governors.~~

~~13.3~~ 13.2 **Appointed Governors**

~~13.3.1~~ 13.2.1 An Appointed Governor may hold office for a period of up to 3 years.

~~13.3.2~~ 13.2.2 An Appointed Governor shall cease to hold office if the relevant sponsoring organisation withdraws its sponsorship of ~~him~~ them by notice in writing to the Secretary.

~~13.3.3~~ 13.2.3 An Appointed Governor shall cease to hold office if ~~he~~ they ceases to be employed by or associated with the relevant sponsoring organisation.

~~13.3.4~~ 13.2.4 Subject to paragraph 13.3.5 below, an Appointed Governor shall be eligible for re-appointment at the end of ~~his~~ their term.

~~13.3.5~~ 13.2.5 An Appointed Governor may hold office for a maximum of 9 years.

~~13.4~~ 13.3 For the purposes of the tenure provisions set out in paragraphs 13.1, 13.2 and 13.3 above, a "year" means a period of 12 consecutive months commencing immediately on the date of Authorisation and each successive period of 12 months thereafter.

~~13.5~~ 13.4 The appointment of Appointed Governors is subject to the veto provisions, in relation to partnership governors, contained in paragraph 2.2.5 of Annex 3.

14. Council of Governors – disqualification and removal

14.1 The following may not become or continue as a member of the Council of Governors:

14.1.1 a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged;

14.1.2 a person in relation to whom a moratorium period under a debt relief order applies (under Part 7A of the Insolvency Act 1986);

14.1.3 a person who has made a composition or arrangement with, or granted a trust deed for, ~~his~~ their creditors and has not been discharged in respect of it;

14.1.4 a person who within the preceding five years has been convicted of any offence anywhere in the world and a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on ~~him~~ them;

14.2 Governors must be at least 16 years of age at the date they are nominated for election or appointment.

- 14.3 A Governor may resign from that office at any time during the term of that office by giving notice in writing to the Secretary.
- 14.4 Subject to paragraph 14.5 below, if a Governor fails to attend 2 consecutive meetings of the Council of Governors in any Financial Year, ~~his~~their tenure of office is to be terminated immediately unless the Council of Governors is satisfied by a 75% majority of those members of the Council of Governors present and voting at a meeting of the Council of Governors that:
- 14.4.1 the absence was due to a reasonable cause; and
- 14.4.2 ~~he~~they will be able to start attending meetings of the Council of Governors again within such a period as the other Governors consider reasonable.
- 14.5 Notwithstanding the provisions of paragraph 14.4 above, if a Governor fails to attend 2 out of 3 consecutive meetings of the Council of Governors and ~~he~~has~~they~~have previously been the subject of a decision in ~~his~~their favour under paragraph 14.4 above, that Governor's tenure of office is to be terminated immediately.
- 14.6 If a Governor is considered to have acted in a manner inconsistent with:
- 14.6.1 the principles of the NHS and/or the values of the Trust, as set out in Appendix 1 of Annex 8, or in a manner detrimental to the interests of the Trust; or
- 14.6.2 the Standing Orders for the Council of Governors; or
- 14.6.3 the Governor's Code of Conduct; or
- ~~14.6.4~~ ~~he~~has~~they~~have failed to declare an interest as required by this Constitution or the Standing Orders for the Council of Governors, or ~~he~~they ~~has~~have spoken or voted at a meeting on a matter in which ~~he~~has~~they~~have an interest contrary to this Constitution or the Standing Orders for the Council of Governors, and in this paragraph "interest" includes a pecuniary and a non-pecuniary interest and in either case whether direct or indirect, and
- ~~he~~is~~they~~are adjudged to have so acted by a majority of not less than two-thirds of the members of the Council of Governors present and voting at a meeting of the Council of Governors then the Governor shall vacate ~~his~~their office immediately.
- 14.7 The Standing Orders for the Council of Governors shall provide for the process to be adopted in cases relating to the termination of a Governor's tenure.
- 14.8 A Governor who resigns from that office under paragraph 14.3 above, or whose office is terminated under paragraphs 14.5 or 14.6 above, shall not be eligible to stand for re-election or re-appointment to the Council of Governors for a period of 3 years from the date of ~~his~~their resignation or removal from office or the date upon which any appeal against ~~his~~their removal from office is disposed of, whichever is later.

- 14.9 Further provisions as to the circumstances in which an individual may not become or continue as a member of the Council of Governors are set out in Appendix 1 of Annex 5.

15. Council of Governors – meetings of Governors

- 15.1 The Chair of the Trust (i.e. the Chair of the Board of Directors, appointed in accordance with the provisions of paragraph 22.1 or 23.1 below) or, in ~~his~~their absence, the Vice Chair (appointed in accordance with the provisions of paragraph 24 below), shall preside at meetings of the Council of Governors and the person chairing the meeting shall have a casting vote.
- 15.2 Meetings of the Council of Governors shall be open to members of the public. Members of the public may be excluded from a meeting for special reasons by resolution of the Council of Governors on the grounds that the Council of Governors considers that publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of the business or the proceedings.
- 15.3 For the purpose of obtaining information about the Trust's performance of its functions or the Directors' performance of their duties (and deciding whether to propose a vote on the Trust's or Directors' performance), the Council of Governors may require one more of the Directors to attend a meeting of the Council of Governors.

16. Council of Governors – standing orders

The Standing Orders for the Council of Governors are attached at Annex 6.

17. Council of Governors - conflicts of interest of Governors

- 17.1 If a Governor has in any way a direct or indirect interest in a proposed transaction or arrangement with the Trust, the Governor must declare the nature and extent of that interest to the other Governors before the Trust enters into the transaction or arrangement.
- 17.2 If a declaration under paragraph 17.1 above proves to be, or becomes, inaccurate or incomplete, the Governor must make a further declaration before the Trust enters into the transaction or arrangement.
- 17.3 This paragraph 17.3 does not require a declaration of an interest of which the Governor is not aware or where the Governor is not aware of the transaction or arrangement in question.
- 17.4 A Governor need not declare an interest:
 - 17.4.1 if, it cannot reasonably be regarded as likely to give rise to a conflict of interest;
 - 17.4.2 if, or to the extent that, the Governors are already aware of it.
- 17.5 The Standing Orders for the Council of Governors shall make provision for the disclosure of interests and arrangements for the exclusion of a Governor declaring any interest from any discussion or consideration of the matter in respect of which an interest has been disclosed.

18. Council of Governors – travel, remuneration and other expenses

- 18.1 Governors are not to receive remuneration from the Trust, provided that this shall not prevent the remuneration of Governors by their employer.
- 18.2 Subject to any Trust policy on the payment of expenses, the Trust may pay travelling and other costs and expenses to members of the Council of Governors at such rates as the Board of Directors decides from time to time in its absolute discretion.

19. Council of Governors – further provisions

Further provisions with respect to the Council of Governors are set out in Annex 5. These include:

- 19.1 Eligibility to be on the Council of Governors;
- 19.2 Remuneration;
- 19.3 Vacancies;
- 19.4 Meetings;
- ~~19.5~~ [Transitional provisions for the Initial Elected Governors;](#)
- ~~19.6~~ [19.5](#) Committees, sub-committees and joint committees; and
- ~~19.7~~ [19.6](#) Council of Governors: declarations.

19A Council of Governors – general duties

- 19A.1 The general duties of the Council of Governors are:
 - 19A.1.1 to hold the Non-Executive Directors individually and collectively to account for the performance of the Board of Directors; and
 - 19A.1.2 to represent the interests of the Members as a whole and the interests of the public [at large](#).

19B Council of Governors – skills and knowledge

The Trust must take steps to secure that the Governors are equipped with the skills and knowledge they require in their capacity as such.

19C Council of Governors – referral to the panel

- 19C.1 Subject to paragraph 19C.2 below, a Governor of the Trust may refer to the Panel a question as to whether the Trust has failed or is failing to act in accordance with:
 - 19C.1.1 this Constitution; or
 - 19C.1.2 the provisions made by or under Chapter 5 of Part 2 of the 2006 Act.

- 19C.2 A Governor may refer a question to the Panel only if more than half of the members of the Council of Governors present and voting at a meeting of the Council of Governors approve the referral.
- 19C.3 In this paragraph 19C, the "Panel" means a panel of persons appointed by ~~NHSE~~ NHS England to which a governor of an NHS foundation trust may refer a question as to whether the trust has failed or is failing to act in accordance with its Constitution, or to act in accordance with provision made by or under Chapter 5 of the 2006 Act.

20. Board of Directors – composition

- 20.1 The Trust is to have a Board of Directors, which shall comprise both Executive Directors and Non-Executive Directors.
- 20.2 The Board of Directors is to comprise:
- 20.2.1 a Non-Executive Director Chair; and
- 20.2.2 up to a ~~minimum~~ of 56 other Non-Executive Directors; and
- 20.2.3 up to a ~~maximum~~ of 65 Executive Directors.
- 20.3 One of the Executive Directors shall be the Chief Executive.
- 20.4 The Chief Executive shall be the Accounting Officer.
- 20.5 One of the Executive Directors shall be the ~~Finance Director~~ Chief Finance Officer.
- 20.6 One of the Executive Directors is to be a Registered Medical Practitioner or a Registered Dentist.
- 20.7 One of the Executive Directors is to be a Registered Nurse or a Registered Midwife.
- 20.8 There shall be a majority of Non-Executive Directors (including the Chair). In the event that the number of Non-Executive Directors (including the Chair) is equal to the number of voting Executive Directors, the Chair (and in ~~his~~ their absence, the Vice Chair), shall have a casting vote at meetings of the Board of Directors in accordance with the Standing Orders for the Board of Directors.
- 20.9 The validity of any act of the Trust is not affected by any vacancy among the Directors or by any defect in the appointment of any Director.
- ~~20.10 Subject to the provisions of paragraphs 20.3 to 20.7 above, the Board of Directors shall determine any change in the number of Directors, provided that:~~
- ~~20.10.1 any change in the number of Directors is within the range set out in paragraph 20.2 above; and~~
- ~~20.10.2 there shall be a majority of Non-Executive Directors (including the Chair).~~

~~20.11~~20.10 Additional Executive Directors may be appointed to the Board of Directors from time to time ~~(exceeding the total of 6 referred to in section 20.2.3)~~. These individuals are officers of the Trust appointed in accordance with the Constitution, entitled to full participation in the work of the Board of Directors with the exception of formal voting rights.

21. Board of Directors – qualification for appointment as a Non-Executive Director

Subject to the provisions of paragraph 23.3 below, a person may be appointed as a Non-Executive Director only if:

- 21.1 ~~he is~~they are a member of the Public Constituency; and
- 21.2 ~~he is~~they are not disqualified by virtue of paragraphs ~~26~~7.1 or ~~27~~6.2 below.

22. Board of Directors – appointment, suspension and removal of Chair and other Non-Executive Directors

- 22.1 ~~Subject to paragraph 22.2 below and the provisions of paragraph 2 of Appendix 3 of Annex 8, t~~The Council of Governors at a general meeting of the Council of Governors shall appoint, suspend (in a case where there may be grounds to remove) or remove the Chair and the other Non-Executive Directors.
- 22.2 During any general meeting of the Council of Governors at which the Chair may be suspended or removed, the Vice Chair shall preside, or if the Vice Chair is absent from the meeting or is absent temporarily on the grounds of a declared conflict of interest, another Non-Executive Director, as shall be appointed by the Council of Governors, shall preside.
- 22.3 Suspension or removal of the Chair or another Non-Executive Director shall require a resolution to be submitted by 11 Governors which must be seconded by not less than 3 Governors and requires the resolution in question to be approved by three-quarters of the members of the Council of Governors.
- 22.4 The Governor sponsoring the resolution mentioned in paragraph 22.3 above shall provide written reasons in support of the resolution to the Chair or other Non-Executive Director in question, who shall be given the opportunity to respond to such reasons at the meeting of the Council of Governors which the resolution is to be considered and voted upon. If the individual in question fails to attend the meeting without due cause, the meeting may proceed in their absence. The decision to proceed in these circumstances will be at the sole discretion of the person chairing the meeting in question.
- 22.5 In making any decision to remove either the Chair or a Non-Executive Director under paragraph 22.4 above, the Council of Governors shall:
 - 22.5.1.1 take into account the results of any appraisals concerning the Chair (or, as the case may be) the Non-Executive Director in question;
 - 22.5.1.2 have regard to the criteria set out at paragraph 2 of Appendix 3 to Annex 8 of this Constitution; and

22.5.1.3 follow the relevant Trust procedures for investigating and handling concerns and complaints regarding Non-Executive Directors.

22.6 If any resolution to suspend or remove either the Chair or a Non-Executive Director is not approved at a meeting of the Council of Governors in accordance with paragraph 22.3 above, no further resolution can be put forward to suspend or remove such Non-Executive Director, or the Chair which is based on the same reasons within 12 calendar months of the meeting of the Council of Governors at which the resolution mentioned in paragraph 22.3 above was considered.

~~22.7 The initial Chair and the initial Non-Executive Directors are to be appointed in accordance with paragraph 23 below.~~

~~23. Board of Directors – appointment of initial Chair and initial other Non-Executive Directors~~

~~23.1 The Council of Governors shall appoint the Chair of the Applicant Trust as the initial Chair of the Trust, if he wishesthey wish to be appointed.~~

~~23.2 The power of the Council of Governors to appoint the other Non-Executive Directors is to be exercised, so far as possible, by appointing as the initial Non-Executive Directors any of the non-executive directors of the Applicant Trust (other than the Chair) who wish to be appointed.~~

~~23.3 The criteria for qualification for appointment as a Non-Executive Director set out in paragraph 21 above (other than disqualification by virtue of paragraph 27 below) do not apply to the appointment of the initial Chair and the initial other Non-Executive Directors in accordance with the procedures set out in this paragraph 23.~~

~~23.4 An individual appointed as the initial Chair or as an initial Non-Executive Director in accordance with the provisions of this paragraph 23 shall be appointed for the unexpired period of his term of office as Chair or (as the case may be) non-executive director of the Applicant Trust, but if, on appointment, that period is less than 12 months, he shall be appointed for 12 months.~~

24.23. Board of Directors – appointment of Vice Chair

24.123.1 The Council of Governors at a general meeting or otherwise of the Council of Governors shall appoint one of the Non-Executive Directors as a Vice Chair for such period, not exceeding ~~his~~their term of office as a Non-Executive Director, as the Council of Governors may specify on appointing ~~him~~them.

24.223.2 Any Non-Executive Director so appointed under paragraph ~~23~~24.1 above may at any time resign from the office of Vice Chair by giving notice in writing to the Secretary. The Council of Governors may thereupon appoint another Non-Executive Director as Vice Chair in accordance with paragraph ~~23~~24.1 above.

24.323.3 If the Chair is unable to discharge ~~his~~their functions as Chair of the Trust, the Vice Chair will be the "acting Chair" of the Trust until such time as the Chair is able to discharge ~~his~~their functions as Chair, or a new Chair is appointed by the Council of Governors in accordance with paragraph 22 above.

25.24. Board of Directors - appointment and removal of the Chief Executive, the Deputy Chief Executive and other Executive Directors

24.1 The Non-Executive Directors shall appoint or remove the Chief Executive. All appointments must satisfy the requirements of Regulation 5: Fit and Proper Persons: Directors of the Health and Social Care Act 2008 (Regulated Activities Regulations 2014 including all future amendments to the regulation.

25.124.2

25.224.3 ~~Subject to the provisions of paragraph 26.2 below, t~~The appointment of the Chief Executive shall require the approval of a majority of the members of the Council of Governors present and voting at a meeting of the Council of Governors.

~~25.3 The initial Chief Executive is to be appointed in accordance with paragraph 26 below.~~

25.424.4 A committee consisting of the Chair, the Chief Executive and the other Non-Executive Directors shall appoint or remove the other Executive Directors.

25.524.5 The Chief Executive shall from time to time nominate, by way of written resolution, one of the Executive Directors to be the Deputy Chief Executive and the resolution in question is to be approved by a simple majority of members of the Board of Directors present and voting at a meeting of the Board of Directors.

26.25. Board of Directors – appointment and removal of ~~initial~~ Chief Executive and other Executive Directors

26.125.1 The Non-Executive Directors shall appoint or remove the ~~c~~Chief officer Executive of the Applicant Trust as the initial Chief Executive of the Trust, if he wishes to be appointed.

25.2 The appointment of the Chief Executive is subject to the approval of a majority of the members of the Council of Governors present and voting at a meeting of the Council of Governors.

25.3 A committee consisting of the Chair, the Chief Executive and the other Non-Executive Directors shall appoint or remove the other Executive Directors.

25.4 All appointments must satisfy the requirements of Regulation 5: Fit and Proper Persons: Directors of the Health and Social Care Act 2008 (Regulated Activities Regulations 2014 including all future amendments to the regulation.

~~26.2 The appointment of the chief officer of the Applicant Trust as the initial Chief Executive of the Trust shall not require the approval of the Council of Governors.~~

27.26. Board of Directors – disqualification

27.126.1 The following may not become or continue as a member of the Board of Directors:

27.1.126.1.1 a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged;

- ~~27.1.2~~26.1.2 a person in relation to whom a moratorium period under a debt relief order applies (under Part 7A of the Insolvency Act 1986);
- ~~27.1.3~~26.1.3 a person who has made a composition or arrangement with, or granted a trust deed for, ~~his~~their creditors and has not been discharged in respect of it;
- ~~27.1.4~~26.1.4 a person who within the preceding five years has been convicted of an offence anywhere in the world and a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on ~~him~~them;
- ~~27.1.5~~26.1.5 a person whose tenure of office as a Chair or member or director of a Health Service Body has been terminated on the grounds that ~~his~~their appointment is not in the interests of the health service;
- ~~27.1.6~~26.1.6 a person who has had ~~his~~their name removed from a list maintained under regulations pursuant to Sections 91, 106, 123, or 146 of the 2006 Act, or the equivalent lists maintained by Local Health Boards in Wales under the National Health Service (Wales) Act 2006, and ~~he~~they ~~has~~have not subsequently had ~~his~~their name included in such a list and, due to the reasons(s) for such removal, ~~he~~they ~~is~~are considered by the Trust to be unsuitable to be a Director;
- ~~27.1.7~~26.1.7 a person who is a member of the Council of Governors;
- ~~27.1.8~~26.1.8 an executive director, non-executive director or a governor of another Health Service Body, unless approval is received from no less than 75% of the voting members of the Board of Directors;
- ~~27.1.9~~26.1.9 a person who is a member of a local authority Health Overview and Scrutiny Committee;
- ~~27.1.10~~26.1.10 a person who is the subject of a disqualification order made under the Company Directors' Disqualification Act 1986;
- ~~27.1.11~~26.1.11 a person who has failed without reasonable cause to fulfil any training requirement established by the Board of Directors;
- ~~27.1.12~~26.1.12 a person who has failed to sign and deliver to the Secretary a statement in the form required by the Board of Directors confirming acceptance of the Directors' Code of Conduct;
- ~~27.1.13~~26.1.13 a person who is an Immediate Family Member of a Director or a Governor;
- ~~27.1.14~~26.1.14 a person who is the subject of a Sex Offenders Order and/or ~~his~~their name is included in the Sex Offenders Register;
- ~~27.1.15~~26.1.15 a person who, by reference to information revealed in a criminal record certificate or enhanced criminal record certificate issued by the Disclosure and Barring Service under Part V of the Police Act 1997, is considered by the Trust to be inappropriate on the grounds that ~~his~~their

appointment might adversely affect public confidence in the Trust or otherwise bring the Trust into disrepute;

~~27.1.16~~26.1.16 subject to the provisions of paragraph ~~25~~67.1.19, a person who is incapable by reason of mental disorder, illness or injury of managing and/or administering ~~his~~their property and/or ~~his~~their affairs;

~~27.1.17~~26.1.17 a person who is included in any barred list established under the Safeguarding Vulnerable Groups Act 2006, or who is included in an equivalent list maintained under the law of Scotland or Northern Ireland;

~~27.1.18~~26.1.18 a person who has demonstrated aggressive or violent behaviour (such as verbal assault, physical assault, violence or harassment) at any NHS hospital, NHS premises or other NHS establishment or against any of the Trust's employees, or other persons who exercise functions for the purposes of the Trust, whether or not in circumstances leading to ~~his~~their removal or exclusion from any NHS hospital, premises or establishment;

~~27.1.19~~26.1.19 a person who has within the preceding 2 years been dismissed, otherwise than by reason of redundancy, from any paid employment with a Health Service Body; or

~~27.1.20~~26.1.20 Where an individual is deemed by the Secretary, in ~~his~~their absolute discretion, to be incapable by reason of mental disorder, illness or injury of managing and/or administering ~~his~~their property and/or affairs for the purposes of paragraph ~~25~~7.1.15 of the Constitution, the Secretary shall either:

~~27.1.20.1~~26.1.20.1 temporarily suspend the individual from office until such time as the Secretary, in ~~his~~their absolute discretion, considers ~~him~~them to be capable of managing and/or administering ~~his~~their property and affairs; or

~~27.1.20.2~~26.1.20.2 (where the Secretary, in ~~his~~their absolute discretion, considers ~~him~~them to be permanently incapable of managing and/or administering ~~his~~their property and affairs), declare that the individual is disqualified from office, in accordance with the individual's terms and conditions of employment, service or engagement (as the case may be); and

~~27.1.20.3~~26.1.20.3 In considering whether an individual is incapable by reason of mental disorder, illness or injury of managing and/or administering ~~his~~their property and/or affairs, the Secretary shall take into account the provisions of the Mental Capacity Act 2005, or any statutory modification thereof and ~~he~~they shall be entitled to take appropriate professional advice from internal Trust advisors, and/or external advisors, as necessary.

~~27.2~~26.2 Where an individual was a non-executive director of the ~~Applicant~~Trust, they may not be re-appointed as a Non-Executive Director of the Trust after the expiry of:

~~27.2.126.2.1~~ in the case of an individual who served two consecutive terms of office as a non-executive director of the ~~Applicant~~ Trust, the period for which they were appointed as a Non-Executive Director of the Trust ~~pursuant to paragraph 23.4 above, but if that period is 12 months (the "Initial Term") a further term of office of not more than 12 months following the Initial Term;~~ or

~~27.2.226.2.2~~ in any other case, a further term of not more than 3 years following the period for which they were appointed as a Non-Executive Director of the Trust ~~pursuant to paragraph 23.4 above.~~

28.27. Board of Directors – standing orders

The Standing Orders for the Board of Directors are attached at Annex 7.

278A Board of Directors – general duty

~~278A.1~~ The general duty of the Board of Directors and of each Director individually, is to act with a view to promoting the success of the Trust so as to maximise the benefits for the Members as a whole and for the public.

29.28. Board of Directors - conflicts of interest of Directors

~~29.128.1~~ The duties that a Director of the Trust has by virtue of being a Director include in particular:

~~29.1.128.1.1~~ A duty to avoid a situation in which the Director has (or can have) a direct or indirect interest that conflicts (or possibly may conflict) with the interests of the Trust (a "**Conflict**").

~~29.1.228.1.2~~ A duty not to accept a benefit from a third party by reason of being a Director or doing (or not doing) anything in that capacity.

~~29.228.2~~ The duty referred to in sub-paragraph ~~279.1.1~~ is not infringed if:

~~29.2.128.2.1~~ The situation cannot reasonably be regarded as likely to give rise to a Conflict, or

~~29.2.228.2.2~~ The matter has been authorized in accordance with the Constitution.

~~29.328.3~~ The duty referred to in sub-paragraph ~~279.1.2~~ is not infringed if acceptance of the benefit cannot reasonably be regarded as likely to give rise to a conflict of interest.

~~29.428.4~~ In sub-paragraph ~~279.1.2~~, "third party" means a person other than:

~~29.4.128.4.1~~ the Trust, or

~~29.4.228.4.2~~ a person acting on its behalf.

~~29.528.5~~ If a Director of the Trust has in any way a direct or indirect interest in a proposed transaction or arrangement with the Trust, the Director must declare the nature and extent of that interest to the other Directors.

~~29.6~~28.6 If a declaration under this paragraph ~~27~~9 proves to be, or becomes, inaccurate or incomplete, the Director must make a further declaration before the Trust enters into the transaction or arrangement.

~~29.7~~28.7 Any declaration required by this paragraph ~~27~~9 must be made before the Trust enters into the transaction or arrangement.

~~29.8~~28.8 This paragraph ~~27~~9 does not require a declaration of an interest of which the Director is not aware or where the Director is not aware of the transaction or arrangement in question.

~~29.9~~28.9 A Director need not declare an interest:

~~29.9.1~~28.9.1 if, it cannot reasonably be regarded as likely to give rise to a conflict of interest;

~~29.9.2~~28.9.2 if, or to the extent that, the Directors are already aware of it;

~~29.9.3~~28.9.3 if, or to the extent that, it concerns terms of the Director's appointment that have been or are to be considered by:

~~29.9.3.1~~28.9.3.1 a meeting of the Board of Directors: or

~~29.9.3.2~~28.9.3.2 by a committee of the Directors appointed for the purpose under this Constitution.

~~29.10~~28.10 A matter shall have been authorised for the purposes of paragraph ~~27~~9.2.2 above if:

~~29.10.1~~28.10.1 the Directors, in accordance with the requirements set out in this paragraph ~~27~~9.10, authorise any matter or situation proposed to them by any Director which would, if not authorised, involve a Director (an "Interested Director") potentially breaching ~~his~~their duty under paragraph ~~27~~9.2.1 above to avoid Conflicts:

~~29.10.1.1~~28.10.1.1 the matter in question shall have been proposed by any Director for consideration in the same way that any other matter may be proposed to the Directors under the provisions of this Constitution;

~~29.10.1.2~~28.10.1.2 any requirement as to the quorum for consideration of the relevant matter is met without counting the Interested Director or any other Interest Director; and

~~29.10.2~~28.10.2 the matter was agreed to without the Interested Director voting
Any authorisation of a Conflict under this paragraph ~~27~~9.10 may (whether at the time of giving the authorisation or subsequently):

~~29.10.2.1~~28.10.2.1 extend to any actual or potential conflict of interest which may reasonably be expected to arise out of the Conflict so authorised;

~~29.10.2.2~~28.10.2.2 provide that the Interested Director be excluded from the receipt of documents and information and the participation in discussions

(whether at meetings of the Directors or otherwise) related to the Conflict;

~~29.10.2.3 — provide that the Interested Director be excluded from the receipt of documents and information and the participation in discussions (whether at meetings of the Directors or otherwise) related to the Conflict;~~

~~29.10.2.4~~ 28.10.2.3 impose upon the Interested Director such other terms for the purposes of dealing with the Conflict as the Directors think fit;

~~29.10.2.5~~ 28.10.2.4 provide that, where the Interested Director obtains, or has obtained (through ~~his~~ their involvement in the Conflict and otherwise than through ~~his~~ their position as a Director of the Trust) information that is confidential to a third party, ~~he~~ they will not be obliged to disclose that information to the Board of Directors, or to use it in relation to the Trust's affairs where to do so would amount to a breach of that confidence; and

~~29.10.2.6~~ 28.10.2.5 permit the Interested Director to absent ~~himself~~ themselves from the discussion of matters relating to the Conflict at any meeting of the Directors and be excused from reviewing papers prepared by, or for, the Directors to the extent they relate to such matters.

~~29.11~~ 28.11 Where the Directors authorise a Conflict, the Interested Director will be obliged to conduct ~~himself~~ themselves in accordance with any terms imposed by the Directors in relation to the Conflict.

~~29.12~~ 28.12 The Directors may revoke or vary such authorisation at any time, but this will not affect anything done by the Interested Director, prior to such revocation or variation in accordance with the terms of such authorisation.

~~29.13~~ 28.13 A Director is not required, by reason of being a Director, to account to the Trust for any remuneration, profit or other benefit which ~~he~~ they derives from or in connection with a relationship involving a Conflict which has been authorised by the Directors (subject in each case to any terms, limits or conditions attaching to that authorisation) and no contract shall be liable to be avoided on such grounds.

~~29.14~~ 28.14 The Standing Orders for the Board of Directors shall make provision for the disclosure of interests and arrangements for the exclusion of a Director declaring any interest from any discussion or consideration of the matter in respect of which an interest has been disclosed.

30.29. Board of Directors – remuneration and terms of office

~~30.1 — The Council of Governors at a general meeting of the Council of Governors shall decide the remuneration and allowances, and the other terms and conditions of office, of the Chair and the other Non-Executive Directors, but pending its decision on these matters, these matters are to continue in accordance with the remuneration and allowances, and the other terms and conditions of office of the respective individuals as engaged by the Applicant Trust.~~

29.1 The Council of Governors at a general meeting of the Council of Governors shall decide the remuneration and allowances, and the other terms and conditions of office, of the Chair and the other Non-Executive Directors.

~~30.229.2~~ The Trust shall establish a committee of Non-Executive Directors to decide the remuneration and allowances, and the other terms and conditions of office, of the Chief Executive and other Executive Directors.

30. ~~30A~~ Board of Directors – Meetings

30.1 ~~30A.1~~ Meetings of the Board of Directors shall be open to members of the public. Members of the public may be excluded from a meeting for special reasons.

30.2 ~~30A.2~~ Before a meeting, the Board of Directors must send a copy of the agenda of the meeting to the Council of Governors. As soon as practicable after holding a meeting, the Board of Directors must send a copy of the minutes of the meeting to the Council of Governors.

31. Registers

31.1 The Trust shall have:

- 31.1.1 a register of Members showing, in respect of each Member, the constituency to which ~~he~~they belongs and, where there are classes within it, the class to which ~~he~~they belongs;
- 31.1.2 a register of members of the Council of Governors;
- 31.1.3 a register of interests of the members of the Council of Governors;
- 31.1.4 a register of members of the Board of Directors; and
- 31.1.5 a register of interests of the members of the Board of Directors.

31.2 The Secretary shall be responsible for compiling and maintaining the registers in paragraph 31.1 above and the registers may be kept in either paper or electronic form. Admission to and removal from any register shall be in accordance with the provisions of this Constitution. The Secretary shall update the registers with new or amended information as soon as is practical and in any event within 21 days of receipt.

32. Admission to and removal from the registers

32.1 Register of Members

The Secretary shall maintain the register of Members in two parts:

- 32.1.1 Part one, which shall be the register referred to in the 2006 Act, shall include the name of each Member and the constituency to which they belong and, where there are classes within it, the class to which they belong, and shall be open to inspection by the public in accordance with paragraphs 33 and 34 below.
- 32.1.2 Part two shall contain all the information from the application referred to in paragraph 7 above and shall not be open to inspection by the public nor may copies or extracts from it be made available to any third party (save to the extent that copies or extracts from it be made available to any third party appointed by the Trust to maintain the register of Members and to conduct elections in accordance with the provisions of paragraph 12 above).
- 32.1.3 Notwithstanding the provisions of paragraphs 32.1.1 and 32.1.2 above, the Trust shall extract such information as it needs in aggregate to satisfy itself that the actual membership of the Trust is representative of those eligible for membership and for the administration of the provisions of this Constitution.

32.2 Register of members of the Council of Governors

The register of members of the Council of Governors shall list:

- 32.2.1 the name of each Governor;
- 32.2.2 their category of membership of the Council of Governors (public, staff, local authority, or partnership organisation); and
- 32.2.3 an address through which they may be contacted, which may be the Secretary.

32.3 Register of interests of members of the Council of Governors

The register of interests of the members of the Council of Governors shall contain:

- 32.3.1 the names of each Governor; and
- 32.3.2 whether ~~he has~~they have declared any interests and, if so, the interests declared in accordance with this Constitution and the Standing Orders for the Council of Governors.

32.4 Register of members of the Board of Directors

The register of members of the Board of Directors shall list:

- 32.4.1 the name of each Director;
- 32.4.2 their capacity on the Board of Directors; and
- 32.4.3 an address through which they may be contacted which may be the Secretary.

32.5 Register of interests of members of the Board of Directors

The register of interests of members of the Board of Directors shall contain:

- 32.5.1 the name of each Director; and
- 32.5.2 whether ~~he has~~they have declared any interests and, if so, the interests declared in accordance with this Constitution and the Standing Orders for the Board of Directors.

33. Registers – inspection and copies

- 33.1 The Trust shall make the registers specified in paragraphs 32.1 to 32.5 above available for inspection by members of the public, except in the circumstances set out in paragraph 33.2 below or as otherwise prescribed by regulations including, for the avoidance of doubt, the Public Benefit Corporation (Register of Members) Regulations 2004 (SI 2004/539).

- 33.2 The Trust shall not make any part of the register of Members available for inspection by members of the public which shows details of any Member of the Trust, if the Member so requests.
- 33.3 So far as the registers are required to be made available:
- 33.3.1 they are, subject to paragraph 33.4 below, to be available for inspection free of charge at all reasonable times; and
- 33.3.2 a person who requests a copy of or extract from the registers is to be provided with a copy or extract.
- 33.4 If the person requesting a copy or extract is not a Member of the Trust, the Trust may impose a reasonable charge for doing so.

34. Documents available for public inspection

- 34.1 Subject to paragraph 34.4 below, the Trust shall make the following documents available for inspection by members of the public free of charge at all reasonable times as well as on the Trust's website:
- 34.1.1 a copy of the current Constitution;
- 34.1.2 a copy of the latest Annual Accounts and of any report of the Auditor on them;
- 34.1.3 a copy of the latest Annual Report;
- ~~34.2.3~~ 34.1.4 Subject to paragraph 34.4 below, the Trust shall also make the following documents relating to a special administration of the Trust available for inspection by members of the public free of charge at all reasonable times:
- ~~34.2.1~~ 34.1.5 a copy of any order made under section 65D (appointment of trust special administrator), 65J (power to extend time), 65KC (action following Secretary of State's rejection of final report), 65L (trusts coming out of administration) or 65LA (trusts to be dissolved) of the 2006 Act;
- ~~34.2.2~~ 34.1.6 a copy of any report laid under section 65D (appointment of trust special administrator) of the 2006 Act;
- ~~34.2.3~~ 34.1.7 a copy of any information published under section 65D (appointment of trust special administrator) of the 2006 Act;
- ~~34.2.4~~ 34.1.8 a copy of any draft report published under section 65F (administrator's draft report) of the 2006 Act;
- ~~34.2.5~~ 34.1.9 a copy of any statement provided under section 65F (administrator's draft report) of the 2006 Act;
- ~~34.2.6~~ 34.1.10 a copy of any notice published under section 65F (administrator's draft report), 65G (consultation plan), 65H (consultation requirements), 65J

(power to extend time), 65KA (NHS England's decision), 65KB (Secretary of State's response to NHS England's decision), 65KC (action following Secretary of State's rejection of final report) or 65KD (Secretary of State's response to re-submitted final report) of the 2006 Act;

~~34.2.7~~34.1.11 a copy of any statement published or provided under section 65G (consultation plan) of the 2006 Act;

~~34.2.8~~34.1.12 a copy of any final report published under section 65I (administrator's final report) of the 2006 Act;

~~34.2.9~~34.1.13 a copy of any statement published under section 65J (power to extend time) or 65KC (action following Secretary of State's rejection of final report) of the 2006 Act; and

~~34.2.10~~34.1.14 a copy of any information published under section 65M (replacement of trust special administrator) of the 2006 Act.

~~34.3~~34.2 Subject to paragraph 34.4 below, any person who requests a copy of or extract from any of the documents listed in this paragraph 34 is to be provided with a copy, or extract.

~~34.4~~34.3 If the person requesting a copy or extract is not a Member of the Trust, the Trust may impose a reasonable charge for doing so.

35. Auditor

- 35.1 The Trust is to have an Auditor.
- 35.2 The Council of Governors shall appoint or remove the Auditor at a general meeting of the Council of Governors.
- 35.3 In appointing the Auditor, the Council of Governors shall have regard to the recommendations (if any) of the Audit Committee. If, in appointing the Auditor, the Council of Governors does not accept the recommendations (if any) of the Audit Committee, it must state, at the time of making the appointment, the reasons why it has taken a different position.
- 35.4 The Accounting Officer shall ensure that the Auditor carries out his-their duties in accordance with Schedule 10 to the 2006 Act and in accordance with any guidance or best practice advice issued by NHSE-NHS England on standards, procedures and techniques to be adopted.
- 35.5 The Board of Directors may resolve that an "external consultant" be appointed to review and publish a report on any other aspect of the Trust's performance. Any such "external consultant" is to be appointed by the Board of Directors.

36. Audit and Risk Committee

The Board of Directors shall cause the Trust to establish a committee of Non-Executive Directors as an Audit & Risk Committee to perform such monitoring, reviewing and other functions as are appropriate.



37. Accounts and records

- 37.1 The Trust must keep proper accounts and proper records in relation to the accounts.
- 37.2 ~~NHSE~~ NHS England may with the approval of the Secretary of State give directions to the Trust as to the content and form of its accounts.
- 37.3 The accounts are to be audited by the Auditor.
- 37.4 The following documents will be made available to the Comptroller and Auditor General for examination at his request:
 - 37.4.1 the accounts;
 - 37.4.2 the records in relation to them; and
 - 37.4.3 any report of the Auditor on them.
- 37.5 The Trust is to prepare in respect of each Annual Accounts in such form as ~~NHSE~~ NHS England may with the approval of the Secretary of State direct.
- 37.6 ~~NHSE~~ NHS England may with the approval of the Secretary of State direct the Trust:
 - 37.6.1 to prepare accounts in respect of such period as may be specified in the direction; and/or
 - 37.6.2 that any accounts prepared by it by virtue of paragraph 357.6.1 above are to be audited in accordance with such requirements as may be specified in the direction.
- 37.7 In preparing its Annual Accounts or in preparing any accounts by virtue of paragraph 37.6.1 above, the Trust must comply with any directions given by ~~NHSE~~ NHS England with the approval of the Secretary of State as to:
 - 37.7.1 the methods and principles according to which the Annual Accounts must be prepared; and/or
 - 37.7.2 the content and form of the Annual Accounts.
- 37.8 The Trust must:
 - 37.8.1 lay a copy of the Annual Accounts, and any report of the Auditor on them, before Parliament: and
 - 37.8.2 send copies of the Annual Accounts, and any report of the Auditor on them to ~~NHSE~~ NHS England within such a period as ~~NHSE~~ NHS England may direct.
- 37.9 The Trust must send a copy of any accounts prepared by virtue of paragraph 357.6.1 above and a copy of any report of the Auditor to ~~NHSE~~ NHS England within such a period as ~~NHSE~~ NHS England may direct.

37.10 The functions of the Trust referred to in this paragraph 37 shall be delegated to the Accounting Officer.

38. Annual Report, Forward Plans and non-NHS work

38.1 The Trust is to prepare Annual Reports and send them to [NHSEINHS England](#).

38.2 Each Annual Report must give:

38.2.1 information on any steps taken by the Trust to secure that (taken as a whole) the actual membership of any Public Constituency is representative of those eligible for such membership;

38.2.2 information on the impact that income received by the Trust otherwise than from the fulfilment of the Principal Purpose has had on the provision by the Trust of goods and services for those purposes; and

38.2.3 such other information as may be prescribed by [NHSEINHS England](#).

38.3 The Trust shall give the Forward Plan in respect of each Financial Year to [NHSEINHS England](#).

38.4 The Forward Plan shall be prepared by the Board of Directors.

38.5 In preparing the Forward Plan, the Board of Directors shall have regard to the views of the Council of Governors.

38.6 Each Forward Plan must include information about:

38.6.1 the activities other than the provision of goods and services for the purposes of the health service in England that the Trust proposes to carry on; and

38.6.2 the income that it expects to receive from doing so.

38.7 Where an Forward Plan contains a proposal that the Trust carry on an activity of a kind mentioned in paragraph 38.6.1 above, the Council of Governors must:

38.7.1 determine whether it is satisfied that the carrying on of the activity will not to any significant extent interfere with the fulfilment by the Trust of its Principal Purpose or the performance of its other functions; and

38.7.2 notify the Directors of the Trust of its determination.

38.8 The Trust may implement a proposal to increase by 5% or more the proportion of its total income in any Financial Year attributable to activities other than the fulfilment of the Principal Purpose only if more than half of the members of the Council of Governors present and voting at a meeting of the Council of Governors approve the implementation of the proposal.

39. Meeting of Council of Governors to consider Annual Accounts and reports

39.1 The following documents are to be presented to the Council of Governors at a general meeting of the Council of Governors:

- 39.1.1 the Annual Accounts;
- 39.1.2 any report of the Auditor on them; and
- 39.1.3 the Annual Report.

39.2 Nothing in paragraph 39.1 above prevents the Council of Governors from holding a general meeting more than once a year.

40. Annual Members' Meeting

40.1 The Trust must hold an annual meeting of its Members (the "**Annual Members' Meeting**"). The Annual Members' Meeting shall be open to members of the public.

40.2 In addition to the obligations set out in paragraph 40.3 below, the Council of Governors of the Trust shall present to each Annual Members' Meeting:

- 40.2.1 a report on steps taken to secure that, taken as a whole, the actual membership of the Public Constituency is representative of those eligible for such membership;
- 40.2.2 the progress of the Membership Strategy; and
- 40.2.3 any changes to the Membership Strategy.

40.3 At least one member of the Board of Directors must attend each Annual Members' Meeting and present the following documents:

- 40.3.1 the Annual Accounts;
- 40.3.2 any report of the Auditor on them;
- 40.3.3 the Annual Report.

41. Combined meetings of Members and Governors

The Trust may hold a meeting which combines the meetings conducted pursuant to paragraphs 39 and 40 above.

42. Mergers etc. Significant Transactions

42.1 The Trust may only apply for a merger, acquisition, separation or dissolution with the approval of more than half of the members of the Council of Governors.

42.2 The Trust may enter into a Significant Transaction only if more than half of the members of the Council of Governors present and voting at a meeting of the Council of Governors approve entering into the transaction.

43. Instruments

- 43.1 The Trust shall have a seal.
- 43.2 The seal shall not be affixed except under the authority of the Board of Directors as set out in the Standing Orders for the Board of Directors.

44. Amendment of the Constitution

- 44.1 Amendments to this Constitution are to be made with the approval of:
 - 44.1.1 more than half of the members of the Council of Governors present and voting at a meeting of the Council of Governors; and
 - 44.1.2 more than half of the members of Board of Directors present and voting at a meeting of the Board of Directors.
- 44.2 The Trust must inform NHS England~~NHSEI~~ of amendments pursuant to paragraph 44.1 but, for the avoidance of doubt, ~~NHSEI's~~ NHS England's functions do not include a power or duty to determine whether or not the Constitution, as a result of the amendments, accords with Schedule 7 of the 2006 Act.
- 44.3 Amendments made under paragraph 44.1 above take effect as soon as the conditions in paragraph 44.1.1 and 44.1.2 are satisfied, but the amendment has no effect insofar as the Constitution would, as a result of the amendment, not accord with Schedule 7 of the 2006 Act.
- 44.4 Where an amendment is made to the Constitution in relation to:
 - 44.4.1 the powers or duties of the Council of Governors of the Trust; or
 - 44.4.2 the role that the Council of Governors has as part of the Trust,
 the following requirements must be met:
 - 44.4.3 at least one member of the Council of Governors must attend the next meeting of the Members to be held under paragraph 40 or paragraph 41 and present the amendment to the Members;
 - 44.4.4 the Trust must give Members an opportunity to vote on whether they approve the amendment; and
 - 44.4.5 if more than half of the Members present and voting approve the amendment, the amendment continues to have effect; otherwise, it ceases to have effect and the Trust must take such steps as are necessary as a result.

45. Effect of the RNHRD Acquisition

- 45.1 On the Acquisition Date all assets and liabilities of RNHRD (save for criminal liabilities) shall transfer by operation of statute and the RNHRD Acquisition to the Trust.

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ANNEX 1 – THE PUBLIC CONSTITUENCIES

(Paragraph 8)

1 Public Constituencies of the Trust

NAME OF CONSTITUENCY	AREA	MINIMUM NUMBER OF MEMBERS	NUMBER OF GOVERNORS
City of Bath	The following electoral ward areas comprising the area covered by Bath and North East Somerset Council and, for the avoidance of doubt, any successor authority of Bath & North East Somerset Council: • Abbey • Bathwick • Combe Down • Kingsmead • Lambridge • Lansdown • Lyncombe • Newbridge • Odd Down • Oldfield • Southdown • Twerton • Walcot • Westmoreland • Weston • Widcombe	75	2
North East Somerset	The following electoral ward areas comprising the area covered by Bath and North East Somerset Council and, for the avoidance of doubt, any successor authority of Bath & North East Somerset Council: • Bathavon North • Bathavon South • Bathavon West • Chew Valley North • Chew Valley South • Clutton • Farmborough • High Littleton • Keynsham East • Keynsham North	75	2

	• Keynsham South • Mendip • Midsomer Norton North • Midsomer Norton Redfield • Paulton • Peasedown • Publow and Whitchurch • Radstock • Saltford • Timsbury • Westfield		
North Wiltshire	The following electoral ward areas comprising the area covered by Wiltshire Council and, for the avoidance of doubt, any successor authority of Wiltshire Council: • Aldbourne and Ramsbury • Box and Colerne • Brinkworth • Bromham, Rowde and Potterne • Bulford, Allington and Figheledean • Burbage and the Bedwyns • By Brook • Calne • Chippenham • Corsham • Cricklade and Latton • Devizes • Durrington and Larkhill • Kington • Ludgershall and Perham Down • Lyneham • Malmesbury • Marlborough • Minety • Pewsey • Purton • Roundway • Royal Wootton Bassett • Sherston • The Collingbournes and Netheravon • The Lavingtons and Erlestoke • Tidworth • Urchfont and The Cannings • West Selkley	75	2

South Wiltshire	The following electoral ward areas comprising the area covered by Wiltshire Council and, for the avoidance of doubt, any successor authority of Wiltshire Council: • Alderbury and Whiteparish • Amesbury • Bourne and Woodford Valley • Bradford-on-Avon • Downton and Ebbles Valley • Ethandune • Fovant and Chalke Valley • Hilperton • Holt and Staverton • Laverstock, Ford and Old Sarum • Melksham • Mere • Nadder and East Knoyle • Redlynch and Landford • Salisbury • Southwick • Summerham and Seend • Till and Wylke Valley • Tisbury • Trowbridge • Warminster • Westbury • Wilton and Lower Wylke Valley • Winsley and Westwood • Winterslow	75	2
Mendip	The electoral wards comprising the area covered by Mendip District Council and, for the avoidance of doubt, any successor authority of Mendip District Council.	50	2
England and Wales	All other electoral wards in England and Wales save those electoral wards that fall within any of the Public Constituencies set out above.	10	1
Totals	Minimum Membership	360	
	Public Governors		11

ANNEX 2 – THE STAFF CONSTITUENCY

(Paragraph 9)

1 Staff Constituency

The minimum number of Members required for the Staff Constituency shall be 200.

ANNEX 3 – COMPOSITION OF COUNCIL OF GOVERNORS

(Paragraph 11)

The composition of the Council of Governors shall be as follows:

1 Composition

1.1 The Council of Governors shall comprise:

- 1.1.1 **11 Public Governors;**
- 1.1.2 **5 Staff Governors;**
- 1.1.3 **2 Local Authority Governors; and**
- 1.1.4 **3 Other Partnership Governors.**

1.2 The number of Public Governors is to be more than half of the total membership of the Council of Governors.

1.3 The organisations currently specified as Partnership Organisations that may appoint members of the Council of Governors for the purposes of paragraph 9(7) of the Schedule 7 of the 2006 Act are:

- 1.3.1 University of Bath;
- 1.3.2 University of Bristol;
- 1.3.3 University of the West of England;
- 1.3.4 Bath and North East Somerset, Swindon and Wiltshire Integrated Care System (Wiltshire area); and Board (Wiltshire area (1) and BaNES area(1))
- ~~1.3.5 Bath and North East Somerset, Swindon and Wiltshire Integrated Care System (BaNES area).~~

2 Appointed Governors

2.1 Local Authority Governors

- 2.1.1 Wiltshire Council or its successor organisation may appoint one Local Authority Governor by notice in writing signed by the leader/chief executive of the Local Authority and delivered to the Secretary. For the avoidance of doubt, the Local Authority Governor shall be a councillor of Wiltshire Council.
- 2.1.2 Bath and North East Somerset Council or its successor organisation may appoint one Local Authority Governor by notice in writing signed by the leader/chief executive of the Local Authority and delivered to the Secretary. For the avoidance of doubt, the Local Authority Governor shall be a councillor of Bath and North East Somerset Council.

2.2 Partnership Governors

- 2.2.1 Subject to the provisions contained at paragraph 2.2.2 and 2.2.5 below, each Partnership Organisation listed at paragraphs 2.2.2.1 – 2.2.2.3 or its successor organisation may appoint one Partnership Governor by notice in writing signed by the Chief Executive (or equivalent) of the Partnership Organisation and delivered to the Secretary on a rotational basis in accordance with the provisions of paragraph 2.2.2 below.
- 2.2.2 Notwithstanding the provision of paragraph 13.3.1 of the Constitution, each of the following Partnership Organisations or its successor organisations may appoint one Partnership Governor to hold office for a period of two years on a rotational basis in the following order:
- 2.2.2.1 University of Bath;
 - 2.2.2.2 University of Bristol;
 - [2.2.2.3](#) University of the West of England.
 - ~~2.2.2.3~~[2.2.2.4 Bath Spa University](#)
- 2.2.3 [Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board](#) ~~Wiltshire Integrated Care Partnership~~ may appoint ~~two~~ [one](#) Partnership Governor~~s~~ by notice in writing signed by the Chief ~~E~~xecutive of the Integrated Care ~~Partnership Board~~ and delivered to the Secretary. [One nominee should represent BaNES and the other Wiltshire.](#)
- ~~2.2.4~~ ~~Bath and North East Somerset Integrated Care Partnership may appoint one Partnership Governor by notice in writing signed by the Chief Executive of the Integrated Care Partnership and delivered to the Secretary.~~
- ~~2.2.5~~[2.2.4](#) Notwithstanding the provisions of paragraphs 2.2.1 - 2.2.4 above, the Chair may veto the appointment of a Partnership Governor by serving notice in writing to the relevant Partnership Organisation(s) where ~~he~~ [they](#) believes that the appointment in question is unreasonable, irrational or otherwise inappropriate.

ANNEX 4 –THE MODEL RULES FOR ELECTIONS

(Paragraph 12)

MODEL ELECTION RULES 2014

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PART 2: TIMETABLE FOR ELECTION

2. Timetable
3. Computation of time

PART 3: RETURNING OFFICER

4. Returning officer
5. Staff
6. Expenditure
7. Duty of co-operation

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9. Nomination of candidates
10. Candidate's particulars
11. Declaration of interests
12. Declaration of eligibility
13. Signature of candidate
14. Decisions as to validity of nomination forms
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- 29. Spoilt ballot papers and spoilt text message votes
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- 34. Procedure for remote voting by telephone
- 35. Procedure for remote voting by text message

Procedure for receipt of envelopes, internet votes, telephone vote and text message votes

- 36. Receipt of voting documents
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- 67. Secrecy
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1. Interpretation

1.1 In these rules, unless the context otherwise requires:

“2006 Act” means the National Health Service Act 2006;

“corporation” means the public benefit corporation subject to this constitution;

“council of governors” means the council of governors of the corporation;

“declaration of identity” has the meaning set out in rule 21.1;

“election” means an election by a constituency, or by a class within a constituency, to fill a vacancy among one or more posts on the council of governors;

“e-voting” means voting using either the internet, telephone or text message;

“e-voting information” has the meaning set out in rule 24.2;

“ID declaration form” has the meaning set out in Rule 21.1; *“internet voting record”* has the meaning set out in rule 26.4(d);

“internet voting system” means such computer hardware and software, data other equipment and services as may be provided by the returning officer for the purpose of enabling voters to cast their votes using the internet;

“lead governor” means the governor nominated by the corporation to fulfil the role described in Appendix B to The NHS Foundation Trust Code of Governance (December 2013) or any later version of such code.

“list of eligible voters” means the list referred to in rule 22.1, containing the information in rule 22.2;

“method of polling” means a method of casting a vote in a poll, which may be by post, internet, text message or telephone;

“[NHSE|NHS England](#)” means the corporate body known as [NHSE|NHS England](#) as provided by section 61 of the 2012 Act;

“numerical voting code” has the meaning set out in rule 64.2(b)

“polling website” has the meaning set out in rule 26.1;

“postal voting information” has the meaning set out in rule 24.1;

“telephone short code” means a short telephone number used for the purposes of submitting a vote by text message;

“telephone voting facility” has the meaning set out in rule 26.2;

“telephone voting record” has the meaning set out in rule 26.5 (d);

“text message voting facility” has the meaning set out in rule 26.3;

“text voting record” has the meaning set out in rule 26.6 (d);

“the telephone voting system” means such telephone voting facility as may be provided by the returning officer for the purpose of enabling voters to cast their votes by telephone;

“the text message voting system” means such text messaging voting facility as may be provided by the returning officer for the purpose of enabling voters to cast their votes by text message;

“voter ID number” means a unique, randomly generated numeric identifier allocated to each voter by the Returning Officer for the purpose of e-voting,

“voting information” means postal voting information and/or e-voting information

- 1.2 Other expressions used in these rules and in Schedule 7 to the NHS Act 2006 have the same meaning in these rules as in that Schedule.

PART 2: TIMETABLE FOR ELECTIONS

2. Timetable

- 2.1 The proceedings at an election shall be conducted in accordance with the following timetable:

Proceeding	Time
Publication of notice of election	Not later than the fortieth day before the day of the close of the poll.
Final day for delivery of nomination forms to returning officer	Not later than the twenty eighth day before the day of the close of the poll.
Publication of statement of nominated candidates	Not later than the twenty seventh day before the day of the close of the poll.
Final day for delivery of notices of withdrawals by candidates from election	Not later than twenty fifth day before the day of the close of the poll.
Notice of the poll	Not later than the fifteenth day before the day of the close of the poll.
Close of the poll	By 5.00pm on the final day of the election.

3. Computation of time

3.1 In computing any period of time for the purposes of the timetable:

- (a) a Saturday or Sunday;
- (b) Christmas day, Good Friday, or a bank holiday, or
- (c) a day appointed for public thanksgiving or mourning,

shall be disregarded, and any such day shall not be treated as a day for the purpose of any proceedings up to the completion of the poll, nor shall the returning officer be obliged to proceed with the counting of votes on such a day.

3.2 In this rule, “bank holiday” means a day which is a bank holiday under the Banking and Financial Dealings Act 1971 in England and Wales.

PART 3: RETURNING OFFICER

4. Returning Officer

4.1 Subject to rule 69, the returning officer for an election is to be appointed by the corporation.

4.2 Where two or more elections are to be held concurrently, the same returning officer may be appointed for all those elections.

5. Staff

5.1 Subject to rule 69, the returning officer may appoint and pay such staff, including such technical advisers, as ~~he or she~~they considers necessary for the purposes of the election.

6. Expenditure

6.1 The corporation is to pay the returning officer:

- (a) any expenses incurred by that officer in the exercise of ~~his or her~~their functions under these rules,
- (b) such remuneration and other expenses as the corporation may determine.

7. Duty of co-operation

7.1 The corporation is to co-operate with the returning officer in the exercise of ~~his or her~~their functions under these rules.

8. Notice of election

8.1 The returning officer is to publish a notice of the election stating:

- (a) the constituency, or class within a constituency, for which the election is being held,
- (b) the number of members of the council of governors to be elected from that constituency, or class within that constituency,
- (c) the details of any nomination committee that has been established by the corporation,
- (d) the address and times at which nomination forms may be obtained;
- (e) the address for return of nomination forms (including, where the return of nomination forms in an electronic format will be permitted, the e-mail address for such return) and the date and time by which they must be received by the returning officer,
- (f) the date and time by which any notice of withdrawal must be received by the returning officer
- (g) the contact details of the returning officer
- (h) the date and time of the close of the poll in the event of a contest.

9. Nomination of candidates

9.1 Subject to rule 9.2, each candidate must nominate themselves on a single nomination form.

9.2 The returning officer:

- (a) is to supply any member of the corporation with a nomination form, and
- (b) is to prepare a nomination form for signature at the request of any member of the corporation,

but it is not necessary for a nomination to be on a form supplied by the returning officer and a nomination can, subject to rule 13, be in an electronic format.

10. Candidate's particulars

10.1 The nomination form must state the candidate's:

- (a) full name,
- (b) contact address in full (which should be a postal address although an e-mail address may also be provided for the purposes of electronic communication), and
- (c) constituency, or class within a constituency, of which the candidate is a member.

11. Declaration of interests

11.1 The nomination form must state:

- (a) any financial interest that the candidate has in the corporation, and
- (b) whether the candidate is a member of a political party, and if so, which party, and if the candidate has no such interests, the paper must include a statement to that effect.

12. Declaration of eligibility

12.1 The nomination form must include a declaration made by the candidate:

- (a) that ~~he or she is~~they are not prevented from being a member of the council of governors by paragraph 8 of Schedule 7 of the 2006 Act or by any provision of the constitution; and,
- (b) for a member of the public or patient constituency, of the particulars of ~~his or her~~their qualification to vote as a member of that constituency, or class within that constituency, for which the election is being held.

13. Signature of candidate

13.1 The nomination form must be signed and dated by the candidate, in a manner prescribed by the returning officer, indicating that:

- (a) they wish to stand as a candidate,
- (b) their declaration of interests as required under rule 11, is true and correct, and
- (c) their declaration of eligibility, as required under rule 12, is true and correct.

13.2 Where the return of nomination forms in an electronic format is permitted, the returning officer shall specify the particular signature formalities (if any) that will need to be complied with by the candidate.

14. Decisions as to the validity of nomination

14.1 Where a nomination form is received by the returning officer in accordance with these rules, the candidate is deemed to stand for election unless and until the returning officer:

- (a) decides that the candidate is not eligible to stand,
- (b) decides that the nomination form is invalid,
- (c) receives satisfactory proof that the candidate has died, or
- (d) receives a written request by the candidate of their withdrawal from candidacy.

- 14.2 The returning officer is entitled to decide that a nomination form is invalid only on one of the following grounds:
- (a) that the paper is not received on or before the final time and date for return of nomination forms, as specified in the notice of the election,
 - (b) that the paper does not contain the candidate's particulars, as required by rule 10;
 - (c) that the paper does not contain a declaration of the interests of the candidate, as required by rule 11,
 - (d) that the paper does not include a declaration of eligibility as required by rule 12, or
 - (e) that the paper is not signed and dated by the candidate, if required by rule 13.
- 14.3 The returning officer is to examine each nomination form as soon as is practicable after ~~he or she~~they ~~has~~have received it, and decide whether the candidate has been validly nominated.
- 14.4 Where the returning officer decides that a nomination is invalid, the returning officer must endorse this on the nomination form, stating the reasons for their decision.
- 14.5 The returning officer is to send notice of the decision as to whether a nomination is valid or invalid to the candidate at the contact address given in the candidate's nomination form. If an e-mail address has been given in the candidate's nomination form (in addition to the candidate's postal address), the returning officer may send notice of the decision to that address.
- 15. Publication of statement of candidates**
- 15.1 The returning officer is to prepare and publish a statement showing the candidates who are standing for election.
- 15.2 The statement must show:
- (a) the name, contact address (which shall be the candidate's postal address), and constituency or class within a constituency of each candidate standing, and
 - (b) the declared interests of each candidate standing,
- as given in their nomination form.
- 15.3 The statement must list the candidates standing for election in alphabetical order by surname.
- 15.4 The returning officer must send a copy of the statement of candidates and copies of the nomination forms to the corporation as soon as is practicable after publishing the statement.

16. Inspection of statement of nominated candidates and nomination forms

- 16.1 The corporation is to make the statement of the candidates and the nomination forms supplied by the returning officer under rule 15.4 available for inspection by members of the corporation free of charge at all reasonable times.
- 16.2 If a member of the corporation requests a copy or extract of the statement of candidates or their nomination forms, the corporation is to provide that member with the copy or extract free of charge.

17. Withdrawal of candidates

- 17.1 A candidate may withdraw from election on or before the date and time for withdrawal by candidates, by providing to the returning officer a written notice of withdrawal which is signed by the candidate and attested by a witness.

18. Method of election

- 18.1 If the number of candidates remaining validly nominated for an election after any withdrawals under these rules is greater than the number of members to be elected to the council of governors, a poll is to be taken in accordance with Parts 5 and 6 of these rules.
- 18.2 If the number of candidates remaining validly nominated for an election after any withdrawals under these rules is equal to the number of members to be elected to the council of governors, those candidates are to be declared elected in accordance with Part 7 of these rules.
- 18.3 If the number of candidates remaining validly nominated for an election after any withdrawals under these rules is less than the number of members to be elected to be council of governors, then:
 - (a) the candidates who remain validly nominated are to be declared elected in accordance with Part 7 of these rules, and
 - (b) the returning officer is to order a new election to fill any vacancy which remains unfilled, on a day appointed by ~~him or her~~them in consultation with the corporation.

PART 5: CONTESTED ELECTIONS

19. Poll to be taken by ballot

- 19.1 The votes at the poll must be given by secret ballot.
- 19.2 The votes are to be counted and the result of the poll determined in accordance with Part 6 of these rules.

- 19.3 The corporation may decide that voters within a constituency or class within a constituency, may, subject to rule 19.4, cast their votes at the poll using such different methods of polling in any combination as the corporation may determine.
- 19.4 The corporation may decide that voters within a constituency or class within a constituency for whom an e-mail address is included in the list of eligible voters may only cast their votes at the poll using an e-voting method of polling.
- 19.5 Before the corporation decides, in accordance with rule 19.3 that one or more e-voting methods of polling will be made available for the purposes of the poll, the corporation must satisfy itself that:
- (a) if internet voting is to be a method of polling, the internet voting system to be used for the purpose of the election is:
 - (i) configured in accordance with these rules; and
 - (ii) will create an accurate internet voting record in respect of any voter who casts ~~his or her~~their vote using the internet voting system;
 - (b) if telephone voting to be a method of polling, the telephone voting system to be used for the purpose of the election is:
 - (i) configured in accordance with these rules; and
 - (ii) will create an accurate telephone voting record in respect of any voter who casts ~~his or her~~their vote using the telephone voting system;
 - (c) if text message voting is to be a method of polling, the text message voting system to be used for the purpose of the election is:
 - (i) configured in accordance with these rules; and
 - (ii) will create an accurate text voting record in respect of any voter who casts ~~his or~~hertheir vote using the text message voting system.

20. The ballot paper

- 20.1 The ballot of each voter (other than a voter who casts ~~his or her~~their ballot by an e-voting method of polling) is to consist of a ballot paper with the persons remaining validly nominated for an election after any withdrawals under these rules, and no others, inserted in the paper.
- 20.2 Every ballot paper must specify:
- (a) the name of the corporation,
 - (b) the constituency, or class within a constituency, for which the election is being held,
 - (c) the number of members of the council of governors to be elected from that

constituency, or class within that constituency,

- (d) the names and other particulars of the candidates standing for election, with the details and order being the same as in the statement of nominated candidates,
- (e) instructions on how to vote by all available methods of polling, including the relevant voter's voter ID number if one or more e-voting methods of polling are available,
- (f) if the ballot paper is to be returned by post, the address for its return and the date and time of the close of the poll, and
- (g) the contact details of the returning officer.

20.3 Each ballot paper must have a unique identifier.

20.4 Each ballot paper must have features incorporated into it to prevent it from being reproduced.

21. The declaration of identity (public and patient constituencies)

21.1 The corporation shall require each voter who participates in an election for a public or patient constituency to make a declaration confirming:

- (a) that the voter is the person:
 - (i) to whom the ballot paper was addressed, and/or
 - (ii) to whom the voter ID number contained within the e-voting information was allocated,
- (b) that ~~he or she has~~they have not marked or returned any other voting information in the election, and
- (c) the particulars of ~~his or her~~their qualification to vote as a member of the constituency or class within the constituency for which the election is being held,

("declaration of identity")

and the corporation shall make such arrangements as it considers appropriate to facilitate the making and the return of a declaration of identity by each voter, whether by the completion of a paper form ("ID declaration form") or the use of an electronic method.

21.2 The voter must be required to return ~~his or her~~their declaration of identity with ~~his or her~~their ballot.

21.3 The voting information shall caution the voter that if the declaration of identity is not duly returned or is returned without having been made correctly, any vote cast by the voter may be declared invalid.

Action to be taken before the poll



Royal United Hospitals Bath
NHS Foundation Trust

22. List of eligible voters

22.1 The corporation is to provide the returning officer with a list of the members of the constituency or class within a constituency for which the election is being held who are eligible to vote by virtue of rule 27 as soon as is reasonably practicable after the final date for the delivery of notices of withdrawals by candidates from an election.

22.2 The list is to include, for each member:

(a) a postal address; and,

(b) the member's e-mail address, if this has been provided

to which ~~his or her~~their voting information may, subject to rule 22.3, be sent.

22.3 The corporation may decide that the e-voting information is to be sent only by e-mail to those members in the list of eligible voters for whom an e-mail address is included in that list.

23. Notice of poll

23.1 The returning officer is to publish a notice of the poll stating:

- (a) the name of the corporation,
- (b) the constituency, or class within a constituency, for which the election is being held,
- (c) the number of members of the council of governors to be elected from that constituency, or class with that constituency,
- (d) the names, contact addresses, and other particulars of the candidates standing for election, with the details and order being the same as in the statement of nominated candidates,
- (e) that the ballot papers for the election are to be issued and returned, if appropriate, by post,
- (f) the methods of polling by which votes may be cast at the election by voters in a constituency or class within a constituency, as determined by the corporation in accordance with rule 19.3,
- (g) the address for return of the ballot papers,
- (h) the uniform resource locator (url) where, if internet voting is a method of polling, the polling website is located;
- (i) the telephone number where, if telephone voting is a method of polling, the telephone voting facility is located,
- (j) the telephone number or telephone short code where, if text message voting is a method of polling, the text message voting facility is located,
- (k) the date and time of the close of the poll,

- (l) the address and final dates for applications for replacement voting information, and
- (m) the contact details of the returning officer.

24. Issue of voting information by returning officer

24.1 Subject to rule 24.3, as soon as is reasonably practicable on or after the publication of the notice of the poll, the returning officer is to send the following information by post to each member of the corporation named in the list of eligible voters:

- (a) a ballot paper and ballot paper envelope,
- (b) the ID declaration form (if required),
- (c) information about each candidate standing for election, pursuant to rule 61 of these rules, and
- (d) a covering envelope;

("postal voting information").

24.2 Subject to rules 24.3 and 24.4, as soon as is reasonably practicable on or after the publication of the notice of the poll, the returning officer is to send the following information by e-mail and/ or by post to each member of the corporation named in the list of eligible voters whom the corporation determines in accordance with rule 19.3 and/ or rule 19.4 may cast ~~his or her~~their vote by an e-voting method of polling:

- (a) instructions on how to vote and how to make a declaration of identity (if required),
- (b) the voter's voter ID number,
- (c) information about each candidate standing for election, pursuant to rule 64 of these rules, or details of where this information is readily available on the internet or available in such other formats as the Returning Officer thinks appropriate, (d) contact details of the returning officer,

("e-voting information").

24.3 The corporation may determine that any member of the corporation shall:

- (a) only be sent postal voting information; or
- (b) only be sent e-voting information; or
- (c) be sent both postal voting information and e-voting information;

for the purposes of the poll.

24.4 If the corporation determines, in accordance with rule 22.3, that the e-voting information is to be sent only by e-mail to those members in the list of eligible voters for whom an e-mail

address is included in that list, then the returning officer shall only send that information by e-mail.

- 24.5 The voting information is to be sent to the postal address and/ or e-mail address for each member, as specified in the list of eligible voters.

25. Ballot paper envelope and covering envelope

- 25.1 The ballot paper envelope must have clear instructions to the voter printed on it, instructing the voter to seal the ballot paper inside the envelope once the ballot paper has been marked.

- 25.2 The covering envelope is to have:

- (a) the address for return of the ballot paper printed on it, and
- (b) pre-paid postage for return to that address.

- 25.3 There should be clear instructions, either printed on the covering envelope or elsewhere, instructing the voter to seal the following documents inside the covering envelope and return it to the returning officer –

- (a) the completed ID declaration form if required, and
- (b) the ballot paper envelope, with the ballot paper sealed inside it.

26. E-voting systems

- 26.1 If internet voting is a method of polling for the relevant election then the returning officer must provide a website for the purpose of voting over the internet (in these rules referred to as "the polling website").

- 26.2 If telephone voting is a method of polling for the relevant election then the returning officer must provide an automated telephone system for the purpose of voting by the use of a touch-tone telephone (in these rules referred to as "the telephone voting facility").

- 26.3 If text message voting is a method of polling for the relevant election then the returning officer must provide an automated text messaging system for the purpose of voting by text message (in these rules referred to as "the text message voting facility").

- 26.4 The returning officer shall ensure that the polling website and internet voting system provided will:

- (a) require a voter to:
 - (i) enter ~~his or her~~their voter ID number; and
 - (ii) where the election is for a public or patient constituency, make a declaration of identity;

in order to be able to cast ~~his or her~~their vote;

- (b) specify:
 - (i) the name of the corporation,
 - (ii) the constituency, or class within a constituency, for which the election is being held,
 - (iii) the number of members of the council of governors to be elected from that constituency, or class within that constituency,
 - (iv) the names and other particulars of the candidates standing for election, with the details and order being the same as in the statement of nominated candidates,
 - (v) instructions on how to vote and how to make a declaration of identity,
 - (vi) the date and time of the close of the poll, and
 - (vii) the contact details of the returning officer;
- (c) prevent a voter from voting for more candidates than ~~he or she is~~they are entitled to at the election;
- (d) create a record ("internet voting record") that is stored in the internet voting system in respect of each vote cast by a voter using the internet that comprises of-
 - (i) the voter's voter ID number;
 - (ii) the voter's declaration of identity (where required);
 - (iii) the candidate or candidates for whom the voter has voted; and
 - (iv) the date and time of the voter's vote,
- (e) if the voter's vote has been duly cast and recorded, provide the voter with confirmation of this; and
- (f) prevent any voter from voting after the close of poll.

26.5

The returning officer shall ensure that the telephone voting facility and telephone voting system provided will:

- (a) require a voter to
 - (i) enter ~~his or her~~their voter ID number in order to be able to cast ~~his or her~~their vote; and
 - (ii) where the election is for a public or patient constituency, make a declaration of identity;
- (b) specify:
 - (i) the name of the corporation,

- (ii) the constituency, or class within a constituency, for which the election is being held,
 - (iii) the number of members of the council of governors to be elected from that constituency, or class within that constituency,
 - (iv) instructions on how to vote and how to make a declaration of identity,
 - (v) the date and time of the close of the poll, and
 - (vi) the contact details of the returning officer;
- (c) prevent a voter from voting for more candidates than ~~he or she is~~they are entitled to at the election;
- (d) create a record ("telephone voting record") that is stored in the telephone voting system in respect of each vote cast by a voter using the telephone that comprises of:
- (i) the voter's voter ID number;
 - (ii) the voter's declaration of identity (where required);
 - (iii) the candidate or candidates for whom the voter has voted; and
 - (iv) the date and time of the voter's vote
- (e) if the voter's vote has been duly cast and recorded, provide the voter with confirmation of this;
- (f) prevent any voter from voting after the close of poll.

26.6

The returning officer shall ensure that the text message voting facility and text messaging voting system provided will:

- (a) require a voter to:
 - (i) provide ~~his or her~~their voter ID number; and
 - (ii) where the election is for a public or patient constituency, make a declaration of identity;
 in order to be able to cast ~~his or her~~their vote;
- (b) prevent a voter from voting for more candidates than ~~he or she is~~they are entitled to at the election;
- (d) create a record ("text voting record") that is stored in the text messaging voting system in respect of each vote cast by a voter by text message that comprises of:
 - (i) the voter's voter ID number;
 - (ii) the voter's declaration of identity (where required);
 - (ii) the candidate or candidates for whom the voter has voted; and
 - (iii) the date and time of the voter's vote

- (e) if the voter's vote has been duly cast and recorded, provide the voter with confirmation of this;
- (f) prevent any voter from voting after the close of poll.

The poll

27. Eligibility to vote

- 27.1 An individual who becomes a member of the corporation on or before the closing date for the receipt of nominations by candidates for the election, is eligible to vote in that election.

28. Voting by persons who require assistance

- 28.1 The returning officer is to put in place arrangements to enable requests for assistance to vote to be made.
- 28.2 Where the returning officer receives a request from a voter who requires assistance to vote, the returning officer is to make such arrangements as ~~he or she~~they considers necessary to enable that voter to vote.

29. Spoilt ballot papers and spoilt text message votes

- 29.1 If a voter has dealt with ~~his or her~~their ballot paper in such a manner that it cannot be accepted as a ballot paper (referred to as a "spoilt ballot paper"), that voter may apply to the returning officer for a replacement ballot paper.
- 29.2 On receiving an application, the returning officer is to obtain the details of the unique identifier on the spoilt ballot paper, if ~~he or she~~they can obtain it.
- 29.3 The returning officer may not issue a replacement ballot paper for a spoilt ballot paper unless ~~he or she~~they:
 - (a) is satisfied as to the voter's identity; and
 - (b) has ensured that the completed ID declaration form, if required, has not been returned.
- 29.4 After issuing a replacement ballot paper for a spoilt ballot paper, the returning officer shall enter in a list ("the list of spoilt ballot papers"):
 - (a) the name of the voter, and
 - (b) the details of the unique identifier of the spoilt ballot paper (if that officer was able to obtain it), and
 - (c) the details of the unique identifier of the replacement ballot paper.

- 29.5 If a voter has dealt with ~~his or her~~their text message vote in such a manner that it cannot be accepted as a vote (referred to as a “spoilt text message vote”), that voter may apply to the returning officer for a replacement voter ID number.
- 29.6 On receiving an application, the returning officer is to obtain the details of the voter ID number on the spoilt text message vote, if ~~he or she~~ they can obtain it.
- 29.7 The returning officer may not issue a replacement voter ID number in respect of a spoilt text message vote unless ~~he or she~~they are is satisfied as to the voter’s identity.
- 29.8 After issuing a replacement voter ID number in respect of a spoilt text message vote, the returning officer shall enter in a list (“the list of spoilt text message votes”):
- (a) the name of the voter, and
 - (b) the details of the voter ID number on the spoilt text message vote (if that officer was able to obtain it), and
 - (c) the details of the replacement voter ID number issued to the voter.

30. Lost voting information

- 30.1 Where a voter has not received ~~his or her~~their voting information by the tenth day before the close of the poll, that voter may apply to the returning officer for replacement voting information.
- 30.2 The returning officer may not issue replacement voting information in respect of lost voting information unless ~~he or she~~they:
- (a) is satisfied as to the voter’s identity,
 - (b) has no reason to doubt that the voter did not receive the original voting information,
 - (c) has ensured that no declaration of identity, if required, has been returned.
- 30.3 After issuing replacement voting information in respect of lost voting information, the returning officer shall enter in a list (“the list of lost ballot documents”):
- (a) the name of the voter
 - (b) the details of the unique identifier of the replacement ballot paper, if applicable, and
 - (c) the voter ID number of the voter.

31. Issue of replacement voting information

- 31.1 If a person applies for replacement voting information under rule 29 or 30 and a declaration of identity has already been received by the returning officer in the name of that voter, the returning officer may not issue replacement voting information unless, in addition to the requirements imposed by rule 29.3 or 30.2, ~~he or she~~ they are also satisfied that that person

has not already voted in the election, notwithstanding the fact that a declaration of identity if required has already been received by the returning officer in the name of that voter.

31.2 After issuing replacement voting information under this rule, the returning officer shall enter in a list (“the list of tendered voting information”):

- (a) the name of the voter,
- (b) the unique identifier of any replacement ballot paper issued under this rule;
- (c) the voter ID number of the voter.

32. ID declaration form for replacement ballot papers (public and patient constituencies)

32.1 In respect of an election for a public or patient constituency an ID declaration form must be issued with each replacement ballot paper requiring the voter to make a declaration of identity.

Polling by internet, telephone or text

33. Procedure for remote voting by internet

33.1 To cast ~~his or her~~their vote using the internet, a voter will need to gain access to the polling website by keying in the url of the polling website provided in the voting information.

33.2 When prompted to do so, the voter will need to enter ~~his or her~~their voter ID number.

33.3 If the internet voting system authenticates the voter ID number, the system will give the voter access to the polling website for the election in which the voter is eligible to vote.

33.4 To cast ~~his or her~~their vote, the voter will need to key in a mark on the screen opposite the particulars of the candidate or candidates for whom ~~he or she~~they wishes to cast ~~his or her~~their vote.

33.5 The voter will not be able to access the internet voting system for an election once ~~his or her~~their vote at that election has been cast.

34. Voting procedure for remote voting by telephone

34.1 To cast ~~his or her~~their vote by telephone, the voter will need to gain access to the telephone voting facility by calling the designated telephone number provided in the voter information using a telephone with a touch-tone keypad.

34.2 When prompted to do so, the voter will need to enter ~~his or her~~their voter ID number using the keypad.

34.3 If the telephone voting facility authenticates the voter ID number, the voter will be prompted to vote in the election.

34.4 When prompted to do so the voter may then cast ~~his or her~~their vote by keying in the numerical voting code of the candidate or candidates, for whom ~~he or she~~they wishes to vote.

34.5 The voter will not be able to access the telephone voting facility for an election once ~~his or her~~their vote at that election has been cast.

35. Voting procedure for remote voting by text message

35.1 To cast ~~his or her~~their vote by text message the voter will need to gain access to the text message voting facility by sending a text message to the designated telephone number or telephone short code provided in the voter information.

35.2 The text message sent by the voter must contain ~~his or her~~their voter ID number and the numerical voting code for the candidate or candidates, for whom ~~he or she~~they wishes to vote.

35.3 The text message sent by the voter will need to be structured in accordance with the instructions on how to vote contained in the voter information, otherwise the vote will not be cast.

Procedure for receipt of envelopes, internet votes, telephone votes and text message votes

36. Receipt of voting documents

36.1 Where the returning officer receives:

- (a) a covering envelope, or
- (b) any other envelope containing an ID declaration form if required, a ballot paper envelope, or a ballot paper,

before the close of the poll, that officer is to open it as soon as is practicable; and rules 37 and 38 are to apply.

36.2 The returning officer may open any covering envelope or any ballot paper envelope for the purposes of rules 37 and 38, but must make arrangements to ensure that no person obtains or communicates information as to:

- (a) the candidate for whom a voter has voted, or
- (b) the unique identifier on a ballot paper.

36.3 The returning officer must make arrangements to ensure the safety and security of the ballot papers and other documents.

37. Validity of votes

37.1 A ballot paper shall not be taken to be duly returned unless the returning officer is satisfied

that it has been received by the returning officer before the close of the poll, with an ID declaration form if required that has been correctly completed, signed and dated.

37.2 Where the returning officer is satisfied that rule 37.1 has been fulfilled, ~~he or she is~~they are to:

- (a) put the ID declaration form if required in a separate packet, and
- (b) put the ballot paper aside for counting after the close of the poll.

37.3 Where the returning officer is not satisfied that rule 37.1 has been fulfilled, ~~he or she is~~they are to:

- (a) mark the ballot paper “disqualified”,
- (b) if there is an ID declaration form accompanying the ballot paper, mark it “disqualified” and attach it to the ballot paper,
- (c) record the unique identifier on the ballot paper in a list of disqualified documents (the “list of disqualified documents”); and
- (d) place the document or documents in a separate packet.

37.4 An internet, telephone or text message vote shall not be taken to be duly returned unless the returning officer is satisfied that the internet voting record, telephone voting record or text voting record (as applicable) has been received by the returning officer before the close of the poll, with a declaration of identity if required that has been correctly made.

37.5 Where the returning officer is satisfied that rule 37.4 has been fulfilled, ~~he or she is~~they are to put the internet voting record, telephone voting record or text voting record (as applicable) aside for counting after the close of the poll.

37.6 Where the returning officer is not satisfied that rule 37.4 has been fulfilled, ~~he or she is~~they are to:

- (a) mark the internet voting record, telephone voting record or text voting record (as applicable) “disqualified”,
- (b) record the voter ID number on the internet voting record, telephone voting record or text voting record (as applicable) in the list of disqualified documents; and
- (c) place the document or documents in a separate packet.

38. Declaration of identity but no ballot paper (public and patient constituency)¹

38.1 Where the returning officer receives an ID declaration form if required but no ballot paper, the returning officer is to:

¹ It should not be possible, technically, to make a declaration of identity electronically without also submitting a vote.

- (a) mark the ID declaration form “disqualified”,
- (b) record the name of the voter in the list of disqualified documents, indicating that a declaration of identity was received from the voter without a ballot paper, and
- (c) place the ID declaration form in a separate packet.

39. De-duplication of votes

39.1 Where different methods of polling are being used in an election, the returning officer shall examine all votes cast to ascertain if a voter ID number has been used more than once to cast a vote in the election.

39.2 If the returning officer ascertains that a voter ID number has been used more than once to cast a vote in the election ~~he or she~~they shall:

- (a) only accept as duly returned the first vote received that was cast using the relevant voter ID number; and
- (b) mark as “disqualified” all other votes that were cast using the relevant voter ID number

39.3 Where a ballot paper is disqualified under this rule the returning officer shall:

- (a) mark the ballot paper “disqualified”,
- (b) if there is an ID declaration form accompanying the ballot paper, mark it “disqualified” and attach it to the ballot paper,
- (c) record the unique identifier and the voter ID number on the ballot paper in the list of disqualified documents;
- (d) place the document or documents in a separate packet; and
- (e) disregard the ballot paper when counting the votes in accordance with these rules.

39.4 Where an internet voting record, telephone voting record or text voting record is disqualified under this rule the returning officer shall:

- (a) mark the internet voting record, telephone voting record or text voting record (as applicable) “disqualified”,
- (b) record the voter ID number on the internet voting record, telephone voting record or text voting record (as applicable) in the list of disqualified documents;
- (c) place the internet voting record, telephone voting record or text voting record (as applicable) in a separate packet, and
- (d) disregard the internet voting record, telephone voting record or text voting record (as applicable) when counting the votes in accordance with these rules.

40. Sealing of packets

40.1 As soon as is possible after the close of the poll and after the completion of the procedure under rules 37 and 38, the returning officer is to seal the packets containing:

- (a) the disqualified documents, together with the list of disqualified documents inside it,
- (b) the ID declaration forms, if required,
- (c) the list of spoilt ballot papers and the list of spoilt text message votes,

- (d) the list of lost ballot documents,
- (e) the list of eligible voters, and
- (f) the list of tendered voting information

and ensure that complete electronic copies of the internet voting records, telephone voting records and text voting records created in accordance with rule 26 are held in a device suitable for the purpose of storage.

PART 6: COUNTING THE VOTES

STV41. Interpretation of Part 6

STV41.1 In Part 6 of these rules:

“ballot document” means a ballot paper, internet voting record, telephone voting record or text voting record.

“continuing candidate” means any candidate not deemed to be elected, and not excluded,

“count” means all the operations involved in counting of the first preferences recorded for candidates, the transfer of the surpluses of elected candidates, and the transfer of the votes of the excluded candidates,

“deemed to be elected” means deemed to be elected for the purposes of counting of votes but without prejudice to the declaration of the result of the poll,

“mark” means a figure, an identifiable written word, or a mark such as “X”,

“non-transferable vote” means a ballot document:

- (a) on which no second or subsequent preference is recorded for a continuing candidate,
- or
- (b) which is excluded by the returning officer under rule STV49,

“preference” as used in the following contexts has the meaning assigned below:

- (a) *“first preference”* means the figure “1” or any mark or word which clearly indicates a first (or only) preference,
- (b) *“next available preference”* means a preference which is the second, or as the case may be, subsequent preference recorded in consecutive order for a continuing candidate (any candidate who is deemed to be elected or is excluded thereby being ignored); and

- (c) in this context, a “second preference” is shown by the figure “2” or any mark or word which clearly indicates a second preference, and a third preference by the figure “3” or any mark or word which clearly indicates a third preference, and so on,

“*quota*” means the number calculated in accordance with rule STV46,

“*surplus*” means the number of votes by which the total number of votes for any candidate (whether first preference or transferred votes, or a combination of both) exceeds the quota; but references in these rules to the transfer of the surplus means the transfer (at a transfer value) of all transferable ballot documents from the candidate who has the surplus,

“*stage of the count*” means:

- (a) the determination of the first preference vote of each candidate,
- (b) the transfer of a surplus of a candidate deemed to be elected, or
- (c) the exclusion of one or more candidates at any given time,

“*transferable vote*” means a ballot document on which, following a first preference, a second or subsequent preference is recorded in consecutive numerical order for a continuing candidate,

“*transferred vote*” means a vote derived from a ballot document on which a second or subsequent preference is recorded for the candidate to whom that ballot document has been transferred, and

“*transfer value*” means the value of a transferred vote calculated in accordance with rules STV47.4 or STV47.7.

42. Arrangements for counting the votes

- 42.1 The returning officer is to make arrangements for counting the votes as soon as is practicable after the close of the poll.
- 42.2 The returning officer may make arrangements for any votes to be counted using vote counting software where:
 - (a) the board of directors and the council of governors of the corporation have approved:
 - (i) the use of such software for the purpose of counting votes in the relevant election, and
 - (ii) a policy governing the use of such software, and
 - (b) the corporation and the returning officer are satisfied that the use of such software will produce an accurate result.

43. The count

43.1 The returning officer is to:

- (a) count and record the number of:
 - (iii) ballot papers that have been returned; and
 - (iv) the number of internet voting records, telephone voting records and/or text voting records that have been created, and
- (b) count the votes according to the provisions in this Part of the rules and/or the provisions of any policy approved pursuant to rule 42.2(ii) where vote counting software is being used.

43.2 The returning officer, while counting and recording the number of ballot papers, internet voting records, telephone voting records and/or text voting records and counting the votes, must make arrangements to ensure that no person obtains or communicates information as to the unique identifier on a ballot paper or the voter ID number on an internet voting record, telephone voting record or text voting record.

43.3 The returning officer is to proceed continuously with counting the votes as far as is practicable.

STV44. Rejected ballot papers and rejected text voting records

STV44.1 Any ballot paper:

- (a) which does not bear the features that have been incorporated into the other ballot papers to prevent them from being reproduced,
- (b) on which the figure “1” standing alone is not placed so as to indicate a first preference for any candidate,
- (c) on which anything is written or marked by which the voter can be identified except the unique identifier, or
- (d) which is unmarked or rejected because of uncertainty,

shall be rejected and not counted, but the ballot paper shall not be rejected by reason only of carrying the words “one”, “two”, “three” and so on, or any other mark instead of a figure if, in the opinion of the returning officer, the word or mark clearly indicates a preference or preferences.

STV44.2 The returning officer is to endorse the word “rejected” on any ballot paper which under this rule is not to be counted.

STV44.3 Any text voting record:

- (a) on which the figure “1” standing alone is not placed so as to indicate a first preference for any candidate,

- (b) on which anything is written or marked by which the voter can be identified except the unique identifier, or
- (c) which is unmarked or rejected because of uncertainty,

shall be rejected and not counted, but the text voting record shall not be rejected by reason only of carrying the words “one”, “two”, “three” and so on, or any other mark instead of a figure if, in the opinion of the returning officer, the word or mark clearly indicates a preference or preferences.

- STV44.4 The returning officer is to endorse the word “rejected” on any text voting record which under this rule is not to be counted.
- STV44.5 The returning officer is to draw up a statement showing the number of ballot papers rejected by ~~him or her~~them under each of the subparagraphs (a) to (d) of rule STV44.1 and the number of text voting records rejected by ~~him or her~~them under each of the sub-paragraphs (a) to (c) of rule STV44.3.

FPP44. Rejected ballot papers and rejected text voting records

FPP44.1 Any ballot paper:

- (a) which does not bear the features that have been incorporated into the other ballot papers to prevent them from being reproduced,
- (b) on which votes are given for more candidates than the voter is entitled to vote,
- (c) on which anything is written or marked by which the voter can be identified except the unique identifier, or
- (d) which is unmarked or rejected because of uncertainty,

shall, subject to rules FPP44.2 and FPP44.3, be rejected and not counted.

- FPP44.2 Where the voter is entitled to vote for more than one candidate, a ballot paper is not to be rejected because of uncertainty in respect of any vote where no uncertainty arises, and that vote is to be counted.

FPP44.3 A ballot paper on which a vote is marked:

- (a) elsewhere than in the proper place,
- (b) otherwise than by means of a clear mark,
- (c) by more than one mark,

is not to be rejected for such reason (either wholly or in respect of that vote) if an intention that the vote shall be for one or other of the candidates clearly appears, and the way the paper is marked does not itself identify the voter and it is not shown that ~~he or she~~they can be identified by it.

FPP44.4 The returning officer is to:

- (a) endorse the word “rejected” on any ballot paper which under this rule is not to be counted, and
- (b) in the case of a ballot paper on which any vote is counted under rules FPP44.2 and FPP 44.3, endorse the words “rejected in part” on the ballot paper and indicate which vote or votes have been counted.

FPP44.5 The returning officer is to draw up a statement showing the number of rejected ballot papers under the following headings:

- (a) does not bear proper features that have been incorporated into the ballot paper,
- (b) voting for more candidates than the voter is entitled to,
- (c) writing or mark by which voter could be identified, and
- (d) unmarked or rejected because of uncertainty,

and, where applicable, each heading must record the number of ballot papers rejected in part.

FPP44.6 Any text voting record:

- (a) on which votes are given for more candidates than the voter is entitled to vote,
- (b) on which anything is written or marked by which the voter can be identified except the voter ID number, or
- (c) which is unmarked or rejected because of uncertainty,

shall, subject to rules FPP44.7 and FPP44.8, be rejected and not counted.

FPP44.7 Where the voter is entitled to vote for more than one candidate, a text voting record is not to be rejected because of uncertainty in respect of any vote where no uncertainty arises, and that vote is to be counted.

FPP44.8 A text voting record on which a vote is marked:

- (a) otherwise than by means of a clear mark,
- (b) by more than one mark,

is not to be rejected for such reason (either wholly or in respect of that vote) if an intention that the vote shall be for one or other of the candidates clearly appears, and the way the text voting record is marked does not itself identify the voter and it is not shown that ~~he or~~ she they can be identified by it.

FPP44.9 The returning officer is to:

- (a) endorse the word “rejected” on any text voting record which under this rule is not to be counted, and

- (b) in the case of a text voting record on which any vote is counted under rules FPP44.7 and FPP 44.8, endorse the words “rejected in part” on the text voting record and indicate which vote or votes have been counted.

FPP44.10 The returning officer is to draw up a statement showing the number of rejected text voting records under the following headings:

- (a) voting for more candidates than the voter is entitled to,
- (b) writing or mark by which voter could be identified, and
- (c) unmarked or rejected because of uncertainty,

and, where applicable, each heading must record the number of text voting records rejected in part.

STV45. First stage

STV45.1 The returning officer is to sort the ballot documents into parcels according to the candidates for whom the first preference votes are given.

STV45.2 The returning officer is to then count the number of first preference votes given on ballot documents for each candidate, and is to record those numbers.

STV45.3 The returning officer is to also ascertain and record the number of valid ballot documents.

STV46. The quota

STV46.1 The returning officer is to divide the number of valid ballot documents by a number exceeding by one the number of members to be elected.

STV46.2 The result, increased by one, of the division under rule STV46.1 (any fraction being disregarded) shall be the number of votes sufficient to secure the election of a candidate (in these rules referred to as “the quota”).

STV46.3 At any stage of the count a candidate whose total votes equals or exceeds the quota shall be deemed to be elected, except that any election where there is only one vacancy a candidate shall not be deemed to be elected until the procedure set out in rules STV47.1 to STV47.3 has been complied with.

STV47. Transfer of votes

STV47.1 Where the number of first preference votes for any candidate exceeds the quota, the returning officer is to sort all the ballot documents on which first preference votes are given for that candidate into sub- parcels so that they are grouped:

- (a) according to next available preference given on those ballot documents for any continuing candidate, or

(b) where no such preference is given, as the sub-parcel of non-transferable votes.

- STV47.2 The returning officer is to count the number of ballot documents in each parcel referred to in rule STV47.1.
- STV47.3 The returning officer is, in accordance with this rule and rule STV48, to transfer each sub-parcel of ballot documents referred to in rule STV47.1(a) to the candidate for whom the next available preference is given on those ballot documents.
- STV47.4 The vote on each ballot document transferred under rule STV47.3 shall be at a value (“the transfer value”) which:
- (a) reduces the value of each vote transferred so that the total value of all such votes does not exceed the surplus, and
 - (b) is calculated by dividing the surplus of the candidate from whom the votes are being transferred by the total number of the ballot documents on which those votes are given, the calculation being made to two decimal places (ignoring the remainder if any).
- STV47.5 Where at the end of any stage of the count involving the transfer of ballot documents, the number of votes for any candidate exceeds the quota, the returning officer is to sort the ballot documents in the sub-parcel of transferred votes which was last received by that candidate into separate sub-parcels so that they are grouped:
- (a) according to the next available preference given on those ballot documents for any continuing candidate, or
 - (b) where no such preference is given, as the sub-parcel of non-transferable votes.
- STV47.6 The returning officer is, in accordance with this rule and rule STV48, to transfer each sub-parcel of ballot documents referred to in rule STV47.5(a) to the candidate for whom the next available preference is given on those ballot documents.
- STV47.7 The vote on each ballot document transferred under rule STV47.6 shall be at:
- (a) a transfer value calculated as set out in rule STV47.4(b), or
 - (b) at the value at which that vote was received by the candidate from whom it is now being transferred,
- whichever is the less.
- STV47.8 Each transfer of a surplus constitutes a stage in the count.
- STV47.9 Subject to rule STV47.10, the returning officer shall proceed to transfer transferable ballot documents until no candidate who is deemed to be elected has a surplus or all the vacancies have been filled.

- STV47.10 Transferable ballot documents shall not be liable to be transferred where any surplus or surpluses which, at a particular stage of the count, have not already been transferred, are:
- (a) less than the difference between the total vote then credited to the continuing candidate with the lowest recorded vote and the vote of the candidate with the next lowest recorded vote, or
 - (b) less than the difference between the total votes of the two or more continuing candidates, credited at that stage of the count with the lowest recorded total numbers of votes and the candidate next above such candidates.

STV47.11 This rule does not apply at an election where there is only one vacancy.

STV48. Supplementary provisions on transfer

- STV48.1 If, at any stage of the count, two or more candidates have surpluses, the transferable ballot documents of the candidate with the highest surplus shall be transferred first, and if:
- (a) The surpluses determined in respect of two or more candidates are equal, the transferable ballot documents of the candidate who had the highest recorded vote at the earliest preceding stage at which they had unequal votes shall be transferred first, and
 - (b) the votes credited to two or more candidates were equal at all stages of the count, the returning officer shall decide between those candidates by lot, and the transferable ballot documents of the candidate on whom the lot falls shall be transferred first.
- STV48.2 The returning officer shall, on each transfer of transferable ballot documents under rule STV47:
- (a) record the total value of the votes transferred to each candidate,
 - (b) add that value to the previous total of votes recorded for each candidate and record the new total,
 - (c) record as non-transferable votes the difference between the surplus and the total transfer value of the transferred votes and add that difference to the previously recorded total of non-transferable votes, and
 - (d) compare:
 - (i) the total number of votes then recorded for all of the candidates, together with the total number of non-transferable votes, with
 - (ii) the recorded total of valid first preference votes.
- STV48.3 All ballot documents transferred under rule STV47 or STV49 shall be clearly marked, either individually or as a sub-parcel, so as to indicate the transfer value recorded at that time to each vote on that ballot document or, as the case may be, all the ballot documents in that sub-parcel.

STV48.4 Where a ballot document is so marked that it is unclear to the returning officer at any stage of the count under rule STV47 or STV49 for which candidate the next preference is recorded, the returning officer shall treat any vote on that ballot document as a non-transferable vote; and votes on a ballot document shall be so treated where, for example, the names of two or more candidates (whether continuing candidates or not) are so marked that, in the opinion of the returning officer, the same order of preference is indicated or the numerical sequence is broken.

STV49. Exclusion of candidates

STV49.1 If:

- (a) all transferable ballot documents which under the provisions of rule STV47 (including that rule as applied by rule STV49.11) and this rule are required to be transferred, have been transferred, and
- (b) subject to rule STV50, one or more vacancies remain to be filled,

the returning officer shall exclude from the election at that stage the candidate with the then lowest vote (or, where rule STV49.12 applies, the candidates with the then lowest votes).

STV9.2 The returning officer shall sort all the ballot documents on which first preference votes are given for the candidate or candidates excluded under rule STV49.1 into two sub-parcels so that they are grouped as:

- (a) ballot documents on which a next available preference is given, and
- (b) ballot documents on which no such preference is given (thereby including ballot documents on which preferences are given only for candidates who are deemed to be elected or are excluded).

STV49.3 The returning officer shall, in accordance with this rule and rule STV48, transfer each sub-parcel of ballot documents referred to in rule STV49.2 to the candidate for whom the next available preference is given on those ballot documents.

STV49.4 The exclusion of a candidate, or of two or more candidates together, constitutes a further stage of the count.

STV49.5 If, subject to rule STV50, one or more vacancies still remain to be filled, the returning officer shall then sort the transferable ballot documents, if any, which had been transferred to any candidate excluded under rule STV49.1 into sub- parcels according to their transfer value.

STV49.6 The returning officer shall transfer those ballot documents in the sub-parcel of transferable ballot documents with the highest transfer value to the continuing candidates in accordance with the next available preferences given on those ballot documents (thereby passing over candidates who are deemed to be elected or are excluded).

STV49.7 The vote on each transferable ballot document transferred under rule STV49.6 shall be at the value at which that vote was received by the candidate excluded under rule STV49.1.

- STV9.8 Any ballot documents on which no next available preferences have been expressed shall be set aside as non-transferable votes.
- STV49.9 After the returning officer has completed the transfer of the ballot documents in the sub-
parcel of ballot documents with the highest transfer value ~~he or she~~they shall proceed to
transfer in the same way the sub-
parcel of ballot documents with the next highest value and
so on until ~~he has~~they have dealt with each sub-
parcel of a candidate excluded under rule STV49.1.
- STV49.10 The returning officer shall after each stage of the count completed under this rule:
- (a) record:
 - (i) the total value of votes, or
 - (ii) the total transfer value of votes transferred to each candidate,
 - (b) add that total to the previous total of votes recorded for each candidate and record the new total,
 - (c) record the value of non-transferable votes and add that value to the previous non-transferable votes total, and
 - (d) compare:
 - (i) the total number of votes then recorded for each candidate together with the total number of non-transferable votes, with
 - (ii) the recorded total of valid first preference votes.
- STV49.11 If after a transfer of votes under any provision of this rule, a candidate has a surplus, that surplus shall be dealt with in accordance with rules STV47.5 to STV47.10 and rule STV48.
- STV49.12 Where the total of the votes of the two or more lowest candidates, together with any surpluses not transferred, is less than the number of votes credited to the next lowest candidate, the returning officer shall in one operation exclude such two or more candidates.
- STV49.13 If when a candidate has to be excluded under this rule, two or more candidates each have the same number of votes and are lowest:
- (a) regard shall be had to the total number of votes credited to those candidates at the earliest stage of the count at which they had an unequal number of votes and the candidate with the lowest number of votes at that stage shall be excluded, and
 - (b) where the number of votes credited to those candidates was equal at all stages, the returning officer shall decide between the candidates by lot and the candidate on whom the lot falls shall be excluded.

STV50. Filling of last vacancies

- STV50.1 Where the number of continuing candidates is equal to the number of vacancies remaining unfilled the continuing candidates shall thereupon be deemed to be elected.
- STV50.2 Where only one vacancy remains unfilled and the votes of any one continuing candidate are equal to or greater than the total of votes credited to other continuing candidates together with any surplus not transferred, the candidate shall thereupon be deemed to be elected.
- STV50.3 Where the last vacancies can be filled under this rule, no further transfer of votes shall be made.

STV51. Order of election of candidates

- STV51.1 The order in which candidates whose votes equal or exceed the quota are deemed to be elected shall be the order in which their respective surpluses were transferred, or would have been transferred but for rule STV47.10.
- STV51.2 A candidate credited with a number of votes equal to, and not greater than, the quota shall, for the purposes of this rule, be regarded as having had the smallest surplus at the stage of the count at which they obtained the quota.
- STV51.3 Where the surpluses of two or more candidates are equal and are not required to be transferred, regard shall be had to the total number of votes credited to such candidates at the earliest stage of the count at which they had an unequal number of votes and the surplus of the candidate who had the greatest number of votes at that stage shall be deemed to be the largest.
- STV51.4 Where the number of votes credited to two or more candidates were equal at all stages of the count, the returning officer shall decide between them by lot and the candidate on whom the lot falls shall be deemed to have been elected first.

FPP51. Equality of votes

- FPP51.1 Where, after the counting of votes is completed, an equality of votes is found to exist between any candidates and the addition of a vote would entitle any of those candidates to be declared elected, the returning officer is to decide between those candidates by a lot, and proceed as if the candidate on whom the lot falls had received an additional vote.

PART 7: FINAL PROCEEDINGS IN CONTESTED AND UNCONTESTED ELECTIONS

FPP52. Declaration of result for contested elections

- FPP52.1 In a contested election, when the result of the poll has been ascertained, the returning officer is to:

- (a) declare the candidate or candidates whom more votes have been given than for the other candidates, up to the number of vacancies to be filled on the council of governors from the constituency, or class within a constituency, for which the election is being held to be elected,
- (b) give notice of the name of each candidate who ~~he or she has~~they have declared elected:
 - (i) where the election is held under a proposed constitution pursuant to powers conferred on the Royal United Hospital, Bath NHS Trust by section 33(4) of the 2006 Act, to the Chair of the NHS Trust, or
 - (ii) in any other case, to the Chair of the corporation; and
- (c) give public notice of the name of each candidate whom ~~he or she has~~they have declared elected.

FPP52.2 The returning officer is to make:

- (a) the total number of votes given for each candidate (whether elected or not), and
 - (b) the number of rejected ballot papers under each of the headings in rule FPP44.5,
 - (c) the number of rejected text voting records under each of the headings in rule FPP44.10,
- available on request.

STV52. Declaration of result for contested elections

STV52.1 In a contested election, when the result of the poll has been ascertained, the returning officer is to:

- (a) declare the candidates who are deemed to be elected under Part 6 of these rules as elected,
- (b) give notice of the name of each candidate who ~~he or she has~~they have declared elected –
 - (i) where the election is held under a proposed constitution pursuant to powers conferred on the Royal United Hospital, Bath NHS Trust by section 33(4) of the 2006 Act, to the Chair of the NHS Trust, or
 - (ii) in any other case, to the Chair of the corporation, and
- (c) give public notice of the name of each candidate who ~~he or she has~~they have declared elected.

STV52.2 The returning officer is to make:

- (a) the number of first preference votes for each candidate whether elected or not,
- (b) any transfer of votes,
- (c) the total number of votes for each candidate at each stage of the count at which such transfer took place,

- (d) the order in which the successful candidates were elected, and
 - (e) the number of rejected ballot papers under each of the headings in rule STV44.1,
 - (f) the number of rejected text voting records under each of the headings in rule STV44.3,
- available on request.

53. Declaration of result for uncontested elections

53.1 In an uncontested election, the returning officer is to as soon as is practicable after final day for the delivery of notices of withdrawals by candidates from the election:

- (a) declare the candidate or candidates remaining validly nominated to be elected,
- (b) give notice of the name of each candidate who ~~he or she has~~they have declared elected to the Chair of the corporation, and
- (c) give public notice of the name of each candidate who ~~he or she has~~they have declared elected.

PART 8: DISPOSAL OF DOCUMENTS

54. Sealing up of documents relating to the poll

54.1 On completion of the counting at a contested election, the returning officer is to seal up the following documents in separate packets:

- (a) the counted ballot papers, internet voting records, telephone voting records and text voting records,
- (b) the ballot papers and text voting records endorsed with “rejected in part”,
- (c) the rejected ballot papers and text voting records, and
- (d) the statement of rejected ballot papers and the statement of rejected text voting records,

and ensure that complete electronic copies of the internet voting records, telephone voting records and text voting records created in accordance with rule 26 are held in a device suitable for the purpose of storage.

54.2 The returning officer must not open the sealed packets of:

- (a) the disqualified documents, with the list of disqualified documents inside it,
- (b) the list of spoilt ballot papers and the list of spoilt text message votes,
- (c) the list of lost ballot documents, and

- (d) the list of eligible voters,

or access the complete electronic copies of the internet voting records, telephone voting records and text voting records created in accordance with rule 26 and held in a device suitable for the purpose of storage.

54.3 The returning officer must endorse on each packet a description of:

- (a) its contents,
- (b) the date of the publication of notice of the election,
- (c) the name of the corporation to which the election relates, and
- (d) the constituency, or class within a constituency, to which the election relates.

55. Delivery of documents

55.1 Once the documents relating to the poll have been sealed up and endorsed pursuant to rule 56, the returning officer is to forward them to the chair of the corporation.

56. Forwarding of documents received after close of the poll

56.1 Where:

- (a) any voting documents are received by the returning officer after the close of the poll, or
- (b) any envelopes addressed to eligible voters are returned as undelivered too late to be resent, or
- (c) any applications for replacement voting information are made too late to enable new voting information to be issued,

the returning officer is to put them in a separate packet, seal it up, and endorse and forward it to the Chair of the corporation.

57. Retention and public inspection of documents

57.1 The corporation is to retain the documents relating to an election that are forwarded to the chair by the returning officer under these rules for one year, and then, unless otherwise directed by the board of directors of the corporation, cause them to be destroyed.

57.2 With the exception of the documents listed in rule 58.1, the documents relating to an election that are held by the corporation shall be available for inspection by members of the public at all reasonable times.

57.3 A person may request a copy or extract from the documents relating to an election that are held by the corporation, and the corporation is to provide it, and may impose a reasonable charge for doing so.

58. Application for inspection of certain documents relating to an election

58.1 The corporation may not allow:

- (a) the inspection of, or the opening of any sealed packet containing –
 - (i) any rejected ballot papers, including ballot papers rejected in part,
 - (ii) any rejected text voting records, including text voting records rejected in part,
 - (iii) any disqualified documents, or the list of disqualified documents,
 - (iv) any counted ballot papers, internet voting records, telephone voting records or text voting records, or
 - (v) the list of eligible voters, or
- (b) access to or the inspection of the complete electronic copies of the internet voting records, telephone voting records and text voting records created in accordance with rule 26 and held in a device suitable for the purpose of storage,

by any person without the consent of the board of directors of the corporation.

58.2 A person may apply to the board of directors of the corporation to inspect any of the documents listed in rule 58.1, and the board of directors of the corporation may only consent to such inspection if it is satisfied that it is necessary for the purpose of questioning an election pursuant to Part 11.

58.3 The board of directors of the corporation's consent may be on any terms or conditions that it thinks necessary, including conditions as to –

- (a) persons,
- (b) time,
- (c) place and mode of inspection,
- (d) production or opening,

and the corporation must only make the documents available for inspection in accordance with those terms and conditions.

58.4 On an application to inspect any of the documents listed in rule 58.1 the board of directors of the corporation must:

- (a) in giving its consent, and
- (b) in making the documents available for inspection

ensure that the way in which the vote of any particular member has been given shall not be disclosed, until it has been established –

- (i) that ~~his or her~~their vote was given, and
- (ii) that NHS ~~England~~has declared that the vote was invalid.

FPP59. Countermand or abandonment of poll on death of candidate

FPP59.1 If at a contested election, proof is given to the returning officer's satisfaction before the result of the election is declared that one of the persons named or to be named as a candidate has died, then the returning officer is to:

- (a) countermand notice of the poll, or, if voting information has been issued, direct that the poll be abandoned within that constituency or class, and
- (b) order a new election, on a date to be appointed by ~~him or her~~them in consultation with the corporation, within the period of 40 days, computed in accordance with rule 3 of these rules, beginning with the day that the poll was countermanded or abandoned.

FPP59.2 Where a new election is ordered under rule FPP59.1, no fresh nomination is necessary for any candidate who was validly nominated for the election where the poll was countermanded or abandoned but further candidates shall be invited for that constituency or class.

FPP59.3 Where a poll is abandoned under rule FPP59.1(a), rules FPP59.4 to FPP59.7 are to apply.

FPP59.4 The returning officer shall not take any step or further step to open envelopes or deal with their contents in accordance with rules 38 and 39, and is to make up separate sealed packets in accordance with rule 40.

FPP59.5 The returning officer is to:

- (a) count and record the number of ballot papers, internet voting records, telephone voting records and text voting records that have been received,
- (b) seal up the ballot papers, internet voting records, telephone voting records and text voting records into packets, along with the records of the number of ballot papers, internet voting records, telephone voting records and text voting records and

ensure that complete electronic copies of the internet voting records telephone voting records and text voting records created in accordance with rule 26 are held in a device suitable for the purpose of storage.

FPP59.6 The returning officer is to endorse on each packet a description of:

- (a) its contents,
- (b) the date of the publication of notice of the election,
- (c) the name of the corporation to which the election relates, and
- (d) the constituency, or class within a constituency, to which the election relates.

- FPP59.7 Once the documents relating to the poll have been sealed up and endorsed pursuant to rules FPP59.4 to FPP59.6, the returning officer is to deliver them to the Chair of the corporation, and rules 57 and 58 are to apply.

STV59. Countermand or abandonment of poll on death of candidate

- STV59.1 If, at a contested election, proof is given to the returning officer's satisfaction before the result of the election is declared that one of the persons named or to be named as a candidate has died, then the returning officer is to:
- (a) publish a notice stating that the candidate has died, and
 - (b) proceed with the counting of the votes as if that candidate had been excluded from the count so that –
 - (i) ballot documents which only have a first preference recorded for the candidate that has died, and no preferences for any other candidates, are not to be counted, and
 - (ii) ballot documents which have preferences recorded for other candidates are to be counted according to the consecutive order of those preferences, passing over preferences marked for the candidate who has died.
- STV59.2 The ballot documents which have preferences recorded for the candidate who has died are to be sealed with the other counted ballot documents pursuant to rule 54.1(a).

PART 10: ELECTION EXPENSES AND PUBLICITY

Election expenses

60. Election expenses

- 60.1 Any expenses incurred, or payments made, for the purposes of an election which contravene this Part are an electoral irregularity, which may only be questioned in an application made to NHS [England](#) under Part 11 of these rules.

61. Expenses and payments by candidates

- 61.1 A candidate may not incur any expenses or make a payment (of whatever nature) for the purposes of an election, other than expenses or payments that relate to:
- (a) personal expenses,
 - (b) travelling expenses, and expenses incurred while living away from home, and
 - (c) expenses for stationery, postage, telephone, internet (or any similar means of communication) and other petty expenses, to a limit of £100.

62. Election expenses incurred by other persons

62.1 No person may:

- (a) incur any expenses or make a payment (of whatever nature) for the purposes of a candidate's election, whether on that candidate's behalf or otherwise, or
- (b) give a candidate or ~~his or her~~their family any money or property (whether as a gift, donation, loan, or otherwise) to meet or contribute to expenses incurred by or on behalf of the candidate for the purposes of an election.

62.2 Nothing in this rule is to prevent the corporation from incurring such expenses, and making such payments, as it considers necessary pursuant to rules 63 and 64.

Publicity

63. Publicity about election by the corporation

63.1 The corporation may:

- (a) compile and distribute such information about the candidates, and
- (b) organise and hold such meetings to enable the candidates to speak and respond to questions,

as it considers necessary.

63.2 Any information provided by the corporation about the candidates, including information compiled by the corporation under rule 64, must be:

- (a) objective, balanced and fair,
- (b) equivalent in size and content for all candidates,
- (c) compiled and distributed in consultation with all of the candidates standing for election, and
- (d) must not seek to promote or procure the election of a specific candidate or candidates, at the expense of the electoral prospects of one or more other candidates.

63.3 Where the corporation proposes to hold a meeting to enable the candidates to speak, the corporation must ensure that all of the candidates are invited to attend, and in organising and holding such a meeting, the corporation must not seek to promote or procure the election of a specific candidate or candidates at the expense of the electoral prospects of one or more other candidates.

64. Information about candidates for inclusion with voting information

64.1 The corporation must compile information about the candidates standing for election, to be

distributed by the returning officer pursuant to rule 24 of these rules.

64.2 The information must consist of:

- (a) a statement submitted by the candidate of no more than 250 words,
- (b) if voting by telephone or text message is a method of polling for the election, the numerical voting code allocated by the returning officer to each candidate, for the purpose of recording votes using the telephone voting facility or the text message voting facility (“numerical voting code”), and
- (c) a photograph of the candidate.

65. Meaning of “for the purposes of an election”

65.1 In this Part, the phrase “for the purposes of an election” means with a view to, or otherwise in connection with, promoting or procuring a candidate’s election, including the prejudicing of another candidate’s electoral prospects; and the phrase “for the purposes of a candidate’s election” is to be construed accordingly.

65.2 The provision by any individual of ~~his or her~~their own services voluntarily, on ~~his or her~~their own time, and free of charge is not to be considered an expense for the purposes of this Part.

PART 11: QUESTIONING ELECTIONS AND THE CONSEQUENCE OF IRREGULARITIES

66. Application to question an election

66.1 An application alleging a breach of these rules, including an electoral irregularity under Part 10, may be made to NHS England† for the purpose of seeking a referral to the independent election arbitration panel (IEAP).

66.2 An application may only be made once the outcome of the election has been declared by the returning officer.

66.3 An application may only be made to NHS England† by:

- (a) a person who voted at the election or who claimed to have had the right to vote, or
- (b) a candidate, or a person claiming to have had a right to be elected at the election.

66.4 The application must:

- (a) describe the alleged breach of the rules or electoral irregularity, and
- (b) be in such a form as the independent panel may require.

66.5 The application must be presented in writing within 21 days of the declaration of the result of

the election. NHS England will refer the application to the independent election arbitration panel appointed by NHS England.

- 66.6 If the independent election arbitration panel requests further information from the applicant, then that person must provide it as soon as is reasonably practicable.
- 66.7 NHS England shall delegate the determination of an application to a person or panel of persons to be nominated for the purpose.
- 66.8 The determination by the IEAP shall be binding on and shall be given effect by the corporation, the applicant and the members of the constituency (or class within a constituency) including all the candidates for the election to which the application relates.
- 66.9 The IEAP may prescribe rules of procedure for the determination of an application including costs.

PART 12: MISCELLANEOUS

67. Secrecy

67.1 The following persons:

- (a) the returning officer,
- (b) the returning officer's staff,

must maintain and aid in maintaining the secrecy of the voting and the counting of the votes, and must not, except for some purpose authorised by law, communicate to any person any information as to:

- (i) the name of any member of the corporation who has or has not been given voting information or who has or has not voted,
- (ii) the unique identifier on any ballot paper,
- (iii) the voter ID number allocated to any voter,
- (iv) the candidate(s) for whom any member has voted.

67.2 No person may obtain or attempt to obtain information as to the candidate(s) for whom a voter is about to vote or has voted, or communicate such information to any person at any time, including the unique identifier on a ballot paper given to a voter or the voter ID number allocated to a voter.

67.3 The returning officer is to make such arrangements as they~~he or she~~ thinks fit to ensure that the individuals who are affected by this provision are aware of the duties it imposes.

68.

Prohibition of disclosure of vote

- 68.1 No person who has voted at an election shall, in any legal or other proceedings to question the election, be required to state for whom ~~he or she has~~they have voted.

69. Disqualification

- 69.1 A person may not be appointed as a returning officer, or as staff of the returning officer pursuant to these rules, if that person is:

- (a) a member of the corporation,
- (b) an employee of the corporation,
- (c) a director of the corporation, or
- (d) employed by or on behalf of a person who has been nominated for election.

70. Delay in postal service through industrial action or unforeseen event

- 70.1 If industrial action, or some other unforeseen event, results in a delay in:

- (a) the delivery of the documents in rule 24, or
- (b) the return of the ballot papers,

the returning officer may extend the time between the publication of the notice of the poll and the close of the poll by such period as ~~he or she~~they considers appropriate.

ANNEX 5 – ADDITIONAL PROVISIONS – COUNCIL OF GOVERNORS

(Paragraphs 14 and 19)

Appendix 1:

Eligibility to be on the Council of Governors

- 1 A person may not become or continue as a Governor of the Trust if:
 - 1.1 in the case of an Elected Governor, ~~he~~they ceases to be a member of the constituency or (where relevant) the class within the constituency he represents;
 - 1.2 in the case of an Appointed Governor, the sponsoring organisation withdraws their sponsorship of ~~him~~them;
 - 1.3 In the case of an Appointed Governor, ~~his~~their primary place of residence or (where relevant) ~~his~~their primary place of business is located in an area other than an area specified in Annex 1 as an area for a public constituency;
 - 1.4 ~~he~~they ~~are~~is a person whose tenure of office as the Chair or as a member or director of a Health Service Body has been terminated on the grounds that ~~his~~their appointment is not in the interest of the health service;
 - 1.5 ~~he~~is~~they~~are a Director of the Trust, or a governor, executive director, non-executive director, Chair, chief executive officer of another Health Service Body (unless they are appointed by a Partnership Organisation which is a Health Service Body), or a body corporate whose business involves the provision of health care services, including for the avoidance of doubt those who have a commercial interest in the affairs of the Trust;
 - 1.6 ~~he~~has~~they~~have been a director of the ~~Applicant~~ Trust or a Director of the Trust in the preceding 3 years prior to the date of ~~his~~their nomination to stand for election as an Elected Governor, or in the case of an Appointed Governor, the date of ~~his~~their appointment by a Partnership Organisation;
 - 1.7 ~~he~~has~~they~~have had ~~his~~their name removed from a list maintained under regulations pursuant to Sections 91, 106, 123, or 146 of the 2006 Act, or the equivalent lists maintained by Local Health Boards in Wales under the National Health Service (Wales) Act 2006, and ~~he~~has~~they~~have not subsequently had ~~his~~their name included in such a list and, due to the reason(s) for such removal, ~~he~~is~~they~~are considered by the Trust to be unsuitable to be a Governor;
 - 1.8 subject to paragraph 5 below ~~he~~is~~they~~are incapable by reason of mental disorder, illness or injury of managing and administering ~~his~~their property and affairs;
 - 1.9 ~~he~~has~~they~~have refused without reasonable cause to undertake any training which the Trust and/or Council of Governors requires all Governors to undertake;
 - 1.10 ~~he~~is~~they~~are a member of a local authority Health Overview and Scrutiny Committee;
 - 1.11 ~~he~~is~~they~~are the subject of a Sex Offenders Order and /or ~~his~~their name is included in the Sex Offenders Register;

- 1.12 ~~he is~~they are an Immediate Family Member of a Governor or Director of the Trust;
 - 1.13 ~~he has~~they have failed to repay (without good cause) any amount of monies properly owed to the ~~Applicant Trust or the~~ Trust;
 - 1.14 ~~he has~~they have failed to sign and deliver to the Secretary a statement in the form required by the Trust confirming acceptance of the Governor's Code of Conduct;
 - 1.15 ~~he is~~they are a person who, by reference to information revealed in a criminal record certificate or enhanced criminal record certificate issued by the Disclosure and Barring Service under Part V of the Police Act 1997, is considered by the Trust to be inappropriate on the grounds that ~~his~~their appointment might adversely affect public confidence in the Trust or otherwise bring the Trust into disrepute;
 - 1.16 ~~he has~~they have failed to make, or has falsely made, any declaration as required by paragraph 12.5 of the Constitution;
 - 1.17 ~~he is~~they are included in any barred list established under the Safeguarding Vulnerable Groups Act 2006, or who is included in an equivalent list maintained under the law of Scotland or Northern Ireland;
 - 1.18 ~~he is~~they are a person who is the subject of a disqualification order made under the Company Directors' Disqualification Act 1986;
 - 1.19 the relevant Partnership Organisation which ~~he~~they represents ceases to exist;
 - 1.20 ~~he has~~they have within the preceding 2 years been dismissed, otherwise than by reason of redundancy, from any paid employment with a Health Service Body;
 - 1.21 ~~he has~~they have received a written warning from the Trust for verbal and/or physical abuse towards Trust staff; or
 - 1.22 ~~he has~~they have been expelled from the post of governor of another NHS foundation trust.
- 2 Where a person has been elected or appointed to be a Governor and ~~they~~he becomes disqualified or ~~are~~is removed from office under paragraph 14 of the Constitution or paragraph 1 above, ~~they~~he shall notify the Secretary in writing of such disqualification and/or (as the case may be), removal as soon as is practicable and, in any event, within 14 days of first becoming aware of those matters which rendered him disqualified or removed.
 - 3 If it comes to the notice of the Secretary at the time of ~~their~~his taking office or later that the Governor is so disqualified, the Secretary shall immediately declare that the person in question is disqualified and notify ~~them~~him in writing to that effect as soon as is practicable.
 - 4 Upon despatch of any such notification under paragraphs 2 or 3 above, that person's tenure of office, if any, shall be terminated immediately and ~~they~~he shall cease to act as a Governor, and the Secretary shall cause ~~their~~his name to be removed from the register of members of the Council of Governors.
 - 5 Where an individual is deemed by the Secretary, in ~~their~~his absolute discretion, to be incapable by reason of mental disorder, illness or injury of managing and/or administering ~~their~~his property and/or affairs for the purposes of paragraph 1.8 above, the Secretary shall either:

- 5.1 temporarily suspend the individual from office until such time as the Secretary, in their absolute discretion, considers them to be capable of managing and/or administering their property and affairs; or
- 5.2 (where the Secretary, in their absolute discretion, considers them to be permanently incapable of managing and/or administering their property and affairs), declare that the individual is disqualified from office in accordance with paragraphs 3 and 4 above; and
- 5.3 In considering whether an individual is incapable by reason of mental disorder, illness or injury of managing and/or administering their property and/or affairs, the Secretary shall take into account the provisions of the Mental Capacity Act 2005, or any statutory modification thereof and they shall be entitled to take appropriate professional advice from internal Trust advisors, and/or external advisors, as necessary.

ANNEX 5 – ADDITIONAL PROVISIONS – COUNCIL OF GOVERNORS

Appendix 2:

Council of Governors: further provisions

1 Remuneration

Governors are not to receive remuneration from the Trust, provided that this shall not prevent the remuneration of Governors by their employer.

2 Vacancies

2.1 Where a vacancy arises amongst the Elected Governors for any reason other than expiry of a term of office, the provisions set out in paragraphs 2.1.1 to 2.1.3 below shall apply:

2.1.1 the Trust shall invite the next highest polling candidate for that seat at the most recent election or (where relevant) by-election, who is willing to take office, to fill the seat until the next annual election, at which time the seat will fall vacant and be subject to election for any unexpired period of the term of office;

2.1.2 where there is no next highest polling candidate willing to take office in accordance with paragraph 2.1.1 above, the Trust shall leave the seat vacant until the next scheduled elections are held if the unexpired period of office is less than six months;

2.1.3 where the unexpired period of office is not less than six months in accordance with paragraph 2.1.2 above, the Trust shall call an election within three months to fill the seat for the remainder of that term of office.

2.2 Where a vacancy arises amongst the Appointed Governors for any reason other than expiry of the term of office, the Secretary will request that the relevant organisation appoint a Replacement Governor within 30 days to hold office for the remainder of the term of office. Appointed Governors shall be replaced in accordance with the processes agreed pursuant to paragraph 2 of Annex 3 of this Constitution.

2.3 The validity of any act of the Council of Governors is not affected by any vacancy among the Governors or by any defect in the appointment of any Governor.

3 Meetings

3.1 The Council of Governors is to meet at least 4 times per year, including an annual meeting no later than 30 September in each Financial Year apart from the first year, when the Council of Governors is to receive and consider the Annual Accounts and any report of the Auditor on them and the Board of Directors is to present to the Council of Governors the Annual Report (the "**Annual Governors' Meeting**") in accordance with paragraph 39 of this Constitution.

3.2 The Secretary shall call meetings in accordance with paragraph 3.1 above.

- 3.3 Subject to paragraph 3.5 below, any meeting of the Council of Governors requires a quorum of one-third of the total number of Governors to be present, including 3 Public Governors and 2 Staff Governors.
- 3.4 No business shall be carried out at a meeting which is not quorate.
- 3.5 If at any meeting of the Council of Governors, there is no quorum present within 60 minutes of the time fixed for the start of the meeting the meeting shall stand adjourned for a minimum period of 5 Clear Days and the Secretary shall give or shall procure the giving of notice to all Governors of the date, time and place of that adjourned meeting. Notwithstanding paragraph 3.3 above, upon reconvening, those present shall constitute a quorum.

4 Committees, sub-committees and joint committees

- 4.1 The Council of Governors may appoint committees consisting wholly or partly of its members to assist it in carrying out its functions. A committee appointed under this paragraph may appoint a sub-committee.
- 4.2 The Council of Governors may appoint members to serve on joint committees with the Board of Directors or committees thereof.
- 4.3 These committees, sub-committees or joint committees may call upon outside advisers to help them in their tasks, provided that the financial and other implications of seeking outside advisers have been discussed and agreed by the Board of Directors. Any conflict arising between the Council of Governors and the Board of Directors under this paragraph will be determined in accordance with paragraph 2.3 of Appendix 4 of Annex 8.

~~5 Transitional provisions for the Initial Elected Governors~~

~~The following provisions shall apply for the Initial Elected Governors of the Trust.~~

~~5.1 The initial Public Governors~~

~~5.1.1 Of those candidates who are declared elected from the following Public Constituencies of the Trust at the Initial Election:~~

- ~~5.1.1.1 City of Bath;~~
- ~~5.1.1.2 North East Somerset;~~
- ~~5.1.1.3 North Wiltshire;~~
- ~~5.1.1.4 South Wiltshire; and~~
- ~~5.1.1.5 Mendip;~~

~~the candidate who polls the most votes shall serve a term of office ending 3 (three) years from the date of Authorisation and the remaining candidate shall serve a term of office ending 2 (two) years from the date of Authorisation.~~

~~5.1.2 Candidates elected unopposed shall be deemed to have received 1 (one) vote for the purposes of paragraph 5.1.1 above.~~

~~5.1.3 If after applying the provisions of paragraphs 5.1.1 and 5.1.2 above, it is not possible to determine which candidate or candidates are entitled to~~

~~an initial term of office of 2 years or 3 years, his or their initial term of office shall be determined by the drawing of lots. The drawing of lots shall be conducted by the Chair in the presence of two Non-Executive Directors and the Secretary, who shall report the outcome to the candidates concerned.~~

5.2 The initial Staff Governors

~~5.2.1 Of those candidates who are declared elected at the Initial Election, the three candidates who polled the most votes shall serve a term of office ending 3 (three) years from the date of Authorisation.~~

~~5.2.2 Of those candidates who are declared elected at the Initial Election, the two candidates who polled the least votes shall serve a term of office ending 2 (two) years from the date of Authorisation.~~

~~5.2.3 Candidates elected unopposed shall be deemed to have received 1 (one) vote for the purposes of paragraphs 5.2.1 and 5.2.2 above.~~

~~5.2.4 If, after applying the provisions of paragraphs 5.2.1 to 5.2.3 above it is not possible to determine which candidate or candidates are entitled to an initial term of office of 2 years or 3 years, his or their initial term of office shall be determined by the drawing of lots. The drawing of lots shall be conducted by the Chair in the presence of two Non-Executive Directors and the Secretary, who shall report the outcome to the candidates concerned.~~

~~5.3 For the purposes of the provisions set out in paragraphs 5.1 and 5.2 above, a "year" means a period of 12 consecutive "months" commencing immediately on the date of Authorisation and a "month" means a calendar month.~~

65 Council of Governors: declarations

6.15.1 The specified form of declaration referred to at paragraph 12.5 of this Constitution regarding the declaration to stand for election as an Elected Governor shall be as set out on the nomination paper referred to in the Model Rules for Elections at Annex 4 and shall state as follows:

"I declare that I am resident at the address detailed in Section 1 of this form. I declare that to the best of my knowledge I am eligible to stand for election to the Council of Governors for the seat named in Section 2 of this form. I declare that to the best of my knowledge I am not de-barred from standing for election by any of the provisions detailed at Section 3 of this form. I declare that I have stated details of any of my political membership and any financial interests I have in the Trust at Section 4 of this form. I understand that if any of these declarations are later found to be false I will if elected lose my seat on the Council of Governors and may also have my membership withdrawn".

6.25.2 The specified form of declaration referred to at paragraph 12.5 of this Constitution regarding the declaration to vote in elections for Public Governors will be as set out in Rule 21 of the Model Rules for Elections.

ANNEX 6 – STANDING ORDERS FOR THE PRACTICE AND PROCEDURE OF THE COUNCIL OF GOVERNORS

(Paragraph 16)

1 INTRODUCTION

- 1.1 The Trust became a Public Benefit Corporation following on [INSERT DATE].
- 1.2 The Trust's principal place of business is the Trust Headquarters.
- 1.3 The Trust is governed by the Regulatory Framework. The functions of the Trust are conferred by the Regulatory Framework. The Regulatory Framework requires the Council of Governors to adopt SOs for the regulation of its proceedings and business and to adhere at all times to the Governors' Code of Conduct.

2 INTERPRETATION

- 2.1 Save as otherwise permitted by law, at any meeting of the Council of Governors, the Chair of the Trust shall be the final authority on the interpretation of the SOs (on which ~~he~~they should be advised by the Secretary).
- 2.2 Unless a contrary intention is evident or the context requires otherwise, words or expressions contained in these SOs shall bear the same meaning as in the Constitution.
- 2.3 The provisions of paragraphs 1.2 to 1.6 of the Constitution apply to these SOs, save that any reference to "Constitution" shall be read as a reference to these "SOs".

3 THE COUNCIL OF GOVERNORS

Further provisions for the Governors are set out in Annex 5 of the Constitution and have effect as if incorporated into the SOs. Certain powers and decisions may only be exercised by the Council of Governors in formal session.

4 MEETINGS OF THE COUNCIL OF GOVERNORS

4.1 Admission of the public

- 4.1.1 The public and representatives of the press shall be afforded facilities to attend all formal meetings of the Council of Governors except where it resolves by special resolution that members of the public and representatives of the press be excluded from all or part of a meeting on the grounds that:
 - 4.1.1.1 any publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted; or
 - 4.1.1.2 for other reasons stated in the resolution and arising from the nature of the business or the proceedings that the Council of Governors believe are special reasons for excluding the public from the meeting in accordance with the Constitution.

- 4.1.2 Nothing in these SOs shall require the Council of Governors to allow members of the public and representatives of the press to record proceedings in any manner whatsoever, other than in writing, or to make any oral report of proceedings as they take place, without the prior agreement of the Chair.

4.2 Calling meetings

- 4.2.1 Meetings of the Council of Governors shall be held at such times and places and of such format including in person, but using electronic communication or hybrid as the Council of Governors may determine and there shall be at least four meetings in any year including:
- 4.2.1.1 the Annual Governors' Meeting; and
- 4.2.1.2 any other meetings required of the Governors in order to fulfil their functions in accordance with the Constitution.
- 4.2.2 The Chair may call a meeting of the Council of Governors at any time. If the Chair refuses to call a meeting after a requisition for that purpose, signed by at least 7 Governors and specifying the business to be transacted at the meeting, has been presented to him~~them~~, or if, without so refusing, the Chair does not call a meeting within 14 Clear Days after such requisition has been presented to him~~them~~ at the Trust's Headquarters, such one-third or more of the Governors may forthwith call a meeting for the purpose of conducting that business.
- 4.2.3 The Council of Governors may invite the Chief Executive, members of the Board of Directors or a representative of the Auditor or other advisors to attend a meeting of the Council of Governors.
- 4.2.4 The Council of Governors may agree that Governors can participate in its meetings by telephone or video link. Participation in a meeting in this manner shall be deemed to be exceptional but shall constitute presence in person at the meeting for the purposes of SO 4.18 (Quorum).
- 4.2.5 Notwithstanding the provisions of SO 4.2.1 above, the Secretary shall publish the dates, times and locations of meetings of the Council of Governors, apart from meetings convened under SO 4.2.2 or those held in the event of an emergency giving rise to the need for an immediate meeting, for each year, six months in advance.

4.3 Notice of meetings and agenda

- 4.3.1 Before each meeting of the Council of Governors, a notice of the meeting, specifying the business proposed to be transacted at it, and signed by the Chair or by an Officer authorised by the Chair to sign on his~~their~~ behalf, shall be delivered to, or sent by post to the usual place of residence of every Governor or sent electronically, so as to be available to him~~them~~ at least 3 Clear Days before the meeting save in the case of emergencies.

- 4.3.2 Before each meeting of the Council of Governors a public notice of the time and place of the meeting, and if appropriate remote access/electronic communication arrangements, of the meeting, and if possible the public part of the agenda, shall be displayed at the Trust's Headquarters and shall be advertised on the Trust's website at least 3 Clear Days before the meeting, save in the case of emergencies.
- 4.3.3 Want of service of the notice of meeting on any one Governor shall not affect the validity of a meeting but failure to serve such a notice on more than three Governors will invalidate the meeting. A notice of meeting shall be presumed to have been served one day after posting or, in the case of a notice sent electronically, on the date of transmission.
- 4.3.4 In the case of a meeting called by Governors in default of the Chair in accordance with SO 4.2.2, the notice shall be signed by those Governors and no business shall be transacted at the meeting other than that specified in the requisition.
- 4.3.5 Agendas will be sent to Governors electronically, by mail or other means before the meeting and supporting papers (including draft minutes of the previous meeting), whenever possible, shall accompany the agenda, but will certainly be despatched no later than 3 Clear Days before the meeting, save in the case of emergencies.
- 4.3.6 In the event of an emergency giving rise to the need for an immediate meeting failure to comply with the notice periods referred to in SOs 4.3.1, 4.3.2 and 4.3.5 shall not prevent the calling of or invalidate such meeting provided that every effort is made to contact members of the Council of Governors who are not absent from the United Kingdom and the agenda for the meeting is restricted to matters arising in that emergency.

4.4 Annual Governors' Meeting

- 4.4.1 In accordance with paragraph 3.1 of Appendix 2 to Annex 5 of the Constitution and SO 4.2.1.1, the Council of Governors shall hold an Annual Governors' Meeting in each Financial Year (apart from the first year) and, subject to SO 4.4.2, shall present to that meeting:
- 4.4.1.1 a report on the proceedings of its meetings held since the last Annual Governors' Meeting;
- 4.4.1.2 a report on the progress since the last Annual Governors' Meeting in developing the Membership Strategy including the steps taken to ensure that the actual membership of the Public Constituencies is representative of the persons who are eligible to be Members under the Constitution;
- 4.4.1.3 a report on any change to the Governors which has taken place since the last Annual Governors' Meeting; and
- 4.4.1.4 a report containing such comments as it wishes to make regarding the performance of the Trust and the accounts of the Trust for the preceding Financial Year and the future service development plans of the Trust.

- 4.4.2 The reports set out in SOs 4.4.1.1 to 4.4.1.4 for the first Annual Governors' Meeting shall cover the period from the date of Authorisation to the date of that meeting.

4.5 Setting the agenda

- 4.5.1 The Council of Governors may determine that certain matters shall appear on every agenda for a meeting and shall be addressed prior to any other business being conducted ("Standing Items").
- 4.5.2 A member of the Council of Governors desiring a matter other than a Standing Item to be included on an agenda, including a formal motion for discussion and voting on at a meeting, shall make ~~his~~ their request in writing to the Secretary at least 15 Clear Days before the meeting. For the purposes of this SO 4.5.2, receipt of any such requests via Electronic Communications is acceptable. A request for a formal motion must be signed or transmitted by at least 2 Governors. The request should state whether the item of business is proposed to be transacted in the presence of the public and should include appropriate supporting information. Requests made less than 15 Clear Days before a meeting may be included on the agenda at the discretion of the Chair.
- 4.5.3 All requests received by the Secretary pursuant to SO 4.5.2 will be acknowledged by the Secretary in writing to the Governors who have signed or transmitted the same.

4.6 Petitions

Where a petition has been received by the Trust, the Chair shall include the petition as an item for the agenda of the next meeting of the Council of Governors.

4.7 Written motions

- 4.7.1 In urgent situations and with the consent of the Chair, business may be affected by a Governor's written motion to deal with business otherwise required to be conducted at a meeting of the Council of Governors.
- 4.7.2 If all members of the Council of Governors have been notified of the proposal and three-quarters of Governors entitled to attend and vote at a meeting of the Council of Governors confirms acceptance of the written motion either in writing or electronically to the Secretary within 5 Clear Days of dispatch then the motion will be deemed to have been resolved, notwithstanding that the Governors have not gathered in one place.
- 4.7.3 The effective date of the resolution shall be the date that the last confirmation is received by the Secretary and, until that date, a Governor who has previously indicated acceptance can withdraw, and the motion shall fail.
- 4.7.4 Once the resolution has been passed, a copy certified by the Secretary shall be recorded in the minutes of the next ensuing meeting where it shall be signed by the person presiding at it.



4.8 Chair of meeting

- 4.8.1 At any meeting of the Council of Governors, the Chair, if present, shall preside.
- 4.8.2 If the Chair is absent from the meeting or is absent temporarily on the grounds of a declared conflict of interest, the Vice Chair shall preside.
- 4.8.3 If the Vice Chair is absent from the meeting or is absent temporarily on the grounds of a declared conflict of interest, another Non-Executive Director as shall be appointed by the Council of Governors for that Trust meeting shall preside.

4.9 Motions

- 4.9.1 Where a Governor has requested inclusion of a matter on the agenda in accordance with SO 4.5.2 above as a matter to be formally proposed for discussion and voting on at the meeting, the provisions of this SO 4.9 shall apply in respect of the motion.
- 4.9.2 The mover of the motion shall have a right of reply at the close of any discussion on the motion or any amendment thereto, or to raise a point of order.
- 4.9.3 When a motion is under discussion or immediately prior to discussion it shall be open to a Governor to move (without prior notice having been given):
 - 4.9.3.1 that the motion be withdrawn; or
 - 4.9.3.2 an amendment to the motion; or
 - 4.9.3.3 the adjournment of the discussion or the meeting; or
 - 4.9.3.4 that the meeting proceed to the next item of business on the agenda; or
 - 4.9.3.5 the appointment of an ad hoc committee to deal with a specific item of business; or
 - 4.9.3.6 that the motion be now put; or
 - 4.9.3.7 that the public be excluded from the meeting in relation to the discussion concerning the motion under SO 4.1.
- 4.9.4 In the case of SOs 4.9.3.4 and 4.9.3.6 above, to ensure objectivity these matters may only be put by a Governor who has not previously taken part in the debate and who is eligible to vote.
- 4.9.5 No amendment to the motion shall be admitted if, in the opinion of the Chair, the amendment negates the substance of the motion.

- 4.9.6 For the avoidance of doubt, the following motions may be moved at a meeting of the Council of Governors without notice pursuant to SO 4.5.2 above:
- 4.9.6.1 a motion in relation to the accuracy of the minutes of the previous meeting of the Council of Governors;
 - 4.9.6.2 a motion to change the order of business in the agenda for that meeting;
 - 4.9.6.3 a motion to refer a matter discussed at a meeting to an appropriate body or individual;
 - 4.9.6.4 a motion to appoint an ad hoc committee or a working group to deal with a specific item of business;
 - 4.9.6.5 a motion to receive reports or adopt recommendations made by the Board of Directors;
 - 4.9.6.6 a motion to withdraw a motion;
 - 4.9.6.7 a motion to amend a motion;
 - 4.9.6.8 a motion to proceed to the next item of business on the agenda;
 - 4.9.6.9 a motion that the question be now put;
 - 4.9.6.10 a motion to adjourn a debate;
 - 4.9.6.11 a motion to adjourn a meeting;
 - 4.9.6.12 a motion to suspend a particular SO (subject to SO 4.15 below);
 - 4.9.6.13 a motion to exclude the public and press from the meeting in question pursuant to SO 4.1 above;
 - 4.9.6.14 a motion to not hear further from a Governor, or to exclude them from the meeting in question (if a Governor persistently disregards the ruling of the Chair or behaves improperly or offensively or deliberately obstructs business, the Chair, in his-their absolute discretion, may move that the Governor in question be not heard further at the meeting in question. If seconded, the motion will be voted on without discussion. If the Governor continues to behave improperly after such a motion is carried, the Chair may move that either the Governor leaves the meeting room or that the meeting in question is adjourned for a specified period. If seconded, the motion will be voted on without discussion); and
 - 4.9.6.15 a motion to give the consent of the Council of Governors to any matter where its consent is required pursuant to the Constitution.

4.10 Report from the Board of Directors

- 4.10.1 Unless otherwise agreed in writing between the Council of Governors and the Board of Directors, at each meeting of the Council of Governors,

the Board of Directors through the Chair or an Executive Director (or Nominated Officer) is required to report to the Council of Governors on the Trust's general progress forward and forward planning.

- 4.10.2 At any meeting a Governor may ask any question through the Chair without notice on any report made pursuant to SO 4.10.1 above after that report has been received by or while such report is under consideration by the Council of Governors at the meeting. Unless the Chair decides otherwise no statements will be made other than those which are strictly necessary to define any question posed. A Governor who has put such a question may also put one supplementary question if the supplementary question arises directly out of the reply given to the initial question. The Chair may, in their absolute discretion, reject any question from any Governor if in their opinion the question is substantially the same and relates to the same subject matter as a question which has already been put to that meeting or a previous meeting. At the absolute discretion of the Chair questions may, at any meeting which is held in public, be asked of the Executive Directors present by Members of the Trust or any other members of the public present at the meeting.

4.11 Chair's ruling

- 4.11.1 Subject to SO 4.11.2 below, statements of Governors made at meetings of the Council of Governors shall be relevant to the matter under discussion at the material time, and subject to SO 2.1, the decision of the Chair on questions of order, relevancy, regularity and any other matters shall be final.

- 4.11.2 This SO applies to all forms of speech/debate by Governors in relation to motions or questions under discussion at a meeting of the Council of Governors.

4.11.3 Content and length of speeches

Any approval to speak must be given by the Chair. Speeches must be directed to the matter, motion or question under discussion or to a point of order. In the interests of time the Chair may, in his their absolute discretion, limit the number of replies, questions or speeches which are heard at any one meeting.

4.11.4 When a person may speak again

A person who has already spoken on a matter at a meeting may not speak again at that meeting in respect of the same matter, except:

- 4.11.4.1 in exercise of a right of reply; or
- 4.11.4.2 on a point of order.

4.11.5 Identification

All speakers must state their name and role before starting to speak to ensure the accuracy of the minutes

4.12 Voting

- 4.12.1 A Governor may not vote at a meeting of the Council of Governors unless, within 7 Clear Days prior to the commencement of the meeting ~~he has~~they have:
- 4.12.1.1 made a declaration in the form specified within Annex A of these SOs, that ~~he is~~they are a member of the constituency which elected ~~him~~them; and
- 4.12.1.2 that ~~he is~~they are not prevented from being a member of the Council of Governors by paragraph 8 of Schedule 7 to the 2006 Act or under the Constitution.
- 4.12.2 A Governor shall be deemed to have confirmed the declarations on attending a subsequent meeting of the Council of Governors, unless ~~he~~they otherwise ~~notify~~ifies the Secretary in writing.
- 4.12.3 Subject to SO 4.12.4 below, every question at a meeting shall be determined by a three-quarters majority of the votes of the Chair and the Governors present and voting at a meeting of the Council of Governors on the question but no resolution may be passed if it is opposed by all of the Public Governors present and voting on the question at the meeting of the Council of Governors.
- 4.12.4 Whoever is Chair of the meeting of the Council of Governors shall in the case of an equality of votes on any question or proposal have a casting vote.
- 4.12.5 A resolution for the removal of the Chair or a Non-Executive Director shall be passed only if three-quarters of the total number of Governors vote in favour of it and the provisions of paragraphs 22.2 to 22.6 of the Constitution have been complied with.
- 4.12.6 All questions put to the vote shall, at the discretion of the Chair, be determined by oral expression or by a show of hands. A paper ballot may also be used if a majority of the Governors present so request. In the event of a meeting held using electronic communication, an electronic voting facility will be made available, including when appropriate, the facility for holding a secret ballot.
- 4.12.7 If at least one-third of the Governors present so request, the voting (other than by paper ballot) on any question may be recorded to show how each Governor present voted or abstained.
- 4.12.8 If a Governor so requests, ~~his~~their vote shall be recorded by name upon any vote (other than by paper ballot).
- 4.12.9 A Governor may only vote if present (either in person or by electronic communication) at the time of the vote on which the question is to be

decided; no Governor may vote by proxy but a Governor is considered to have been present at the meeting if they took part by telephone or video link and so is therefore entitled to vote.

- 4.12.10 In certain circumstances, the Chair may specify in a notice of meeting any matter which requires approval by a written resolution and such a matter may be approved in writing provided that at least three-quarters of the Governors, and a majority of Governors who are members of the Staff Constituency and Public Constituency of the Trust, approve the resolution in writing within the timescale imposed in such a notice.
- 4.12.11 All decisions taken in good faith at the meeting of the Council of Governors or at any meeting of a committee shall be valid even if it is subsequently discovered that there was a defect in the calling of the meeting or the appointment of the Governors attending the meeting.

4.13 Special provisions relating to termination of Governors' tenure:

- 4.13.1 Where a person has been elected or appointed to be a Governor and ~~he~~ they becomes disqualified from office under paragraph 14, or the provisions of Appendix 1 of Annex 5 of the Constitution, ~~he~~ they shall notify the Secretary in writing of such disqualification as soon as practicable and in any event within 14 days of the first becoming aware of those matters which render ~~him~~ them disqualified. The Secretary shall forthwith remove ~~him~~ them from the register of members of the Council of Governors.
- 4.13.2 If it comes to the notice of the Secretary that the Governor is disqualified pursuant to SO 4.13.1, whether at the time of the Governor's appointment or (as the case may be) election, or later, the Secretary shall immediately declare that the individual in question is disqualified and give ~~him~~ them notice in writing to that effect as soon as practicable and in any event within 14 days of the date of the said declaration. In the event that the Governor shall dispute that ~~he~~ they are disqualified the Governor may refer the matter to the dispute resolution procedure set out in paragraph 2.2 of Appendix 4 of Annex 8 of the Constitution within 28 days of the date upon which the notice was given to the Governor.
- 4.13.3 The Chair shall be authorised to take such action as may be immediately required, including but not limited to exclusion of the Governor concerned from the meeting so that any allegation made against a Governor on the grounds set out in paragraph 14.6 of the Constitution can be investigated.
- 4.13.4 Where any grounds within SO 4.13.3 are alleged, it shall be open to the Council of Governors to decide, by two-thirds majority of those present and voting at a meeting of the Council of Governors, to lay a formal charge of non-compliance or misconduct.
- 4.13.5 The Governor in question will be notified in writing of the allegations and grounds upon which the charges referred to in SO 4.13.4 are made, inviting and considering his response within a defined, appropriate and reasonable timescale.

- 4.13.6 The Governor may be invited to address the Council of Governors in person at a meeting of the Council of Governors if the matter cannot be resolved satisfactorily through correspondence.
- 4.13.7 The Governors, by two-thirds majority of those present and voting at a meeting of the Council of Governors can decide whether to uphold the charge.
- 4.13.8 Should the Governors uphold the charge in accordance with SO 4.13.7, the Governors can impose such sanctions as shall be deemed appropriate. Such sanctions may range from the issuing of a written warning as to the Governor's future conduct and consequences, to non-payment of expenses, or removal of the Governor from office in accordance with paragraph 14.6 of the Constitution.
- 4.13.9 Upon disqualification, removal or termination of a Governor's office under this SO, the Secretary shall cause ~~his~~ their name to be removed immediately from the register of members of the Council of Governors.
- 4.13.10 Any decision of the Council of Governors to terminate a Governor's tenure of office may be referred by the Governor concerned to the dispute resolution procedure set out in paragraph 2.2 of Appendix 4 of Annex 8 of the Constitution within 28 days of the date upon which notice in writing of the Council of Governor's decision made in accordance with SOs 4.13.7 and 4.13.8 is communicated to the Governor concerned.
- 4.13.11 A Governor may resign from that office at any time during the term of that office by giving notice to the Secretary in writing, upon which ~~he~~ they shall cease to hold office.
- 4.13.12 A Governor who resigns under SO 4.13.11 above or whose office is terminated under this SO or paragraph 14 of the Constitution shall not be eligible to stand for re-election or re-appointment to the Council of Governors for a period of 3 years from the date of ~~his~~ their resignation or removal from office or the date upon which any appeal against ~~his~~ their removal from office is disposed of whichever is later.
- 4.13.13 Where a vacancy arises on the Council of Governors, the provisions of paragraph 2 of Appendix 2 of Annex 5 of the Constitution shall apply.

4.14 Minutes

- 4.14.1 The minutes of the proceedings of a meeting of the Council of Governors shall be drawn up by the Secretary and submitted for agreement at the next ensuing meeting where they will be signed by the person presiding at it.
- 4.14.2 No discussion shall take place upon the minutes except upon their accuracy or where the person chairing the meeting considers discussion appropriate.

- 4.14.3 Any amendment to the minutes shall be agreed and recorded at the next meeting.

4.15 Suspension of Standing Orders

- 4.15.1 Except where this would contravene any provision of the Regulatory Framework or any guidance or best practice advice issued by NHS England, any one or more of the SOs may be suspended at any meeting, provided that at least three-quarters of the Governors are present, there is a majority of Governors who are members of the Public Constituency, and that a three-quarters majority of those present vote in favour of suspension.
- 4.15.2 A decision to suspend the SOs shall be recorded in the minutes of the meeting and shall only be suspended for the duration of the meeting in question.
- 4.15.3 A separate record of matters discussed during the suspension of SOs shall be made and shall be made available to the Chair and Governors.
- 4.15.4 No formal business may be transacted while the SOs are suspended.

4.16 Record of attendance

The names of the person chairing the meeting and Governors present at the meeting shall be recorded in the minutes.

4.17 Quorum

- 4.17.1 No business shall be transacted at a meeting unless at least one-third of the total number of Governors is present including 3 Public Governors and 2 Staff Governors.
- 4.17.2 If at any meeting there is no quorum present within 60 minutes of the time fixed for the start of the meeting, the meeting shall stand adjourned for a minimum period of 5 Clear Days and the Secretary shall give or shall procure the giving of notice to all Governors of the date, time and place of the adjourned meeting. Notwithstanding SO 4.18.1 above, upon reconvening, those present shall constitute a quorum.
- 4.17.3 If a Governor has been disqualified from participating in the discussion on any matter and/or from other voting on any resolution by reason of the declaration of a conflict of interest as provided in SO 7, ~~he~~they shall no longer count towards the quorum. If a quorum is then not available for the discussion and/or the passing of a resolution on any matter, that matter may not be discussed further or voted upon at that meeting. Such a position shall be recorded in the minutes of the meeting. The meeting must then proceed to the next business.

5 COMMITTEES

- 5.1 Subject to any guidance or best practice advice as may be issued by NHS England, the Council of Governors may and, if directed by NHS England, shall appoint

committees of the Council of Governors to assist it in the proper performance of its functions under the Regulatory Framework, consisting wholly or partly of the Chair, Governors and others.

- 5.2 A committee appointed under SO 6 may, subject to such directions as may be given by the Council of Governors, appoint sub-committees consisting wholly or partly of members of the committee.
- 5.3 These SOs, as far as they are applicable, shall apply with appropriate alteration to meetings of any committees established by the Council of Governors with the terms “Chair” to be read as a reference to the Chair of the committee, and the term “Governor” to be read as a reference to a member of the committee as the context permits.
- 5.4 Each such committee shall have such terms of reference and powers and be subject to such conditions as the Council of Governors shall decide and shall be in accordance with the Regulatory Framework and any guidance or best practice advice issued by NHS [England](#), but the Council of Governors shall not delegate to any committee any of the powers or responsibilities which are to be exercised by the Council of Governors at a formal meeting.
- 5.5 Where committees are authorised to establish sub-committees they may not delegate their powers to the sub-committee unless expressly authorised by the Council of Governors.
- 5.6 Any committee or sub-committee established under this SO 6 may call upon outside advisers to assist them with their tasks, subject to the advance agreement of the Board of Directors. Any conflict arising between the Council of Governors and the Board of Directors under this paragraph shall be determined in accordance with the dispute resolution procedure set out at paragraph 2.3 of Appendix 4 of Annex 8 of the Constitution.
- 5.7 The Council of Governors shall approve the appointments to each of the committees which it has formally constituted.
- 5.8 Where the Council of Governors is required to appoint persons to a committee to undertake statutory functions, and where such appointments are to operate independently of the Council of Governors, such appointments shall be made in accordance with applicable statute and regulations and with guidance or best practice advice issued by [NHSE/NHS England](#).
- 5.9 Where the Council of Governors determines that persons who are neither Governors, nor Directors or Officers of the Trust, shall be appointed to a committee, the terms of such appointment shall be determined by the Council of Governors subject to the payment of travelling expenses and other allowances being in accordance with such sum as may be determined by the Board of Directors.
- 5.10 The Council of Governors may appoint Governors to serve on joint committees with the Board of Directors on the request of the Chair.

6 DECLARATIONS OF INTERESTS AND REGISTER OF INTERESTS

6.1 Declaration of interests

- 6.1.1 The Regulatory Framework requires each Governor to declare to the Secretary (before the Trust enters into the transaction or arrangement):
 - 6.1.1.1 any actual or potential interest, direct or indirect interest in a proposed transaction or arrangement with the Trust, as described in SO 7.2.1; and
 - 6.1.1.2 any actual or potential pecuniary interest, direct or indirect, in any contract, proposed contract or other matter concerning the Trust, as described in SOs 7.2.2 and 7.2.3; and
 - 6.1.1.3 any actual or potential family interest, direct or indirect, of which the Governor is aware, as described in SO 7.2.5.
- 6.1.2 Such a declaration shall be made either at the time of the Governor's election or appointment or as soon thereafter as the interest arises, and in a form prescribed by the Secretary as attached at Annex B to these SOs.
- 6.1.3 In addition, if a Governor is present at a meeting of the Council of Governors and has an interest of any sort in any matter which is the subject of consideration, ~~they~~^{he} shall at the meeting and as soon as practicable after its commencement disclose the fact and shall not vote on any question with respect to the matter.
- 6.1.4 If a declaration under paragraph 7.1.2 above proves to be, or becomes, inaccurate or incomplete, the Governor must make a further declaration before the Trust enters into the transaction or arrangement. This does not require a declaration of an interest of which the Governor is not aware or where the Governor is not aware of the transaction or arrangement in question.
- 6.1.5 A Governor need not declare an interest:
 - 7.1.5.1 if, it cannot reasonably be regarded as likely to give rise to a conflict of interest;
 - 6.1.5.2 if, or to the extent that, the Governors are already aware of it.
- 6.1.6 Subject to SO 7.2.4, if a Governor has declared a pecuniary interest (as described in SOs 7.2.2 and 7.2.3) ~~they~~^{he} shall not take part in the consideration or discussion of the matter. At the time the interests are declared, they should be recorded in the Governor's meeting minutes. Any changes in interests should be officially declared at the next relevant meeting following the change occurring.
- 6.1.7 This SO 7 applies to any committee, sub-committee or joint committee of the Council of Governors and applies to any member of any such committee, sub-committee, or joint committee (whether or not he is also a Governor).
- 6.1.8 The interests of Governors in companies likely or possibly seeking to do business with the Trust should be published in the Annual Report. The

information should be kept up to date for inclusion in succeeding Annual Reports.

6.2 Nature of interests

- 6.2.1 Interests which should be regarded as "relevant and material" are as follows and are to be interpreted in accordance with guidance issued by ~~NHSE~~NHS England:
- 6.2.1.1 directorships, including non-executive directorships held in private companies or public limited companies (with the exception of those of dormant companies); or
- 6.2.1.2 ownership, part-ownership or directorship of private companies, businesses or consultancies likely or possibly seeking to do business with the NHS or the Trust; or
- 6.2.1.3 significant or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS or the Trust; or
- 6.2.1.4 a position of authority in a charity or Voluntary Organisation in the field of health and social care; or
- 6.2.1.5 any connection with a voluntary or other organisation contracting for NHS or Trust services or commissioning NHS or services; or
- 6.2.1.6 any connection with an organisation, entity or company considering entering into or having entered into a financial agreement with the Trust, including but not limited to, lenders or banks.
- 6.2.2 A Governor shall be treated as having indirectly a pecuniary interest in a contract, proposed contract or other matter, if:
 - 6.2.2.1 ~~they~~he, or a nominee of ~~their~~his, is a director of a company or other body, not being a public body, with which the contract was made or is proposed to be made or which has a direct pecuniary interest in the other matter under consideration; or
 - 6.2.2.2 ~~they are~~he is a partner of, or is in the employment of, a person with whom the contract was made or is proposed to be made or who has a direct pecuniary interest in the other matter under consideration.
- 6.2.3 A Governor shall not be treated as having a pecuniary interest in any contract, proposed contract or other matter by reason only:
 - 6.2.3.1 of ~~their~~his membership of a company or other body, if ~~he has~~they have no beneficial interest in any securities of that company or other body; or
 - 6.2.3.2 of an interest in any company, body or person with which ~~he is~~they are connected which is so remote or insignificant that it cannot reasonably be regarded as likely to influence a Governor in the consideration or discussion of or in voting on, any question with respect to that contract or matter; or

- 6.2.3.3 of any travelling or other expenses or allowances payable to a Governor in accordance with the Constitution.
- 6.2.4 Where a Governor:
 - 6.2.4.1 has an indirect pecuniary interest in a contract, proposed contract or other matter by reason only of a beneficial interest in securities of a company or other body, and
 - 6.2.4.2 the total nominal value of those securities does not exceed £5,000 or one-hundredth of the total nominal value of the issued share capital of the company or body, whichever is the less, and
 - 6.2.4.3 if the share capital is of more than one class, the total nominal value of shares of any one class in which ~~he has~~they have a beneficial interest does not exceed one-hundredth of the total issued share capital of that class, the Governor shall not be prohibited from taking part in the consideration or discussion of the contract or other matter or from voting on any question with respect to it, without prejudice however to ~~his~~their duty to disclose ~~his~~their interest.
- 6.2.5 A family interest is an interest of an Immediate Family Member of a Governor which if it were the interest of that Governor would be a personal interest or a pecuniary interest of his.
- 6.2.6 If Governors have any doubt about the relevance or materiality of an interest, this should be discussed with the Secretary. Influence rather than the immediacy of the relationship is more important in assessing the relevance of an interest. The interests of partners in professional partnerships should also be considered.

6.3 Register of members of the Council of Governors

The register of members of the Council of Governors shall list the names of Governors, their category of membership of the Council of Governors and an address through which they may be contacted which may be the Secretary.

6.4 Register of interests of members of the Council of Governors

The Secretary shall keep a register of interests of members of the Council of Governors which shall contain the names of each Governor, whether he has declared any interest, and if so, the interest declared.

7 STANDARDS OF BUSINESS CONDUCT

Members of the Council of Governors shall comply with the Governors' Code of Conduct and any guidance or best practice advice issued by ~~NHSE~~NHS England.

8 APPOINTMENTS AND RECOMMENDATIONS

- 8.1 A Governor shall not solicit for any person any appointment under the Trust or recommend any person for such appointment but this paragraph of this SO shall not

preclude a Governor from giving written testimonial of a candidate's ability, experience or character for submission to the Trust in relation to any appointment.

- 8.2 Informal discussions outside nominations panels, appointments panels or committees, whether solicited or unsolicited, should be declared to the panel or committee in question.
- 8.3 Every Governor shall disclose to the Chief Executive or ~~his~~their delegated Officer any relationship between ~~himself~~themselves and a candidate of whose candidature that Governor or Officer is aware. It shall be the duty of the Chief Executive or ~~his~~their delegated Officer to report to the Council of Governors any such disclosure made.
- 8.4 On appointment, members of the Council of Governors should disclose to the Council of Governors whether they are related to any other member of the Council of Governors or holder of any office in the Trust.
- 8.5 Where the relationship to a member of the Council of Governors of the Trust is disclosed, SO 7 shall apply.

9 MISCELLANEOUS

- 9.1 The Secretary shall provide a copy of these SOs to each Governor and endeavour to ensure that each Governor understands ~~his~~their responsibilities within these SOs.
- 9.2 If for any reason these SOs are not complied with, full details of the non-compliance and any justification for non-compliance and the circumstances around the non-compliance, shall be reported to the next formal meeting of the Council of Governors for action or ratification. All Governors have a duty to disclose any non-compliance with these SOs to the Chair as soon as possible.

Annex A

Declaration to the Secretary of the Royal United Hospitals Bath NHS Foundation Trust

I hereby declare that I am at the date of this declaration a member of the [Public/Staff]² Constituency, and I am not prevented from being a member of the Council of Governors by reason of any provision of paragraph 8 of Schedule 7 to the 2006 Act or the Constitution.

Annex B

Prescribed Form of Declaration of Interests

Declaration to the Secretary of the Royal United Hospitals Bath NHS Foundation Trust

Date [insert]

To the Secretary of **the Royal United Hospitals Bath NHS Foundation Trust**

Dear [insert]

In fulfilment of the obligations imposed on me by paragraph 17 of the Constitution of the Trust and the provisions of Standing Order 7 of the Standing Orders for the Council of Governors generally, and in particular Standing Order 7.1.2, I hereby give notice to the Trust of my interest in [insert details of the nature and extent of the relevant interest(s) (e.g. pecuniary, non-pecuniary, direct, indirect, actual, potential, etc.)] as of the date posted above.

I require the nature and extent of my interest(s) to be recorded in the Trust's register of interests of the members of the Council of Governors.

Yours faithfully

[insert name]

²Please delete as appropriate.

ANNEX 7 – STANDING ORDERS FOR THE PRACTICE AND PROCEDURE OF THE BOARD OF DIRECTORS

(Paragraph 28)

10 INTRODUCTION

10.1 Statutory framework

- 10.1.1 The Trust became a Public Benefit Corporation on 1 November 2014.
- 10.1.2 The Trust's principal place of business is the Trust Headquarters.
- 10.1.3 The Trust is governed by the Regulatory Framework. The functions of the Trust are conferred by the Regulatory Framework. The Regulatory Framework and in particular paragraph 28 of the Constitution requires the Board of Directors to adopt SOs for the regulation of its proceedings and business.
- 10.1.4 As a Public Benefit Corporation, the Trust has specific powers to contract in its own name and to act as a corporate trustee. In the latter role it is accountable to the Charity Commission for those funds deemed to be charitable. The Trust also has a common law duty as a bailee for patients' property held by the Trust on behalf of patients.
- 10.1.5 The SOs, Scheme of Delegation and SFIs provide a comprehensive business framework for the administration of the Trust's affairs, and these need to be read in conjunction with the Regulatory Framework. All Directors and Nominated Officers should be aware of the existence of these documents and, where necessary, be familiar with the detailed provisions contained within them.
- 10.1.6 The Chair, Chief Executive or any other person giving information to the public on behalf of the Trust shall ensure that they follow the principles set out in the Directors' Code of Conduct.

10.2 Delegation of powers – Scheme of Delegation

- 10.2.1 Under SO 5 (Arrangements for the exercise of functions by delegation) the Board of Directors exercises its power to make arrangements for the exercise, on behalf of the Trust, of any of its functions by a committee of the Board of Directors appointed by virtue of SO 6 or by an Executive Director of the Trust, in each case subject to such restrictions and conditions as the Board of Directors thinks fit. Delegated powers are covered in the Scheme of Delegation.

11 INTERPRETATION

- 11.1 Save as otherwise permitted by law, at any meeting of the Board of Directors, the Chair of the Trust shall be the final authority on the interpretation of the SOs (on which he should be advised by the Chief Executive and Board of Directors' Secretary).

- 11.2 Unless a contrary intention is evident or the context requires otherwise, words or expressions contained in these SOs shall bear the same meaning as in the Constitution.
- 11.3 The provisions of paragraphs 1.2 to 1.6 of the Constitution apply to these SOs, save that any reference to "Constitution" shall be read as a reference to these "SOs".

12 THE BOARD OF DIRECTORS

- 12.1 All business shall be conducted in the name of the Trust.
- 12.2 All funds received in trust shall be in the name of the Trust as corporate trustee. Directors acting on behalf of the Trust as corporate trustees are acting as quasi-trustees.
- 12.3 In relation to Funds held on Trust, powers exercised by the Trust as corporate trustee shall be exercised separately and distinctly from those powers exercised as the Trust. Accountability for charitable Funds held on Trust is to the Charity Commission.
- 12.4 The Trust has the functions conferred on it by the Regulatory Framework.
- 12.5 The powers of the Trust shall be exercised by the Board of Directors meeting either in public or private session except as otherwise provided for in SO 4.1.
- 12.6 The Trust has resolved that certain powers and decisions may only be exercised or made by the Board of Directors. These powers and decisions are set out in the Scheme of Delegation.
- 12.7 The Board of Directors (in consultation with the Council of Governors) may appoint any Non-Executive Director as the "senior independent director" (as defined in the NHS Foundation Trust Code of Governance), for such period not exceeding the remainder of ~~his/her~~their term as a Non-Executive Director, as they may specify on appointing ~~him/her~~them.
- 12.8 Any Non-Executive Director appointed under SO 3.7 may at any time resign from the office of "senior independent director" by giving notice in writing to the Chair. The Board of Directors (in consultation with the Council of Governors) may thereupon appoint another Non-Executive Director as "senior independent director" in accordance with the provisions in SO 3.7.

13 MEETINGS OF THE BOARD OF DIRECTORS

13.1 Admission of the public and the press

- 13.1.1 Meetings of the Board of Directors shall be held in public, unless the Board of Directors determines that any part of a meeting of the Board of Directors shall be held in private in accordance with paragraph ~~2830~~2830A.1 of the Constitution.
- 13.1.2 Where a meeting of the Board of Directors is held in public, the public and representatives of the press shall be afforded facilities to attend such meeting of the Board of Directors but shall be required to withdraw upon the Board of Directors resolving as follows:

“...that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity of which would be prejudicial to the public interest”.

- 13.1.3 The Chair shall give such directions as ~~he/she~~they thinks fit (including a decision to expel or exclude any member of the public and/or press if the individual in question is interfering with or preventing the proper conduct of the meeting) in regard to the arrangements for meetings of the Board of Directors and (where relevant) accommodation of the public and representatives of the press such as to ensure that the Board of Directors' business shall be conducted without interruption or disruption and, without prejudice to the power to exclude the public and representatives of the press under SO 4.1.2 above, members of the public and representatives of the press) will be required to withdraw upon the Board of Directors resolving as follows:

“...that in the interests of public order the meeting adjourn for [the period to be specified] to enable the Board of Directors to complete business without the presence of the public or press.”

- 13.1.4 Nothing in these SOs shall require the Board of Directors to allow members of the public or representative of the press to record proceedings in any manner whatsoever, other than writing, or to make any oral report of proceedings as they take place without the prior agreement of the Chair.
- 13.1.5 Matters to be dealt with by the Board of Directors following the exclusion of the public and representatives of the press under SOs 4.1.2 or 4.1.3 above shall be confidential to the Directors. Members of the Board of Directors, Nominated Officers, Officers and/or others in attendance at the request of the Chair shall not reveal or disclose the content of papers or reports presented, or any discussion on these generally, which take place while the public and press are excluded, without the express permission of the Chair.
- 13.1.6 The Directors will decide what arrangements and terms and conditions it feels are appropriate to offer in extending an invitation to observers, advisors and others to attend and address any meeting of the Board of Directors, and may change, alter or vary these terms and conditions as it deems fit.

13.2 Calling meetings

- 13.2.1 Subject to SO 4.2.2 below, meetings of the Board of Directors shall be held at such times and places as the Board of Directors may, in its absolute discretion, determine.
- 13.2.2 The Chair may call a meeting of the Board of Directors at any time. If the Chair refuses to call a meeting after a requisition for that purpose, signed by at least one-third of the whole number of members of the Board of the Directors and specifying the business to be transacted at the meeting, and this has been presented to ~~him/her~~them, or if, without so refusing,

the Chair does not call a meeting within 7 Clear Days after such requisition has been presented to [him/her/them](#), at the Trust's Headquarters, such one-third or more members of the Board of Directors may forthwith call a meeting for the purpose of conducting that business.

13.3 Notice of meetings

- 13.3.1 Before each meeting of the Board of Directors, a notice of the meeting, specifying the business proposed to be transacted at it, and signed by the Chair, or by an Officer of the Trust authorised by the Chair to sign on [his/her/their](#) behalf, shall be delivered to every Director, or sent by post to the usual place of residence of every Director or sent electronically so as to be available to [him/her/them](#) at least 5 Clear Days before the meeting, save in the case of emergencies as set out in SO 4.3.5 below.
- 13.3.2 Before a public meeting of the Board of Directors, a public notice of the time and place of the meeting, and the public part of the agenda, shall be displayed at the Trust's Headquarters and shall be advertised on the Trust's website at least 5 Clear Days before the meeting, save in the case of emergencies.
- 13.3.3 Want of service of the notice on any one member of the Board of Directors shall not affect the validity of a meeting but failure to serve such a notice on more than three Directors will invalidate the meeting. A notice of the meeting shall be presumed to have been served one day after posting or, in the case of a notice sent electronically, on the date of transmission.
- 13.3.4 In the case of a meeting called by the Directors in default of the Chair in accordance with SO 4.2.2 above, the notice shall be signed by those Directors and no business shall be transacted at the meeting other than that specified in the requisition.
- 13.3.5 In the event of an emergency giving rise to the need for an immediate meeting, failure to comply with the notice periods referred to in SO 4.3.1 and (where relevant) SO 4.3.2 above shall not prevent the calling of, or invalidate, such a meeting provided that every effort is made to make personal contact with every Director who is not absent from the United Kingdom and the agenda for the meeting is restricted to matters arising in that emergency.

13.4 Agendas and supporting papers

- 13.4.1 Agendas will be sent to members of the Board of Directors 5 Clear Days before the meeting and supporting papers (including the minutes of the previous meeting of the Board of Directors), whenever possible, shall accompany the agenda, but will certainly be dispatched no later than 3 Clear Days before the meeting, save in an emergency giving rise to the need for an immediate meeting of the Board of Directors, as set out in SO 4.3.5 above. Failure to serve the agenda and (where relevant) supporting papers on more than three members of the Board of Directors will invalidate the meeting. The agenda and supporting papers shall be

presumed to have been served one day after posting or, in the case of a notice being sent electronically, on the date of transmission.

- 13.4.2 Before holding a meeting of the Board of Directors, the Board of Directors must send a copy of the agenda of the meeting to the Council of Governors.

13.5 Setting the agenda

- 13.5.1 The Board of Directors may determine that certain matters shall appear on every agenda for a meeting of the Board of Directors and shall be addressed prior to any other business being conducted ("Standing Items").
- 13.5.2 A Director desiring a matter to be included on an agenda, other than a Standing Item or a motion under SO 4.10 (emergency motions and written motions) below, including a formal proposition for discussion and voting on at a meeting of the Board of Directors, shall make his/her/their request in writing to the Chair at least 10 Clear Days before the meeting. Requests made less than 10 Clear Days before a meeting may be included on the agenda at the discretion of the Chair.
- 13.5.3 No business may be transacted at any meeting of the Board of Directors which is not specified in the notice of that meeting unless the Chair, in his/her/their absolute discretion, agrees that the item and (where relevant) any supporting papers should be considered by the Board of Directors as a matter of urgency. A decision by the Chair to permit consideration of the item in question and (where relevant) the supporting papers shall be recorded in the minutes of that meeting.

13.6 Petitions

Where a petition has been received by the Trust, the Chair shall include the petition as an item for the agenda of the next meeting of the Board of Directors.

13.7 Chair of meeting

- 13.7.1 At any meeting of the Board of Directors, the Chair, if present, shall preside. If the Chair is absent from the meeting the Vice Chair, if there is one and he/she-isthey are present, shall preside. If the Chair and Vice Chair are absent such Non-Executive Director as the members of the Board of Directors present shall choose, shall preside.
- 13.7.2 If the Chair is absent temporarily on the grounds of a declared conflict of interest, the Vice Chair, if present, shall preside. If the Chair and Vice Chair are absent, or are disqualified from participating, such Non-Executive Director as the members of the Board of Directors present shall choose shall preside.
- 13.7.3 If any matter for consideration at a meeting of the Board of Directors relates to the interests of the Chair or the Non-Executive Directors as a class, neither the Chair nor any of the Non-Executive Directors shall preside over the period of the meeting during which the matter is under

discussion. The Directors (excluding the Chair and the Non-Executive Directors) shall elect one of the number to preside during that period and that person shall exercise all the rights and obligations of the Chair, including (for the avoidance of doubt) the right to exercise a casting vote where the numbers of votes for and against a motion is equal.

13.8 Chair's ruling

Statements of Directors made at meetings of the Board of Directors shall be relevant to the matter under discussion at the material time and subject to SO 2.1, the decision of the Chair of the meeting on questions of order, relevancy, regularity and any other matters shall be final.

13.9 Notices of motion

13.9.1 Notwithstanding the provisions of SO 4.5 above, and subject to the provisions of SO 4.11 (Motions: procedure at and during a meeting) and SO 4.12 (Motion to rescind a resolution) below, a member of the Board of Directors wishing to move or amend a motion shall send a written notice to the Chair.

13.9.2 The notice shall be delivered at least 14 Clear Days before the meeting. The Chair shall include in the agenda for the meeting all notices so received that are in order and permissible under these SOs. Subject to SO 4.3.4, this SO shall not prevent any motion being moved without notice on any business mentioned on the agenda for the meeting.

13.10 Emergency motions and written motions

13.10.1 Emergency motions

13.10.1.1 Subject to the agreement of the Chair, and subject also to the provisions of SO 4.11 (Motions: procedure at and during a meeting), a member of the Board of Directors may give the Chair written notice of an emergency motion after the issue of the notice of meeting and agenda, up to one hour before the time fixed for the meeting. The notice shall state the grounds of urgency. If in order, it shall be declared by the Chair to the Board of Directors at the commencement of the business of the meeting as an additional item included in the agenda. The Chair's decision to include the item shall be final.

13.10.2 Written motions

13.10.2.1 In urgent situations and with the consent of the Chair, business may be effected by a Director's written motion to deal with business otherwise required to be conducted at a meeting of the Board of Directors.

13.10.2.2 If all members of the Board of Directors have been notified of the proposal and three-quarters of Directors entitled to attend and vote at a meeting of the Board of Directors confirms acceptance of the written motion either in writing or electronically to the Board of Directors' Secretary within 5 Clear Days of dispatch then the motion will be deemed

to have been resolved notwithstanding that the Directors have not gathered in one place.

- 13.10.2.3 The effective date of the resolution shall be the date that the last confirmation is received by the Board of Directors' Secretary and, until that date a Director who has previously indicated acceptance can withdraw and the motion shall fail.
- 13.10.2.4 Once the resolution is passed, a copy certified by the Board of Directors' Secretary shall be recorded in the minutes of the next ensuing meeting where it shall be signed by the person presiding at it.

13.11 Motions: procedure at and during a meeting

13.11.1 Who may propose

A motion properly notified under SO 4.9 above may be proposed by the Chair of the meeting or any other member of the Board of Directors present at the meeting. All motions so proposed must be seconded by another member of the Board of Directors.

13.11.2 Contents of motions

- 13.11.2.1 The Chair may exclude from the debate at ~~his/her~~their sole discretion any motion of which notice was not given on the notice summoning the meeting other than a motion relating to:
 - 13.11.2.1.1 the reception of a report;
 - 13.11.2.1.2 consideration of any item of business before the Board of Directors;
 - 13.11.2.1.3 the accuracy of minutes;
 - 13.11.2.1.4 that the Board of Directors proceed to the next item of business on the agenda;
 - 13.11.2.1.5 that the Board of Directors adjourn the discussion or the meeting; or
 - 13.11.2.1.6 that the question be now put.

13.11.3 Amendments to motions

- 13.11.3.1 A motion for amendment shall not be discussed unless it has been proposed and seconded.
- 13.11.3.2 Amendments to motions shall be moved relevant to the motion and shall not have the effect of negating the motion before the Board of Directors.
- 13.11.3.3 If there are a number of amendments proposed and seconded to a motion, they shall be considered one at a time. When a motion has been amended, the amended motion shall become the substantive motion before the meeting, upon which any further amendment may be moved.

13.11.4 Rights of reply to motions

13.11.4.1 Amendments

The mover of an amendment may reply to the debate on their amendment immediately prior to the mover of the original motion, who shall have the right of reply at the close of debate on the amendment, but may not otherwise speak on it.

13.11.4.2 Substantive/original motion

The mover who proposed the substantive motion shall have a right of reply at the close of any debate on the motion.

13.11.5 Withdrawing a motion

A motion, or an amendment to a motion, once moved and seconded may be withdrawn by the proposer with the concurrence of the seconder and the consent of the Chair.

13.11.6 Motions once under debate

13.11.6.1 When a motion is under debate, no motion may be moved other than:

13.11.6.1.1 an amendment to the motion; or

13.11.6.1.2 the adjournment of the discussion, or the meeting; or

13.11.6.1.3 that the meeting proceed to the next item of business on the agenda; or

13.11.6.1.4 the appointment of an ad hoc committee to deal with a specific item of business; or

13.11.6.1.5 that the motion be now put; or

13.11.6.1.6 (where relevant), a motion under SO 4.1 above resolving to exclude the public (including the press); or

13.11.6.1.7 that a member of the Board of Directors be not further heard.

In the case of motions under SO 4.11.6.1.3 (proceed to next business) or 4.11.6.1.5 (motion be now put), in the interests of objectivity these motions should only be put forward by a member of the Board of Directors who has not previously taken part in the debate and who is eligible to vote.

13.11.6.2 If a motion to proceed to the next business or that the question be now put, is carried, the Chair should give the mover of the substantive motion under debate a right of reply, if not already exercised. The matter should then be put to the vote.

13.12 Motion to rescind a resolution

- 13.12.1 Notice of motion to rescind any resolution (or the general substance of any resolution) which has been passed within the preceding 6 calendar months shall bear the signature of the member of the Board of Directors who gives it and also the signature of four other members of the Board of Directors, and before considering any such motion of which notice shall have been given, the Board of Directors may refer the matter to an appropriate committee of the Board of Directors or the Chief Executive for recommendation.
- 13.12.2 When any such motion has been dealt with by the Board of Directors, it shall not be competent for any member of the Board of Directors other than the Chair to propose a motion to the same effect within 6 calendar months; however, the Chair may do so if he/she/they considers it appropriate. This SO shall not apply to motions moved in pursuance of a report or recommendations of a committee of the Board of Directors or the Chief Executive.

13.13 Voting

- 13.13.1 Subject to SO 4.15 (Suspension of Standing Orders), or as otherwise provided by the SOs, every question at a meeting shall be determined by a three-quarters majority of the votes of the Directors present and voting on the question and, in the case of the number of votes for and against a motion being equal, the Chair shall have a casting vote.
- 13.13.2 All questions put to the vote shall, at the discretion of the Chair, be determined by a show of hands or by appropriate electronic means. A paper ballot may also be used if a majority of the Directors present so request.
- 13.13.3 If at least one-third of the members of the Board of Directors present so request, the voting (other than by paper ballot), on any question may be recorded to show how each Director present voted or abstained.
- 13.13.4 If a Director so requests, his/her/their vote shall be recorded by name upon any vote (other than by paper ballot).
- 13.13.5 In no circumstances may:
 - 13.13.5.1 an absent Director vote by proxy (absence is defined as being absent at the time of the vote); or
 - 13.13.5.2 a resolution be passed if it is opposed by all of the Non-Executive Directors present and voting, or by all of the Executive Directors present and voting at a meeting of the Board of Directors.
- 13.13.6 An Officer who has been appointed formally by the Board of Directors to act up for an Executive Director during a period of incapacity or temporarily to fill an Executive Director vacancy, shall be entitled to exercise the voting rights of the Executive Director. An Officer attending the Board of Directors to represent an Executive Director during a period

of incapacity or temporary absence without formal acting up status may not exercise the voting rights of the Executive Director. An Officer's status when attending a meeting shall be recorded in the minutes.

13.14 Minutes

- 13.14.1 The minutes of the proceedings of a meeting of the Board of Directors shall be drawn up by the Board of Directors' Secretary and submitted for agreement at the next ensuing meeting, where they will be signed by the person presiding at it.
- 13.14.2 No discussion shall take place upon the minutes except upon their accuracy or where the Chair considers discussion appropriate.
- 13.14.3 Any amendment to the minutes shall be agreed and recorded at the next meeting.
- 13.14.4 Minutes of the meetings of the Board of Directors shall be retained in the Chief Executive's office.
- 13.14.5 Subject to paragraph ~~2830~~A.2 of the Constitution, minutes of the Board of Directors' meeting shall be circulated in accordance with Directors' wishes.
- 13.14.6 The minutes of the meetings of the Board of Directors shall be made available to the public, save for items discussed by the Directors following the exclusion of the public and representatives of the press under SO 4.1.2 and 4.1.3.
- 13.14.7 As soon as practicable after holding a meeting of the Board of Directors, the Board of Directors must send a copy of the minutes of the meeting to the Council of Governors.

13.15 Suspension of Standing Orders

- 13.15.1 Except where this would contravene any provision of the Regulatory Framework or any guidance or best practice advice issued by NHS ~~England~~, any one or more of the SOs may be suspended at any meeting, provided that at least three-quarters of the Directors are present, including one Executive Director and one Non-Executive Director, and that a three-quarters majority of those present vote in favour of suspension.
- 13.15.2 A decision to suspend the SOs shall be recorded in the minutes of the meeting.
- 13.15.3 A separate record of matters discussed during the suspension of SOs shall be made and shall be available to the Directors.
- 13.15.4 No formal business may be transacted while the SOs are suspended.
- 13.15.5 The Audit Committee shall review every decision to suspend the SOs.



13.16 Record of attendance and apologies

- 13.16.1 The names of the Directors present at the meeting shall be recorded in the minutes, together with the names of any Nominated Officers, Officers and others invited by the Chair to be in attendance, save for members of the public or representatives of the press.
- 13.16.2 Directors who are unable to attend a meeting of the Board of Directors shall notify the Board of Directors' Secretary in writing in advance of the meeting in question so that their apologies may be submitted.

13.17 Quorum

- 13.17.1 No business shall be transacted at a meeting of the Board of Directors unless at least one-third of the whole number of the voting Directors are present, including the Chief Executive or Deputy Chief Executive and the Chair or Vice Chair.
- 13.17.2 An Officer in attendance for an Executive Director but without formal acting up status as described in SO 4.13.6 above may not count towards the quorum.
- 13.17.3 If a Director has been disqualified from participating in the discussion on any matter and/or from voting on any resolution by reason of the declaration of a conflict of interest as provided in SO 8 below ~~he~~they shall no longer count towards the quorum. If a quorum is then not available for the discussion and/or the passing of a resolution on any matter, that matter may not be discussed further or voted upon at that meeting. Such a position shall be recorded in the minutes of the meeting. The meeting must then proceed to the next business. The above requirement for either the Chief Executive or Deputy Chief Executive to form part of the quorum shall not apply where the Executive Directors are excluded from a meeting (for example when the Board of Directors considers the recommendations of the Remuneration Committee established under SO 6.1.7.2 below).

13.18 Meetings: Electronic Communication

- 13.18.1 A Director in Electronic Communication with the Chair and all other parties to a meeting of the Board of Directors or of a committee or sub-committee of the Directors shall be regarded for all purposes as personally attending such a meeting provided that, but only for so long as, at such a meeting ~~he~~they have the ability to communicate interactively and simultaneously with all other parties attending the meeting including all persons attending by way of Electronic Communication.
- 13.18.2 A meeting at which one or more of the Directors attends by way of Electronic Communication is deemed to be held at such a place as the Directors shall at the said meeting resolve. In the absence of such a resolution, the meeting shall be deemed to be held at the place (if any) where a majority of the Directors attending the meeting are physically

present, or in default of such a majority, the place at which the Chair of the meeting is physically present.

- 13.18.3 Meetings held in accordance with this SO are subject to SO 4.18 (Quorum). For such a meeting to be valid, a quorum must be present and maintained throughout the meeting.
- 13.18.4 The minutes of a meeting held in this way must state that it was held by Electronic Communication and that the Directors were all able to hear each other and were present throughout the meeting.

13.19 Adjournment of meetings

- 13.19.1 The Board of Directors may, by resolution, adjourn any meeting to some other specified date, place and time and such adjourned meeting shall be deemed a continuation of the original meeting.
- 13.19.2 No business shall be transacted at any adjourned meeting which was not included in the agenda of the meeting of which it is an adjournment.
- 13.19.3 When any meeting is adjourned to another day, other than the following day, notice of the adjourned meeting shall be sent to each Director specifying the business to be transacted and the date, time and place of the adjournment.

13.20 Reports from the Executive Directors

At any meeting of the Board of Directors a Director may ask any question through the Chair without notice on any report by an Executive Director, or other Officer of the Trust, after that report has been received by or while such report is under consideration by the Board of Directors at the meeting. The Chair may, in his/her/their absolute discretion, reject any question from any Director if, in his/her/their opinion, the question is substantially the same and relates to the same subject matter as a question which has already been put to that meeting or a previous meeting.

14 ARRANGEMENTS FOR THE EXERCISE OF FUNCTIONS BY DELEGATION

- 14.1 Subject to SO 3.6, the Regulatory Framework and such guidance or best practice advice as may be issued by NHS England, the Board of Directors may make arrangements for the exercise of any of its functions by a committee or sub-committee appointed by virtue of SO 5.3 below or by an Executive Director subject to such restrictions and conditions as the Board of Directors considers appropriate.

14.2 Emergency powers

The powers which the Board of Directors has retained to itself within these SOs or the Scheme of Delegation may in emergency or for an urgent decision be exercised by the Chief Executive and the Chair after having consulted at least two Non-Executive Directors. The exercise of such powers by the Chief Executive and the Chair shall be reported to the next formal meeting of the Board of Directors for ratification.

14.3 Delegation to committees

The Board of Directors shall agree from time to time to the delegation of powers to be exercised by committees of the Board of Directors, which it has formally constituted. The constitution and terms of reference of these committees and their specific powers shall be approved by the Board of Directors.

14.4 Delegation to Nominated Officers

- 14.4.1 Those functions of the Trust which have not been retained as reserved by the Board of Directors or delegated to a committee of the Board of Directors shall be exercised on behalf of the Board of Directors by the Chief Executive. The Chief Executive shall determine which functions ~~he~~ they will perform personally and shall nominate Officers to undertake the remaining functions for which ~~he~~ they will still retain accountability to the Board of Directors.
- 14.4.2 The Chief Executive shall prepare a Scheme of Delegation identifying ~~his/her~~ their proposals, which shall be considered and approved by the Board of Directors, subject to any amendment agreed during the discussion. The Chief Executive may periodically propose amendment to the Scheme of Delegation, which shall be considered and approved by the Board of Directors as indicated above.
- 14.4.3 Nothing in the Scheme of Delegation shall impair the discharge of the direct accountability to the Board of Directors of the ~~Finance Director~~ Chief Finance Officer or other Executive Director to provide information and advise the Board of Directors in accordance with any statutory requirements.
- 14.4.4 The arrangements made by the Board of Directors as set out in the Scheme of Delegation shall have effect as if incorporated in these SOs, but for the avoidance of doubt, the Scheme of Delegation does not form part of the Constitution.

14.5 Duty to report non-compliance with Standing Orders

If for any reason these SOs are not complied with, full details of the non-compliance and any justification for non-compliance and the circumstances around the non-compliance, shall be reported to the next formal meeting of the Board of Directors for action or ratification. All members of the Board of Directors and all Officers (including Nominated Officers) have a duty to disclose any non-compliance with these SOs to the Board of Directors' Secretary as soon as possible.

15 COMMITTEES

15.1 Appointment of committees

- 15.1.1 Subject to SO 3.6, the Regulatory Framework and such guidance or best practice advice issued by NHS England, the Board of Directors may and, if directed by NHS England, shall appoint committees of the Board of Directors consisting wholly or partly of Directors.
- 15.1.2 A committee appointed under SO 6.1.1 may, subject to the Regulatory Framework and such guidance and/or best practice advice as may be

issued by ~~NHSEI-NHS England~~ or the Board of Directors, appoint sub-committees consisting wholly or partly of Directors.

- 15.1.3 The SOs, as far as they are applicable, shall apply with appropriate alteration to meetings of any committees (and any sub-committees or joint committees appointed under SO 6.1.2) established by the Board of Directors, in which case the term "Chair" is to be read as a reference to the Chair of the committee (or sub-committee or joint committee) as the context permits, and the term "member" is to be read as a reference to a member of the committee (or sub-committee or joint committee) also as the context permits.
- 15.1.4 Each such committee, sub-committee or joint committee shall have such terms of reference and powers and be subject to such conditions (as to reporting back to the Board of Directors), as the Board of Directors shall decide in accordance with any legislation, and/or regulations and/or such guidance or best practice advice issued by NHS England. Such terms of reference shall have effect as if incorporated into the SOs, but for the avoidance of doubt, these terms of reference do not form part of the Constitution.
- 15.1.5 Where committees are authorised to establish sub-committees they may not delegate powers to the sub-committee unless expressly authorised by the Board of Directors.
- 15.1.6 The Board of Directors shall approve the appointments to each of the committees, which it has formally constituted. Where the Board of Directors determines, and the Regulatory Framework permits, that persons, who are neither Directors nor Officers, shall be appointed to a committee the terms of such appointment shall be within the powers of the Board of Directors as defined by the Regulatory Framework. The Board of Directors shall define the powers of such appointees and shall agree allowances, including reimbursement for loss of earnings, and/or expenses.
- 15.1.7 The committees established by the Board of Directors are:
 - 15.1.7.1 Audit and Risk Committee;
 - 15.1.7.2 Nominations and Remuneration Committee;
 - 15.1.7.3 Quality ~~Governance Assurance~~ Committee;
 - 15.1.7.4 Non-Clinical Governance Committee;
 - 15.1.7.5 Charities Committee;
 - 15.1.7.6 People Committee;
 - 15.1.7.7 ~~Trust Management Board~~Executive; Management Executive Committee
 - 15.1.7.8 Finance and Performance Committee

- 15.1.7.9 Commercial Transactions Steering Group; and
- 15.1.7.10 Subsidiary Oversight Committee
- 15.1.8 The Constitution and terms of reference of the committees listed in SOs 6.1.7 above shall be agreed by the Board of Directors.
- 15.1.9 Notwithstanding the provisions of SO 6.1.7 above, the Board of Directors may establish other committees, sub-committees and joint committees, including ad hoc committees, sub-committees and joint committees from time to time at its discretion.

15.2 Joint Committees

15.2.1 Joint committees may be ~~established~~ established by the Trust, by joining together ————— with one or more other trusts, consisting of wholly or partly of the Chair ————— and Directors of the Trust or other health service bodies, or of Directors of the Trust with non-directors of other health bodies in question.

15.2.2 Any Committee-in-Common or Joint Committee established under standing orders may, subject to such directions or guidance as may be given by NHS England or the Trust or any other health bodies in question, appoint sub-committees consisting wholly or partly of directors sitting on the Committee or Joint Committee (whether or not they are directors of the other health bodies in question) or wholly of persons who are not directors of the other health bodies in question provided that the Trust is always represented by an Executive Director (or deputy nominated by the Executive Director) on such Committees, Joint Committees or sub committees.

15.2.15.3 Confidentiality

~~15.2.1~~15.3.1 A member of a committee (including sub-committees or joint committees) shall not disclose any matter dealt with, by, or brought before, the committee, sub-committee or joint committee without its permission until the committee, sub-committee or joint committee (as appropriate) shall have reported to the Board of Directors or shall otherwise have concluded on that matter.

~~15.2.2~~15.3.2 A Director or a member of a committee, sub-committee or joint committee shall not disclose any matter reported to the Board of Directors or otherwise dealt with by the committee, sub-committee or joint committee, notwithstanding that the matter has been reported or action has been concluded, if the Board of Directors or committee, sub-committee or joint committee resolve that it is confidential.

16 INTERFACE BETWEEN THE BOARD OF DIRECTORS AND THE COUNCIL OF GOVERNORS

- 16.1 The Board of Directors will cooperate with the Council of Governors as far as possible in order to comply with the Regulatory Framework in all respects and in particular in relation to the following matters which are set out specifically within the Constitution:

- 16.1.1 The Directors, having regard to the views of the Council of Governors, are to prepare the Forward Plan in respect of each Financial Year to be given to NHS England;
- 16.1.2 The Directors are to present to the Council of Governors at a general meeting of the Council of Governors the Annual Accounts, any report of the Auditor on them, and the Annual Report.
- 16.2 The Annual Report is to give:
 - 16.2.1 information on any steps taken by the Trust to secure that (taken as a whole) the actual membership of its Public Constituency is representative of those eligible for such membership; and
 - 16.2.2 any other information which NHS England requires.
- 16.3 In order to comply with the Regulatory Framework in all respects and in particular in relation to the matters which are set out in SOs 7.1 and 7.2 above, the Council of Governors may request that a matter which relates to paragraphs 357 and 368 of the Constitution is included on the agenda for a meeting of the Board of Directors.
- 16.4 If the Council of Governors so desires such a matter as described within SO 7.3 above to be included on an agenda item, they shall make their request in writing to the Chair at least 15 Clear Days before the meeting of the Board of Directors, subject to SO 4.3. The Chair shall decide whether the matter is appropriate to be included on the agenda. Requests made less than 15 Clear Days before a meeting may be included on the agenda at the discretion of the Chair.

17 DECLARATIONS OF INTERESTS AND REGISTER OF INTERESTS OF THE MEMBERS OF THE BOARD OF DIRECTORS

- 17.1 The Constitution requires members of the Board of Directors to declare (before the Trust enters into the transaction or arrangement):
 - 17.1.1 any direct or indirect interest in a proposed transaction or arrangement with the Trust; and
 - 17.1.1.1 any actual or potential pecuniary interest, direct or indirect, in any contract, proposed contract or other matter concerning the Trust; and
 - 17.1.1.2 any actual or potential family interest, direct or indirect, of which the Director is aware.
- 17.2 All members of the Board of Directors must declare such interests as soon as the Director in question becomes aware of it. Any members of the Board of Directors appointed subsequently to the date of the Authorisation must do so on appointment.
- 17.3 Such a declaration shall be made by completing and signing a form, as prescribed by the Board of Directors' Secretary from time to time, setting out any interests required to be declared outside a meeting in accordance with the Constitution or the SOs and delivering it to the Board of Directors' Secretary on appointment or as soon as is practicable thereafter as the interest arises.

- 17.4 If a declaration under SOs 8.1 or 8.2 above proves to be, or becomes, inaccurate or incomplete, the Director must make a further declaration before the Trust enters into the transaction or arrangement. This does not require a declaration of an interest of which the Director is not aware or where the Director is not aware of the transaction or arrangement in question.
- 17.5 A Director need not declare an interest:
- 8.5.1 if, it cannot reasonably be regarded as likely to give rise to a conflict of interest;
 - 8.5.2 if, or to the extent that, the Directors are already aware of it;
 - 8.5.3 if, or to the extent that, it concerns terms of the Director's appointment that have been or are to be considered by:
 - 8.5.3.1 a meeting of the Board of Directors: or
 - 8.5.3.2 by a committee of the Directors appointed for the purpose.
- 17.6 In addition, if a Director is present at a meeting of the Board of Directors and has an interest of any sort in any matter which is the subject of consideration, ~~he~~they must at the meeting and as soon as practicable after its commencement disclose the fact and ~~he~~they must then withdraw from the meeting and play no part in the relevant discussion and ~~he~~they shall not vote on any question with respect to the matter.
- 17.7 If a Director has declared a pecuniary interest in accordance with SO 8.8 below ~~he~~they shall not take part in the consideration or discussion of the matter in respect of which an interest has been disclosed and shall be excluded from the meeting whilst that matter is under consideration. At the time the interests are declared, they should be recorded in the Director's meeting minutes. Any changes in interests should be officially declared at the next relevant meeting following the change occurring.
- 17.8 Subject to any guidance or best practice advice issued by NHS England~~!~~, interests which should be regarded as "relevant and material" for the purposes of these SOs are:
- 17.8.1 Directorships, including non-executive directorships held in private companies or public listed companies (with the exception of those of dormant companies);
 - 17.8.2 Ownership or part-ownership of private companies, businesses or consultancies likely or possibly seeking to do business with the NHS or the Trust;
 - 17.8.3 majority or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS or the Trust;
 - 17.8.4 a position of authority in a charity or voluntary organisation in the field of health and social care;
 - 17.8.5 any connection with a voluntary or other organisation contracting for NHS or Trust services or commissioning NHS or Trust services;

- 17.8.6 any connection with an organisation, entity or company considering entering into or having entered into a financial agreement with the Trust, including but not limited to, lenders or banks;
 - 17.8.7 research funding or grants that may be received by an individual or their department; and
 - 17.8.8 interests in pooled funds that are under separate management.
- 17.9 Members of the Board of Directors who hold directorships in companies likely or possibly seeking to do business with the NHS or the Trust should be published in the Annual Report. The information should be kept up to date for inclusion in succeeding Annual Reports.
- 17.10 A Director shall be treated as having indirectly a pecuniary interest in a contract, proposed contract or other matter, if:
- 17.10.1 ~~He/she~~They, or a nominee of ~~his/her~~theirs, is a director of a company or other body, not being a public body, with which the contract was made or is proposed to be made or which has a direct pecuniary interest in the other matter under consideration; or
 - 17.10.2 ~~He/she is~~they are a partner or associate of, or is in the employment of, a person with whom the contract was made or is proposed to be made or who has a direct pecuniary interest in the other matter under consideration.
- 17.11 A Director shall not be treated as having a pecuniary interest in any contract, proposed contract or other matter by reason only:
- 17.11.1 of ~~his/her~~their membership of a company or other body, if ~~he/she~~they have no beneficial interest in any securities of that company or other body; or
 - 17.11.2 of an interest in any company, body or person with which ~~he/she is~~they are connected which is so remote or insignificant that it cannot reasonably be regarded as likely to influence a Director in the consideration or discussion of or in voting on, any question with respect to that contract or matter.
- 17.12 Where a Director:
- 17.12.1 has an indirect pecuniary interest in a contract, proposed contract or other matter by reason only of a beneficial interest in securities of a company or other body, and
 - 17.12.2 the total nominal value of those securities does not exceed £5,000 or one-hundredth of the total nominal value of the issued share capital of the company or body, whichever is the less, and
 - 17.12.3 if the share capital is of more than one class, the total nominal value of shares of any one class in which ~~he~~they have a beneficial interest

does not exceed one-hundredth of the total issued share capital of that class,

the Director shall not be prohibited from taking part in the consideration or discussion of the contract or other matter or from voting on any question with respect to it, without prejudice however to his/her/their duty to disclose his/her/their interest in accordance with the Constitution and these SOs.

17.13 In the case of Immediate Family Members, the interest of one Immediate Family Member shall, if known to the other, be deemed for the purposes of the Constitution and these SOs to be also an interest of the other.

17.14 If Directors have any doubt about the relevance or materiality of an interest, this should be discussed with the Board of Directors' Secretary. Influence rather than the immediacy of the relationship is more important in assessing the relevance of an interest. The interests of partners in professional partnerships should also be considered.

17.15 Any remuneration, compensation or allowances payable to a Director by virtue of paragraph 18 to Schedule 7 of the 2006 Act shall not be treated as a pecuniary interest for the purpose of this SO.

17.16 SO 8 applies to any committee, sub-committee or joint committee of the Board of Directors and applies to any member of any such committee, sub-committee or joint committee (whether or not he is they are also a Director).

17.17 Register of interests of the members of the Board of Directors

17.17.1 The register of interests of members of the Board of Directors shall contain the names of each Director, whether he/she has they have declared any interests and, if so, the interests declared in accordance with the Constitution or these SOs.

17.17.2 In accordance with SO 8.3 above, it is the obligation of the Director to inform the Board of Directors' Secretary in writing as soon as is practicable of becoming aware of the existence of a relevant or material interest. The Board of Directors' Secretary must then amend the register of interests of members of the Board of Directors upon receipt of new or amended information as soon as is practical and, in any event, within 14 days of receipt.

17.17.3 The register of interests of members of the Board of Directors will be available to the public in accordance with paragraph 33 of the Constitution.

18 STANDARDS OF BUSINESS CONDUCT

18.1 Policy

Directors and (where relevant) Nominated Officers should comply with the Directors' Code of Conduct and any guidance and best practice advice issued by NHS England. This section of the SOs should be read in conjunction with these documents.

18.2 Interest of Directors and Officers in contracts

- 18.2.1 Any Director or Officer who comes to know that the Trust has entered into or proposes to enter into a contract in which ~~he has~~they have any pecuniary interest, direct or indirect, shall give notice in writing of such fact to the Chief Executive or Board of Directors' Secretary as soon as practicable, but in any event within 7 days of first becoming aware of the fact. In the case of Immediate Family Members, the interest of one Immediate Family Member shall, if known to the other, be deemed to be also the interest of that Immediate Family Member.
- 18.2.2 A Director or Officer must also declare to the Chief Executive or Board of Directors' Secretary any other employment or business or other relationship of ~~his/her~~theirs, or of an Immediate Family Member, that conflicts, or might reasonably be predicted could conflict with the interests of the Trust in accordance with SO 8. The Trust shall require such interests to be recorded in the register of interests of members of the Board of Directors.

18.3 Canvassing of, and recommendations by, Directors in relation to appointments

- 18.3.1 Canvassing of Directors or members of any committee, sub-committee or joint committee of the Board of Directors directly or indirectly for any appointment under the Trust shall disqualify the candidate for such appointment. The contents of this paragraph of these SOs shall be included in application forms or otherwise brought to the attention of candidates.
- 18.3.2 A Director of the Board of Directors shall not solicit for any person any appointment under the Trust or recommend any person for such appointment; but this paragraph of this SO shall not preclude a Director from giving written testimonial of a candidate's ability, experience or character for submission to the Trust in relation to any appointment.
- 18.3.3 Informal discussions outside appointments panels or committees, whether solicited or unsolicited, should be declared to the panel or committee in question.

18.4 Relatives of Directors or Officers

- 18.4.1 Directors and Officers shall bear in mind that candidates for any staff appointment under the Trust shall, when making an application, disclose in writing to the Trust whether they are related to any Director or the holder of any office under the Trust. Failure to disclose such a relationship shall disqualify a candidate and, if appointed, render ~~him/her~~them liable to instant dismissal.
- 18.4.2 Directors and Officers shall disclose to the Board of Directors' Secretary any relationship between ~~him/herself~~themselves and a candidate of whose candidature that Director or Officer is aware. It shall be the duty of the Board of Directors' Secretary to report to the Board of Directors any such disclosure made.

- 18.4.3 On appointment, Directors (and prior to acceptance of an appointment in the case of Executive Directors) must disclose to the Board of Directors' Secretary whether they are related to any other member of the Board of Directors, the Council of Governors, or holder of any office in the Trust.
- 18.4.4 Where the relationship to an Officer, Governor, or another Director is disclosed, SO 8 shall apply.

18.5 External consultants

SO 9 will apply equally to all external consultants or other agents acting on behalf of the Trust.

19 CUSTODY OF SEAL AND SEALING OF DOCUMENTS

19.1 Custody of seal

The common seal of the Trust shall be kept by the Board of Directors' Secretary or his/her/their Nominated Officer in a secure place.

19.2 Sealing of documents

- 19.2.1 The common seal of the Trust shall not be fixed to any documents unless the sealing has been authorised by a resolution of the Board of Directors or of a committee, thereof or where the Board of Directors has delegated its powers in accordance with the Scheme of Delegation.
- 19.2.2 Where it is necessary that a document shall be sealed, the common seal of the Trust shall be affixed in the presence of two Officers duly authorised by the Chief Executive, and also not from the originating department, and shall be attested by them.

19.3 Register of sealing

The Board of Directors' Secretary shall make an entry of every sealing (numbered consecutively) in a book provided for that purpose, and shall ensure that each entry is signed by the persons who shall have approved and authorised the document and those who attested the seal. The Board of Directors' Secretary shall make a report of all sealings to the Board of Directors at least quarterly. (The report shall contain details of the seal number, the description of the document and date of sealing).

20 SIGNATURE OF DOCUMENTS

- 20.1 Where the signature of any document will be a necessary step in legal proceedings involving the Trust, it shall be signed by the Chief Executive, unless any enactment otherwise requires or authorises, or the Board of Directors shall have given the necessary authority to some other person for the purpose of such proceedings.
- 20.2 The Chief Executive or Nominated Officers shall be authorised, by resolution of the Board of Directors, to sign on behalf of the Trust any agreement or other document (not required to be executed as a deed) the subject matter of which has been approved by

the Board of Directors or committee of the Board of Directors to which the Board of Directors has delegated appropriate authority.

- 20.3 Notwithstanding the generality of SOs 11.1 and 11.2 above, in land transactions the signing of certain supporting documents may be delegated to Nominated Officers, as set out in the Scheme of Delegation, but will not include the main or principal documents effecting the transfer (e.g. sale/purchase agreement, lease, contracts for construction works, or main warranty agreements) or any document which is required to be executed as a deed.

21 MISCELLANEOUS

21.1 Standing Orders to be given to Directors and Nominated Officers

- 21.1.1 It is the duty of the Chief Executive to ensure that existing Directors and Nominated Officers and all new appointees are notified of and understand their responsibilities within these SOs.
- 21.1.2 Copies of the SOs shall be issued to Directors and Nominated Officers designated by the Board of Directors' Secretary. The Board of Directors' Secretary shall ensure that new Directors and Nominated Officers are informed of these SOs in writing and shall receive copies of these SOs.

21.2 Documents having the standing of Standing Orders

The SFIs and the Scheme of Delegation shall have the effect as if incorporated into these SOs, but for the avoidance of doubt, neither the SFIs nor the Scheme of Delegation form part of this Constitution.

ANNEX 8 - FURTHER PROVISIONS

(Paragraphs 1, 4, 8, 9, 14, and 22)

Appendix 1:

Trust values

1 NHS principles

- 1.1 The NHS provides a comprehensive service, available to all;
- 1.2 Access to NHS services is based on clinical need, not an individual's ability to pay;
- 1.3 The NHS aspires to the highest standards of excellence and professionalism;
- 1.4 The patient will be at the heart of everything the NHS does;
- 1.5 The NHS works across organisational boundaries;
- 1.6 The NHS is committed to providing best value for taxpayer's money;
- 1.7 The NHS is accountable to the public, communities and patients that it serves.

2 NHS values

- 2.1 Working together for patients;
- 2.2 Respect and dignity;
- 2.3 Commitment to quality of care;
- 2.4 Compassion;
- 2.5 Improving lives;
- 2.6 Everyone counts;

3 Trust values

- 3.1 Everyone Matters;
- 3.2 Working Together;
- 3.3 Making a Difference

4 Representative membership

The Trust shall at all times strive to ensure that, taken as a whole, its actual membership of the Public Constituency is representative of those eligible for membership. To this end:

- 4.1 The Trust shall at all times have in place and pursue a Membership Strategy which shall be approved by the Board of Directors and prepared and reviewed by the Council of Governors from time to time as set out this Constitution and at least every 3 years.
- 4.2 The Council of Governors shall present to each Annual Governors' Meeting the reports set out in SO 4.4.2 of Annex 6 of this Constitution.

5 Co-operation with health service and other bodies

- 5.1 In exercising its functions, the Trust shall co-operate with Health Service Bodies and any local authority with which the Trust has a Local Authority Partnership Agreement.
- 5.2 Notwithstanding the provisions of paragraph 3.1 above, the Trust shall co-operate with any specific third party body that it has a duty (statutory, contractual, or otherwise) to co-operate with.

6 Respects for rights of people

In conducting its affairs, the Trust shall respect the rights of the members of the community it serves, its employees and people dealing with the Trust as set out in the Human Rights Act 1998.

ANNEX 8 - FURTHER PROVISIONS

Appendix 2:

Membership

1 Disqualification from membership of the Trust

1.1 A person may not become or continue as a Member of the Trust if:

- 1.1.1 ~~he-they are~~is under 16 years of age at the date of ~~his-their~~ application or invitation to become a Member (as the case may be);
- 1.1.2 ~~he-hasthey have~~ demonstrated aggressive or violent behaviour (such as verbal assault, physical assault, violence or harassment) at any NHS hospital, NHS premises or NHS establishment against any of the Trust's employees or other persons who exercise functions for the purposes of the Trust whether or not in circumstances leading to ~~theirhis~~ removal or exclusion from any NHS hospital, premises or establishment;
- 1.1.3 ~~he-hasthey have~~ been confirmed as a 'vexatious complainant' in accordance with the relevant
- 1.1.4 Trust policy for handling complaints;
- 1.1.5 ~~he-hasthey have~~ been removed as a member from another NHS foundation trust;
- 1.1.6 ~~he-hasthey have~~ been deemed to have acted in a manner contrary to the interests of the Trust;
- 1.1.7 ~~he-they~~ fails or ceases to fulfil the criteria for membership of the Public Constituency or the Staff Constituency; or
- 1.1.8 ~~he-hasthey have~~ been dismissed (otherwise than by reason of redundancy) from a position of employment with the Trust.

1.2 Where the Trust is on notice that a Member may be disqualified from membership, or may no longer be eligible to be a Member, or it appears to the Secretary that a Member no longer wishes to be a Member, the Secretary shall give the Member 14 days written notice to show cause why ~~his-their~~ name should not be removed from the Trust's register of Members. On receipt of any such information supplied by the Member, the Secretary may, if ~~he-they~~ considers it appropriate, remove the Member from the Trust's register of Members. In the event of any dispute about entitlement to membership, the dispute shall be resolved in accordance with the procedure set out in paragraph 2.1 of Appendix 4 of this Annex 8.

1.3 All Members of the Trust shall be under a duty to notify the Secretary of any change in their particulars which may affect their entitlement as a Member.

2 Expulsion from membership of the Trust

- 2.1 A Member may be expelled by a resolution approved by not less than two-thirds of the members of the Council of Governors present and voting at a meeting of the Council of Governors. The following procedure is to be adopted:
 - 2.1.1 Any Member may complain to the Secretary that another Member has acted in a way detrimental to or contrary to the interests of the Trust, or is otherwise disqualified as set out in paragraph 1 above.
 - 2.1.2 Subject to paragraphs 2.2 to 2.6 below, if a complaint is made, the Council of Governors, or a delegated committee, sub-committee or joint committee of the Council of Governors and the Board of Directors, will consider the complaint, having taken such steps as it (or they) consider appropriate, to ensure that each Member's point of view is heard and may either:
 - 2.1.2.1 dismiss the complaint and take no further action; or
 - 2.1.2.2 arrange for a resolution to expel the Member complained of to be considered at the next meeting of the Council of Governors.
- 2.2 If a resolution to expel a Member is to be considered at a meeting of the Council of Governors pursuant to paragraph 2.1.2.2 above, details of the complaint must be sent to the Member complained of not less than one calendar month before the meeting with an invitation to answer the complaint and to attend the meeting.
- 2.3 At the meeting referred to in paragraph 2.2 above, the Council of Governors will consider the evidence and any representations made in support of the complaint and such other evidence and any representations made by the Member making the complaint which is placed before them.
- 2.4 If the Member complained of fails to attend the meeting mentioned in paragraph 2.2 above without due cause, the meeting may proceed in their absence. The decision to proceed in these circumstances will be at the sole discretion of the person chairing the meeting in question.
- 2.5 A person expelled from membership under the provisions of paragraphs 2.1 to 2.4 above will cease to be a Member upon the declaration by the person chairing the meeting that the resolution to expel them is carried.
- 2.6 No person who has been expelled from membership pursuant to the provisions of paragraphs 2.1 to 2.5 above is to be re-admitted as a Member except by a resolution of the Council of Governors carried by votes of two-thirds of the members of the Council of Governors present and voting at a general meeting of the Council of Governors.

3 Termination of membership

A Member shall cease to be a Member on:

- 3.1 death; or
- 3.2 resignation by notice in writing to the Secretary; or

- 3.3 ceasing to fulfil the requirements of paragraphs 8 or 9 of this Constitution, as the case may be; or
- 3.4 being disqualified pursuant to paragraph 1 above, or being expelled pursuant to paragraph 2 above.

ANNEX 8 - FURTHER PROVISIONS

Appendix 3:

Board of Directors – further provisions

1 Criteria for suspension and removal of Non-Executive Directors and the Chair

1.1 General criteria

- 1.1.1 The Council of Governors, when exercising the powers of suspension or removal in accordance with paragraphs 22.3 to 22.5 of this Constitution, shall have regard to the following criteria (this is not an exhaustive list and each case shall be considered on its own merits taking into account all relevant factors, including any representations made by the Non-Executive Directors or Chair in question):
 - 1.1.1.1 if a Director fails to attend 2 consecutive meetings of the Board of Directors in any Financial Year ~~he~~they may be removed from office unless the Council of Governors is satisfied by a 75% majority of those members of the Council of Governors present and voting at a meeting of the Council of Governors that:
 - 1.1.1.1.1 the absence was due to a reasonable cause; and
 - 1.1.1.1.2 ~~he~~they will be able to start attending meetings of the Board of Directors again within such a period as the Council of Governors considers reasonable;
 - 1.1.1.2 failure to disclose an interest in accordance with paragraph 29 of this Constitution and Standing Order 8 of the Standing Orders for the Board of Directors (Annex 7 of this Constitution);
 - 1.1.1.3 if a Director is considered to have acted in a manner inconsistent with:
 - 1.1.1.3.1 the values of the Trust, as set out in Appendix 1 of Annex 8, or in a manner detrimental to the interests of the Trust; or
 - 1.1.1.3.2 the Authorisation; or
 - 1.1.1.3.3 the Standing Orders for the Board of Directors; or
 - 1.1.1.3.4 the Directors' Code of Conduct.

1.2 Further criteria: suspensions

- 1.2.1 Suspension is a temporary measure which shall be used to prevent a Non-Executive Director from exercising ~~his or her~~their functions pending the completion of an investigation or removal from office under paragraph 22 of the Constitution. The Council of Governors, when exercising the power of suspension in accordance with paragraphs 22.2 to 22.5 of the Constitution, shall have regard to the following criteria (this is not an exhaustive list and each case shall be considered on its own

merits taking into account all relevant factors, including any representations made by the Non-Executive Director or the Chair in question);

- 1.2.1.1 the criteria referred to in paragraph 2.1.1 above;
- 1.2.1.2 where the Trust or the Council of Governors is in receipt of information which gives cause for concern about a Non-Executive Director continuing to hold office;
- 1.2.1.3 where there is sufficient evidence to warrant removal from office under paragraph 22 of the Constitution, but before the removal takes effect; or
- 1.2.1.4 where there is an allegation of fraud or other impropriety or other alleged misconduct that would require the Non-Executive Director to be suspended in order to protect patients, staff or public funds, or which is likely to impair the work of the Trust.

ANNEX 8 - FURTHER PROVISIONS

Appendix 4:

Further provisions: general

1 Indemnity

- 1.1 Members of the Council of Governors, the Board of Directors and the Secretary who act honestly and in good faith will not have to meet out of their personal resources any personal civil liability which is incurred in the execution or purported execution of their functions save where they have acted recklessly. Any costs arising in this way will be met by the Trust.
- 1.2 The Trust may purchase and maintain insurance against this liability for its own benefit and for the benefit of members of the Council of Governors, the Board of Directors and the Secretary.
- 1.3 The Trust may take out insurance either through the NHS Litigation Authority or otherwise in respect of directors and officers liability, including liability arising by reason of the Trust acting as a corporate trustee of an NHS charity.

2 Dispute resolution procedures

Membership disputes

- 2.1 In the event of any dispute about the entitlement to membership, the dispute shall be referred to the Secretary who shall make a determination on the point in issue. If the Member or applicant (as the case may be) is aggrieved at the decision of the Secretary they may appeal in writing within 14 days of the Secretary's decision to the Council of Governors or a delegated committee or sub-committee of the Council of Governors or a joint committee of the Council of Governors and the Board of Directors, whose decision shall be final.

Other disputes

- 2.2 In the event of any dispute in relation to this Constitution that concerns anything other than membership, the dispute shall be referred to the Chair who shall make a determination on the point in issue. If the Member or complainant (as the case may be) is aggrieved at the decision of the Chair ~~he~~ they may appeal in writing within 14 days of the Chair's decision to the Board of Directors whose decision shall, subject to the provisions of paragraphs 2.2A and 2.2B below, be final.
- 2.2A In the event of a dispute being referred to the Chair under SO 4.13.10 of Annex 6 of this Constitution and a determination being made in accordance with the procedure set out in paragraph 2.2 above, if the Governor in question is aggrieved at the decision of the Board of Directors ~~he~~ they may apply in writing within 7 days to the Board of Directors for the decision to be referred to an independent assessor. The independent assessor will then consider the evidence and conclude whether the proposed removal is reasonable or otherwise.
- 2.2B On receipt of an application under paragraph 2.2A above, the Board of Directors and the applicant Governor will co-operate in good faith to agree on the appointment of the

independent assessor. If the parties fail to agree on an independent assessor within 21 days of the date upon which the application is received by the Board of Directors, the independent assessor will be nominated by the Chair, whose decision shall be final. The independent assessor's decision will be binding and conclusive on the parties.

Disputes between the Council of Governors and the Board of Directors

2.3 Subject to paragraph 19C of the Constitution, in the event of dispute between the Council of Governors and the Board of Directors:

- 2.3.1 in the first instance the Chair on the advice of the Secretary, and such other advice as the Chair may see fit to obtain, shall seek to resolve the dispute;
- 2.3.2 if the Chair is unable to resolve the dispute ~~he~~they shall appoint a committee comprising equal numbers of Directors and Governors to consider the circumstances and to make recommendations to the Council of Governors and the Board of Directors with a view to resolving the dispute (the "Special Committee");
- 2.3.3 if the recommendations (if any) of the Special Committee are unsuccessful in resolving the dispute, the Chair may refer the dispute back to the Board of Directors who shall make the final decision.

3 Notices

- 3.1 Save where a specific provision of the Constitution otherwise requires or permits, any notice required by this Constitution to be given shall be given in writing or shall be given using Electronic Communications to an address for the time being notified for that purpose.
- 3.2 Proof that an envelope containing a notice was properly addressed, prepaid and posted shall be conclusive evidence that the notice was given. A notice served pursuant to paragraph 3.1 above shall be deemed to have been received 48 hours after the envelope containing it was posted, or in the case of a notice contained in an Electronic Communication, 48 hours after it was sent.

ANNEX 8 - FURTHER PROVISIONS

Appendix 5

The role and responsibilities of the Secretary

- 1 The Trust shall have a Secretary who may be an Officer of the Trust, but may not be a Governor or Director of the Trust.
- 2 Notwithstanding the specific functions of the Secretary, as set out in this Constitution, the Secretary will be expected inter alia to:
 - 2.1 ensure good information flows within the Board of Directors and its committees and between senior management and the Council of Governors, and Members;
 - 2.2 ensure that the procedures of the Board of Directors (as set out in this Constitution and the Standing Orders for the Board of Directors) are complied with;
 - 2.3 ensure that the procedures of the Council of Governors (as set out in this Constitution and the Standing Orders for the Council of Governors) are complied with;
 - 2.4 advise the Board of Directors and the Council of Governors (through the Chair or the Vice Chair, as the case may be) on all governance matters;
 - 2.5 be available to give advice and support to individual Directors and Governors and assistance with professional development;
 - 2.6 be available to give advice and guidance to Directors and Governors on their respective statutory duties and corporate governance-related matters;
 - 2.7 attend as necessary all meetings of the Board of Directors and Council of Governors including their committees, sub-committees and joint committees, and to keep accurate minutes of these meetings; and
 - 2.8 attend Members' meetings and keep accurate minutes of these meetings.

ANNEX 9 – SIGNIFICANT TRANSACTION

- 1 A Significant Transaction is a transaction which meets any of the following criteria:

Ratio	Description	Percentage
Assets	The Gross Assets subject to the transaction divided by the gross assets of the Trust.	>25
Income	The income attributable to: - the assets; or - the contract associated with the transaction divided by the income of the Trust.	>25
Consideration to total Trust Capital	The Gross Capital of the company or business being acquired/divested divided by the Total Capital of the Trust following completion, or the effects on the Total Capital of the Trust resulting from a transaction.	>25

- 2 For the purposes of this Annex 9:

- 2.1 “Gross Assets” is the total of fixed assets and current assets;
- 2.2 “Gross Capital” equals the market value of the target’s shares and debt securities, plus the excess of current liabilities over current assets; and
- 2.3 “Total Capital” of the Trust equals taxpayers’ equity.

Report to:	Council of Governors	Agenda item:	12
Date of Meeting:	8 September 2025		

Title of Report:	Election plan 2025/26
Status:	For Assurance
Board Sponsor:	Liam Coleman, Interim Chair
Author:	Marty McAuley, Interim Governance Specialist
Appendices	N/A

1. Executive Summary of the Report

The purpose of this report is to share the seats on the Council of Governors where the term of office ends and the election timetable.

2. Recommendations (Note, Approve, Discuss)

The Council of Governors is asked to take assurance from the process.

3. Legal / Regulatory Implications

An effective council of governors is part of well led.

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)

There is a risk that nobody wants to stand for the council of governors and the election will need to be repeated.

5. Resources Implications (Financial / staffing)

Part of the budget in place but the Trust has made a saving of approximately £3,500 by not sending postcards to all members.

6. Equality and Diversity

No issues identified.

7. References to previous reports/Next steps

Next steps will be to begin the election process.

8. Freedom of Information

Public information.

9. Sustainability

Positive. We have removed printing and postage of postcards.

10. Digital

Removes postal and encourages use of email.

1. Introduction

Council of Governor elections are a vital mechanism for ensuring that NHS Foundation Trusts remain accountable to the communities they serve.

By electing governors, Trust members help shape the future of local healthcare services, ensuring that decisions are made transparently and with public input.

2. Returning Officer

Formerly known as Electoral Reform Services (ERS), CIVICA are our current providers of election services. They are the UK's leading provider of election services, with over 100 years' experience of administering elections, ballots and consultation processes.

3. Vacancies

Due to vacancies and ends of terms of office there are several seats open for election. They are:

Public:

- City of Bath – 2 vacancies
- North East Somerset – 1 vacancy
- Mendip – 1 vacancy
- North Wiltshire – 1 vacancy
- South Wiltshire – 1 vacancy
- Rest of England and Wales – 1 vacancy

Staff Governors – 2 vacancies

4. Timeline

Election Stage	Date
Notice of Election / Nominations Open	Monday, 8 Sep 2025
Nominations Deadline	Tuesday, 23 Sep 2025
Summary of Valid Nominated Candidates Published	Wednesday, 24 Sep 2025
Final Date for Candidate Withdrawal	Friday, 26 Sep 2025
Electoral Data Provided by Trust	Tuesday, 30 Sep 2025
Notice of Poll Published	Friday, 10 Oct 2025
Voting Packs Despatched	Monday, 13 Oct 2025
Close of Election	Friday, 31 Oct 2025
Declaration of Results	Monday, 3 Nov 2025

5. Next steps

The election process will begin and the Corporate Governance Team will organise an induction day for all newly appointed Governors who will take up post after the declaration of results and attend their first meeting in December 2025.

6. Recommendation

The Council of Governors are asked to note the election plan.

Author: Marty McAuley, Interim Governance Specialist	Date: August 2025
Document Approved by: Marty McAuley, Interim Governance Specialist	Version:
Agenda Item: 12	Page 3 of 3