

**NHS Foundation Trust** 

## Minutes of the meeting of the Council of Governors Wednesday 20<sup>th</sup> May 2009, 6.00 – 8.00pm at the Clinical Education Centre, Russells Hall Hospital, Dudley

Р	re	se	n	t

Name	Status	Representing
Ms Rachel Harris	Appointed Governor	Dudley PCT
Mr Steve Waltho	Public Governor	Dudley Brierley Hill
Dr P D Gupta	Public Governor	Dudley Central
Ian Mullins	Appointed Governor	Summit Healthcare
Mr Bob Ferguson	Public Governor	Dudley Central
Mr Harvey Woolf	Public Governor	Dudley North
Mr Roy Savin	Public Governor	Dudley Stourbridge
Mr John Balmforth	Public Governor	Dudley Halesowen
Ms Rosemary Bennett	Public Governor	Dudley North
Mr Darren Adams	Public Governor	Stourbridge
Mr Adrian Hamlyn	Staff Governor	Medical & Dental
Mr David Ore	Staff Governor	Non Clinical Staff
Mr Graham Russell	Staff Governor	Nursing & Midwifery
Mr Howard Perrin	Public Governor	Rest of the West Midlands
Mrs Diane Jones	Public Governor	South Staffordshire
Mr Richard Brookes	Public Governor	Dudley Brierley Hill
Jane Beard	Public Governor	Halesowen
Mr Simon Tovey	Staff Governor	Partner Organisations
Mrs Mary Turner	Appointed Governor	Dudley Council for Voluntary Services
Mr Atif Janjua	Public Governor	Dudley Central
Miss Nikky Gill	Appointed Governor	Youth Council
In Attendance:		
Mr Alf Edwards	(Chair of Meeting)	
Mr David Badger	Non Executive Director	Dudley Group of Hospitals NHS Foundation Trust
Mr Paul Assinder	Director of Finance &	Dudley Group of Hospitals NHS Foundation Trust
	Information –Secretary	
	to the Council	
Mrs Ann Becke	Non Executive Director	
Mrs Liz Abbiss	Head of Customer	Dudley Group of Hospitals NHS Foundation Trust
	Relations &	
	Communications	
Ms Sarah Briscoe	Foundation Trust Team	Dudley Group of Hospitals NHS Foundation Trust
Amanda Kenny	Participation Officer	Youth Council

Alfred Edwards welcomed Nikky Gill, the newly Appointed Governor for the Youth Council.

A reminder was given to all Governors to sign in when attending each Council meeting.

### 1. HCC Update

Liz Abbiss referred to enclosure 1 and confirmed that following in-depth discussions around the declaration evidence, the Board of Directors had decided to declare insufficient assurance with one of the HCC standards for the 2008/09 HCC declaration. This was around Safeguarding vulnerable adults and children groups where the Board felt unable to declare compliance for last year. Currently Denise McMahon, Director of Nursing, is looking into the Trust's plans to provide training for all staff in this area. The plans are not formalised as yet but will look at all vulnerable adult groups and what support the Trust provides to its staff in delivering quality care to these patients.

Dr Adrian Hamlyn asked why the Trust had declared compliant against criteria *C9 Records Management* as availability was low. Dr Gupta also stated that GP's were not receiving discharge letters in a timely manner which was impacting on costs. Paul Assinder confirmed that the Trust was aware of these issues and was recruiting additional staff to address the matter. David Badger confirmed that the Audit Committee was also investigating this issue.

John Balmforth asked what the framework was in order to confirm if compliant. Alfred Edwards confirmed that details of the framework and the standards for compliance will be circulated to all Governors.

# A/P 01 Framework and the standards for compliance will be circulated to all Governors.

Dr Adrian Hamlyn referred to criteria *C15a* and *C15b* that relate to patient food and feeding. A recent Care Quality Commission (CQC) survey about the Trust had placed it in the bottom 10% in this area so how was the Trust stating it was compliant. Paul Assinder confirmed that the HCC Declaration was done at a particular time of the year whilst the CQC survey was taken after the HCC Declaration. Liz Abbiss confirmed that the Trust was now conducting quarterly patient surveys to ensure any issues are captured. Alfred Edwards informed all that Sue Nicholls, Quality Manager, would be attending the next Council meeting and would address any questions Governors had on the HCC Declaration.

#### 2. Apologies

Mr Mark Cooke, Appointed Governor, Dudley PCT

Professor Martin Kendall, Appointed Governor, University of Birmingham Medical School

Mrs Janet Robinson, Public Governor, Rowley Regis

Mr Simon Biggs, Public Governor, Dudley North

Cllr Anne Hingley, Appointed Governor, Wyre Forest DC

Wendy Hadley, Public Governor, Brierley Hill

Mrs Catherine Earle, Public Governor, Stourbridge

Diane Lee, Appointed Governor, West Midlands Ambulance Service

Mr Brian Hanford, Appointed Governor, Worcestershire PCT

Professor Linda Lang, Appointed Governor, Wolverhampton University

Mrs Pat Siviter, Public Governor, Wyre Forest

Mr Rob Johnson, Public Governor, Halesowen

Ms Jane Southall, Staff Governor, Nursing & Midwifery

Ms Pamela Boucher, Appointed Governor, DGoH Volunteers appointed by DCVS

Mr Jonathan Fellows, Non Executive Director

Mr David Wilton, Non Executive Director

Mrs Kathryn Williets, Non Executive Director

Mr Paul Farenden, Chief Executive

Mrs Denise McMahon, Director of Nursing

Mr Paul Harrison, Medical Director

# 3. Minutes of the Council of Governors meeting 19th March 2008

Alfred Edwards asked the Council if there were any matters of correctness about the minutes of the previous meeting.

Dr Gupta stated that section 8, A & E Exception Report, did not minute that the Council of Governors had asked the Board of Directors about reassurances to meet the A & E targets and the ability to deal with a swine flu pandemic.

It was also noted that section 11 Recommendations from the Remuneration Committee also did not have all discussions minuted.

A/P 02 Section 8 and 11 of previous minutes to be amended and re-circulated.

# 4. Matters Arising:

#### 3.1 Future Meetings

Alf Edwards confirmed that extra Council of Governor meeting dates for 2009 had been arranged to help the flow of information to Governors especially around key planning dates.

#### 3.2 Appointed Governor for Worcestershire PCT

Alf Edwards confirmed that Brian Hanford, Director of Finance, is the new Appointed Governor for Worcestershire PCT.

## 3.3 Council of Governor Development

David Badger informed the Council that at the last Communications / Membership Sub Committee meeting held on 6th May 2009 it was decided that the recent Monitor publication, Foundation Trust Governors: Meeting Your Statutory Responsibilities, would be a useful guide for measuring the role of Governors and confirm best practise. The Committee would like to invite all Governors and Directors to attend a review/discussion session on the 15th June 6.00pm – 8.00pm in the Clinical Education Centre

## 5. Trust Annual Plan 2009/10 Update

Paul Assinder firstly apologised for the late posting of the Annual Plan to Governors. Harvey Woolf expressed his concern that he had only received his copy of the plan via email at 4pm the day before the meeting. As some of the information Governors received was required to read to make critical decisions, could there be an agreement that papers to Governors were sent at least 7 days prior to a meeting.

Paul Assinder gave an update on the current Annual Plan 2009/10. The plan, which also looked at 2010/11 to 2012/13, had to be sent to Monitor by the  $30^{th}$  May 2009. Due to changes in the budget Monitor had asked the Trust to re-address the finance side of the plan and resubmit in July

Dr Adrian Hamlyn asked about the 1.5 billion NHS efficiency improvement which was to be achieved without impact on service delivery. Paul Assinder confirmed the budget had been fixed for this year but the NHS budget was to be cut by 2.3 billion.

Beverley Hill suggested that in light of the recent Mid Staffs issues the Trust should include quality in the Annual Plan. Paul Assinder confirmed that the content of the plan is still working progress due to financial allocations set by the Treasury. The Trust also has to work to a format set by Monitor but the Trust would include quality.

Paul Assinder then took the Council through the main sections of the Annual Plan:

Section 1, the introduction, talked about:

- being a Hospital of Choice for the communities of Dudley, Stourbridge, Wyre Forest, Tipton, Rowley Regis, Kinver and Wombourne.
- creating a unique service model in which care, staff and facilities are segregated into dedicated *emergency or planned care facilities*

Section 2 detailed the Trusts past performance for 2008-09 including:

- Larger community of now over 13,000 FT members who are either members of the local community, members of staff or patients of the Trust.
- A most pleasing aspect of our work in 2008-09 was the achievement of the national 18 Weeks maximum wait from referral to treatment targets by December 2008.
- Overall levels of both MRSA and C Diff' levels were reduced in 2008-9 and contractual targets met.

Section 3 gave details of the Trusts future plans embedded in the Trusts values:

- Continue to roll out the Patients Safety First campaign and learn from outputs.
- Utilise our network of Governors and Members to learn of patients preferences and respond to these.
- Achieve a year on year continuous reduction in hospital acquired infections
- Review nurse staffing levels and skill mix against external benchmarks
- Undertake and respond to confidential patients surveys.
- Continue to work closely with external partners to improve the health and wellbeing of the local population.
- Maintain our impressive facilities and environment and invest our surplus in state of the art medical equipment

During the next 3 years we will differentiate ourselves from our competitors by:

- Segregating elective and emergency facilities
- Tailoring care by responding to feedback from patients, GPs and commissioners
- Having no outliers; medical and trauma patients will be treated and cared for in subspecialty wards
- Offering choice on surgical and interventional techniques where available; for example open surgery, laser surgery and/or endovascular surgery and the appropriate range of NICE approved drugs and treatment
- Using appropriately trained staff dedicated to care for patients in designated sub specialties.

Paul Assinder referred to the financial part of the plan and during the next three years planning cycle the Trust will:

- maintain at least a 30 day liquidity margin
- maintain a committed facility with a commercial bank
- deliver a total CIP of £6m per annum
- achieve a minimum 5% EBITDA in each year of the plan
- introduce and maintain Service Line Reporting at the patient level.

Section 4 gave details of the Trusts risk analysis where 15 key items would be monitored by the Board.

Section 5 gave details of the membership strategy where the Trust aspires to have 11,000 members by the end of 2009 and 13,000 by the end of 2013. The Trust also needed to work with Partner Staff to increase membership. Liz Abbiss welcomed Governor involvement to help raise membership. Shortly the Foundation Trust Team will have a new membership database which could provide Governors with socio-economic profiling and membership reports to help Governors in their constituencies.

It was confirmed that all Governors will receive a copy of the final Annual Plan when it is signed off by the Board of Directors.

# **5.1** Comments from Service Strategy Development Working Group on the Annual Plan

Simon Tovey, chair of the Service Strategy Development Working Group, confirmed that members of the committee had been able to see and comment on an early version of the Trusts' Strategy document, and views on this early document were passed back to the authors for consideration and response.

On the whole, the sub-group felt that the strategic aims of the Trust were sound and in keeping with the values and aspirations of the Trust. In short, the Trusts' strategic plans are based on raising the quality of care to the Dudley catchments population, and also offering this level of care to GP practices within easy commutable distance of the Trust, but outside the Dudley catchment area, such as Kinver, Wombourne and Wyre Forrest.

Governors were very mindful that we live in a fast changing financial and political climate. Issues such as the Mid Staffordshire crisis, and the possibility of a swine fever pandemic also demand appropriate action. As a consequence the sub-group raised issues and sought reassurance on the ability of the Trust to weather financial storms; have sufficient capacity within the Trust; and the ability to tackle any log-jams such as administration flow inside and outside the Trust – such as improved flow of correspondence to GPs for example.

At the last sub-group meeting Paul Brennan – Operational Director for the Trust, answered questions and explained the thinking and background around the strategy. The full and frank discussions were most welcome, and following this the sub-group could see that the strategic aims were sufficiently mindful of the "financial cliff-face" coming in about 2 years time, and hence were sized accordingly. The plans have the right amount of ambition considering the uncertain times we are in, and the Trust could demonstrate a certain amount of agility and latitude to their proposals to cope with different degrees of success.

Due to timescales the sub-group felt that they had only a limited view of the strategy to comment upon but looking to the future it would be beneficial if Governors had a more active role in the development of the strategy rather than commenting on an existing one. As a group they endorsed the plan as seen, based on the information and discussions that had taken place

David Badger informed Governors that the newly formed Development Group will look at the planning process around the production of the Annual Plan to ensure an earlier working relationship between the Board of Directors and the Council of Governors.

### **5.2** Issues raised regarding draft Annual Plan

Dr Parshotam Dass Gupta highlighted that in order for the DGOH to be the *Hospital of Choice*, GP's require more information about the services offered by Trust. Alfred Edwards confirmed that there was work to be done to help GP's in their role.

Dr Adrian Hamlyn commented that he had been unable to attend the Service Strategy Development Working Group meetings but had raised several issues. The first issue was around the recruitment of patients from the Wyre Forest and dealing with increased capacity and resistance from Kidderminster. The second issue related to the bed numbers

required for the split of elective and emergency care. Paul Assinder agreed these were both relevant points and the Board, when looking at reconfigure plans, must ensure there is a policy to enable an override of the process should there be a need for extra emergency beds. As for resistance from Kidderminster health economy, the Trust was reacting to GP's requests to send patients to the DGOH as part of the *Choose and Book* initiative

Mr Janjua referred to comments on competition as mentioned in section 3.3.2 of the draft Annual Plan. Did the Trust have realistic capacity to meet demands and how would these effect patients? Also what was the Trust doing to address staff turnover in the plan? Paul Assinder confirmed that the figures in the plan are currently estimates and the Trust is required to provide a business plan that will identify costs over the next 3 years. As for the term competition it was better to refer to this as *choice* as per the governments initiative to provide choice for both patients and GP's. All Foundation Trusts will look at attracting patients and the Trust's aim was to increase and improve services to attract new patients. Finally Paul Assinder confirmed that the Trust's staff turnover was about 10% and this was monitored regularly by the Board.

John Balmforth pointed out that over the next few years there will be a number of experienced nurses retiring. If the Trust plans to expand its services to meet new capacity the Trust should be looking to recruit experienced staff rather than rely on new recruits. Dr Adrian Hamlyn commented that some wards appeared not to have enough staff. Paul Assinder confirmed that Denise McMahon, Director of Nursing, was addressing nurse staffing and experience levels.

Simon Tovey declared that he was not present at the discussions of section 7 and 8 of the Annual Plan. If these sections were discussed, due to his circumstances and potential conflict of interest Simon stated that he would have to leave the meeting.

David Ore raised his concerns over the Trust not meeting the last two quarters A & E 4-hour waiting time target and wanted details of how the Trust will work towards meeting this quarters targets.

# A/P 03 Provide Council of Governors an update on the current situation of A & E 4-hour waiting time target.

Paul Assinder thanked the Service Strategy Development Working Group for the quick turnaround reviewing the Annual Plan. David Badger suggested that Board share the sensitised plan with Governors at the end of July which will include the revised budget plans.

Harvey Woolf asked how Governors should relay the plan back to members of their constituency. Paul Assinder confirmed the plan would be available in June. Harvey Woolf then asked if the Development Group could look at how the Annual Plan can be relayed back to members in a meaningful way.

# 6. Suggestions for future Council meetings

The next meeting is 4<sup>th</sup> June 2009.

Alfred Edwards observed there was a need to revisit the HCC compliance issue. Denise McMahon and Sue Nicholls were due to attend the next meeting. A presentation from the PALS and complaints team would also prove beneficial.

The next meeting will also include discussions on the recent Monitor publication, Foundation Trust Governors: Meeting Your Statutory Responsibilities, which will help measure the role of Governors and confirm best practise. All Governors are invited to attend a review/discussion session on the 15th June 6.00pm – 8.00pm in the Clinical Education Centre.

Other suggested topics:

- Presentation on Clinical Audits
- Mid Staffs Review copies for Governors
- Work plan around CQC work
- Need to discuss and provide Council of Governors information on safeguarding vulnerable adults and children
- Reports on Serious Untoward Incidents
- Pandemic issues i.e. swine flu presentation form Paul Oxley

# 7. Any Other Business

Alfred Edwards confirmed that the process to recruit a new Chief Executive had begun. Letters had been posted to all Governors and the Board would like to engage Governors in an appropriate way, by giving Governors an opportunity to meet potential candidates. Dr Adrian Hamlyn asked if there would be an opportunity for staff to meet potential candidates. Harvey Woolf informed the Council that at the Foundation Trust Network event attended that day, he had learnt that other Trusts had involved their Governors in the recruitment process. Alfred Edwards commented that there was a Trust policy as to the recruitment process itself. It was however crucial that Governors are fully informed and engaged to enable them to fulfil their role . Harvey Woolf asked if it was possible to view the job and personal specifications required for the new position to help Governors engage in the recruitment process.

Mr Atif Janjua informed the Council that he had received a House of Commons letter from a local MP asking for comments on the employment conditions of a group of staff who were employed by a supplier to a Trust sub contractor. He wanted advise on how Governors should respond. Alfred Edwards confirmed that discussions were at a sensitive stage but that the Trust would circulate an update on the Trust's position on this situation to Governors. Ann Becke asked for Board members to have a copy of this update

#### A/P 04 Provide Council of Governors an update on the current situation

Howard Perrin asked for confirmation on the current parking policy for long term patient users. John Balmforth asked about the disabled parking policy where patients have to pay and then claim a refund. Ian Mullins confirmed there was a car parking policy for concessions to patients and their families, and disabled patients, who required long term parking facilities.

#### A/P 05 Circulate car parking policy to Council of Governors

Howard Perrin also asked for guidance on dealing with press enquiries. Alfred Edwards advised all Governors to refer the press to the Trust if they had any queries.

Dr Adrian Hamlyn highlighted that the new parking arrangements within the Trust during the new car park build period were not beneficial to staff who have changing clinics or need to attend emergency appointments. There have been proposals put to the Operations Directorate, i.e. initiatives for shared parking, to manage the situation but these have been rejected. Dr Hamlyn also stated that the Dreadnought Road car park was currently only a third full. Alfred Edwards stressed that in the current circumstances everyone was finding issues with the parking arrangements which would not be solved until the new build was completed. Paul Assinder confirmed that the issue of access for emergency staff would be addressed at the next Board of Directors meeting.

Steve Waltho referred to the issue of Governor constituency boundaries raised at the recent Communications/Membership Sub-Committee meeting. He was pleased to confirm the Council that maps would be arriving shortly.

Steve Waltho also asked if the Communications/Membership Sub-Committee was the channel to address Governor communications. After a recent letter from the Stroke Association, would it be possible to have a response sent to Governors. Ann Becke confirmed that she will be receiving a response to the Stroke Association and this will also be shared with the Council of Governors.

## 8. Date of the next meeting:

The next meeting of the Council of Governors will be held on **4 June 2009 6.30pm** in the Clinical Education Centre, 1 Floor, C Block, Russells Hall Hospital.