

Minutes of the Full Council of Governors meeting Thursday 24th May 2012, 6.00pm, Clinical Education Centre, Russells Hall Hospital, Dudley

Present:

Name	Status	Representing
Mr Darren Adams	Public Elected Governor	Stourbridge
Mrs Kacey Akpoteni	Public Elected Governor	Rest of the West Midlands
Mr John Balmforth	Public Elected Governor	Halesowen
Mr Ian Dukes	Staff Elected Governor	Medical & Dental
Mr John Edwards	Chair of Meeting	DGH NHS FT
Mr Bill Etheridge	Public Elected Governor	North Dudley
Mrs Joanne Hamilton	Staff Elected Governor	Nursing & Midwifery
Mr Bill Hazelton	Public Elected Governor	Central Dudley
Mr David Heath	Staff Elected Governor	AHP & HCS
Mrs Karen Jaunzems	Staff Elected Governor	Non Clinical Staff
Mr Rob Johnson	Public Elected Governor	Halesowen
Mrs Diane Jones	Public Elected Governor	South Staffs & Wyre
		Forest
Prof Martin Kendall	Appointed Governor	University of Birmingham
		Medical School
Mrs Alison Macefield	Staff Elected Governor	Nursing & Midwifery
Mr Major Robins	Public Elected Governor	Stourbridge
Mrs Jackie Smith	Staff Elected Governor	AHP & HCS
Mr David Stenson	Public Elected Governor	Brierley Hill
Mrs Julie Walklate	Staff Elected Governor	Nursing & Midwifery
Mrs Julie Walklate	Staff Elected Governor	Nursing & Midwifery

In Attendance:

Name	Status	Representing
Mr Paul Assinder	Director of Finance & Information	DGH NHS FT
Mr David Badger	Deputy Chair	DGH NHS FT
Mr Richard Beeken	Director of Operations & Transformation	DGH NHS FT
Mrs Helen Board	Membership & Governor officer	DGH NHS FT
Ms Paula Clark	Chief Executive	DGH NHS FT
Mrs Mandy Green	Acting Head of Communications and Customer Care	DGH NHS FT
Mrs Tessa Norris	Director of Community Services & Integrated Care	DGH NHS FT
Ms Annette Reeves	Head of Human Resources	DGH NHS FT
Mr Roy Savin	Public Member	Stourbridge

Apologies:

Name	Status	Representing
Mrs Ann Becke	Non-executive Director	DGH NHS FT
Mr David Bland	Non-executive Director	DGH NHS FT
Mrs Brian Chappell	Public Elected Governor	North Dudley
Mrs Gill Cooper	Appointed Governor	Dudley NHS Acting Chair
Mr Bob Edwards	Public Elected Governor	Brierley Hill
Mr Jonathan Fellows	Non-executive Director	DGH NHS FT
Mr Paul Harrison	Medical Director	DGH NHS FT
Mrs Denise McMahon	Nursing Director	DGH NHS FT
Mr Richard Miner	Non-executive Director	DGH NHS FT
Mr Terry Venables	Staff Elected Governor	Partner Organisations' staff

1. Inter-professional learning update (power point presentation)

Professor Martin Kendall introduced Dr Andy Whallett, Consultant Rheumatologist and Head of Medical Education, and Mr Richard Cattell, Deputy Director of Operations (clinical services) and explained pharmaceuticals used in the NHS cost more than £11bn and are a major part of life saving treatment. He continued to say that if incorrectly prescribed, they can have an adverse rather than a beneficial effect and stressed the importance of training and in particular, training for junior doctors and pharmacists.

Dr Whallett and Richard Cattell then gave a short presentation about the Trust's success in securing £40k funding to develop a training programme designed to support and promote the improvement of practical prescribing techniques for newly qualified medics. Dr Whallett then talked through the objectives of the programme and how it will embed a culture of getting it 'right first time' and reducing the Length of Stay.

Bill Etheridge offered his congratulations to Dr Whallett and his team and asked if this training replaced an existing training scheme.

Dr Whallett replied this programme provides a simulated practical environment for newly qualified doctors where previously they would have no opportunity to practice before prescribing in real-time. He added that The Dudley Group was one of 96 organisations who applied for the funding and one of 15 who were successful.

John Edwards thanked Martin Kendall for the leadership he had shown in helping the Trust to achieve this award.

John Balmforth asked if a copy of the slides be distributed to all Governors.

John Edwards confirmed they will be loaded to the Governor Portal for Governors to access there.

2. Welcome, introductions & apologies, Declarations of Interests, announcements, Quoracy and items for any other business

John Edwards, Chair, opened the meeting and welcomed members of the public and press. He reminded all to ensure they had signed in. Apologies received are noted in above list.

John Edwards advised those present that members of the Board, including Executive and Non Executive Directors, are now attached to each of the committees of the Council and will only attend future full Council meetings if required to address a specific agenda item. Regular attendance at future meetings will be by;

- Chair
- Deputy Chair and Senior Independent NED
- Chief Executive
- Deputy Chief Executive/Director of Finance
- Director of Community Services and Integrated Care

There was no Declaration of Interests received.

John Edwards gave notice that Stephanie Pritchard, Public Elected Governor for Tipton and Rowley Regis had stepped down owing to personal family commitments and Councillor Lesley Faulkner, Appointed Governor Dudley Metropolitan Borough Council had recently retired from her post at the Council. A new Councillor will be appointed to us in due course.

The Chair asked those present if there were any items not covered by the agenda to be raised as any other business.

Paula Clark asked that she have the opportunity to update the Council of Governors on staff car parking arrangements.

3. Minutes from previous Council of Governors meetings (enclosure 1)

The minutes from the meeting held in February 2012 were accepted as a true and correct record and signed by the Chair.

3.1 Matters arising

Major Robins asked the Chair if he intended to present a solution to those present relating to the Any other Business item raised by himself at the last full Council meeting under Any other Business.

John Edwards replied that the matter has been investigated and following correspondence from Monitor, and discussion at the last Governor Develop Group meeting, had been resolved as per the report of the Trust Secretary circulated to the full Council by the Foundation Trust office on 14th May 2012 and available on the Governor Portal. The resolution is as follows;

With immediate effect, governors may raise matters for discussion at full Council or Committee meetings by:

- Making a request in writing to the Council Secretary (or the Foundation Trust Office for Committees) at least 10 days in advance of the meeting date, for an item to be included on the meeting agenda. The Chairman (or Committee Chair) will approve or deny such requests.
- Where important matters have arisen within 10 days of the meeting date, Governors can seek the Chairman's permission, before the commencement of the meeting, to raise that matter under AOB.

Major Robins challenged if was appropriate to revise the procedures without endorsement by the Full Council.

John Edwards replied the matter related to a potential amendment to the Trust Constitution which was not required as indicated by Monitor and felt it did not require any further discussion. This approach was endorsed by Martin Kendall

4. Standing items

4.1 Performance report Q4 (enclosure 2)

Paul Assinder asked the Council to receive the Q4 report. Paul asked the Governors to note the Q4 FRR (Financial Risk Rating) is 3 (RAG rated green) and explained that the Trust had finished the year with a small surplus.

Paul then explained the Governance Risk Rating is currently amber/red which relates to the C. difficile target. He concluded by confirming the Q4 position for incidences of C. diff was below target and the amber/red position would be adjusted once the CQC have completed a follow up visit.

John Edwards thanked Paul for the update and invited questions from the Council.

Bill Etheridge asked if the 30% tariff paid for A&E attendances over and above the threshold set by the commissioner is indicative of government policy attempting to use 'nudge theory' to compel our Trust to take on more permanent staff.

Paul Assinder replied the theory is to encourage care to take place outside of the acute setting.

David Stenson observed that the attendance had increased from 9% to 11% on the guarter.

Tessa Norris replied plans have been put in place and projects launched to support admission avoidance adding that not all actions are dependent on the PCT. Our Trust is also working hard to smooth patient pathways and support admission avoidance measures.

4.2 Board summary report (enclosure 3)

David Badger presented enclosure 3 and asked those present to note its contents. In particular he highlighted the focus of the Board on the following items;

- Quality of Service
- Matron reports
- Presentations from Clinical Services Heads
- Newly opened EVAR suite and award of contract for Vascular services
- Infection control and measure taken to realise significant improvement

John Balmforth thanked David for the update and queried the relevance of the report of the Council were not able to see what is contained in reports from Board committees to the Board.

David Badger replied the summary attempted to provide Governors with an insight into where Board focus lay and not support full Council debate on the detail of each and every item.

John Edwards concurred and looked to the Council to take the report as part of their assurance that what the Board is discussing is appropriate and relevant and allow Council to assess if anything is being overlooked.

Professor Martin Kendall noted the Board took infection control very seriously and thought it would be useful for Governors to have further insight into what the Trust is doing about new bugs that are coming down the track.

John Edwards supported the idea of indepth presentations to the Council on specific items and confirmed that Denise McMahon will be happy to attend the next Full Council and provide information on what information is collected and how the Trust 'horizon scans' for emerging threats and challenges.

Paul Assinder added the Councils' Governance Committee may wish to review the sources of assurance the Board use and assure themselves and the CoG that the sources are appropriate and relevant and identify any gaps in assurance.

Rob Johnson commented he expected to see items of significant concern on reports to Board.

John Edwards agreed and confirmed that the Board used a significant amount of data from a variety of sources including a dashboard that the Board is happy to share with the Governance Committee.

Bill Hazelton commented that issues outside normal parameters should be highlighted and useful for the Council of Governors to draw attention to these as appropriate.

Paula Clark reminded Governors that our auditors scrutinise the Trust very closely and provide an independent source of assurance for Council to use.

John Edwards stated the Trust intends to continue its close engagement with the Council, who in turn are encouraged to challenge and question where appropriate in their secondary governance role. He concluded by saying the Council needs to look at how referrals made to the Governance Committee are notified to the Council.

Action point – Denise McMahon to receive invitation to present at the next meeting of the Full Council of Governors

5. Patient Experience report (enclosure 4)

5.1 Survey results

Mandy Green asked the Council to receive the Inpatient Survey 2011 results report which contained the headline results and individual questions by exception only.

Professor Kendall asked if the Trust had seen improvements in the time taken to discharge patients.

Richard Beeken replied that whilst there had been some improvements with 30% discharged by lunchtime, the Trust has launched a transformation project to continue the process of improvement and confirmed he is happy to provide a detailed update at the Strategy Committee meeting once the project has run for a full quarter.

David Stenson noted the items where we had shown improvement against results in the previous year and queried the degree of difficulty in getting 'better' results and asked how great the range is.

Mandy Green replied it will take some time as the range is quite large and moving up the scale is a slow process.

John Edwards added the best performing hospitals are those that are specialist units such as the Children's Hospital. General hospitals like ourselves tend to inhabit the central mass of results.

Major Robins asked if the dispensing of drugs on discharge is contributory to major delays in getting patients home.

Richard Beeken replied delays occur in a high number of instances where the signing off by a doctor can take longer than the dispensing process in the pharmacy. He cited the example where competing demands will take a junior doctor away from a ward if there is an emergency patient requiring attention leaving scripts incomplete.

Bill Etheridge asked if the new training to be introduced as described by Dr Andy Whallett earlier in the evening would help this situation to improve and is it realistic for Governors to demand that the Trust be the best or is it OK to sit with the crowd.

lan Dukes added that in his 20 or so years as a consultant achieving an efficient discharge process is difficult and supported the ongoing efforts made to improve the situation.

Paula Clark replied the Trust should always aspire to improve and not be satisfied with OK but pointed out that there will always be places where the cost versus the level of

improvement is prohibitive. In these instances where there is no adverse risk to patients the Trust may choose to maintain the status quo.

John Edwards asked Council to agree to take each piece of evidence and build a bigger overall picture and the best return for our patients and not home-in on a specific item based on one piece of data.

Paula Clark said the Board recognised that IT solutions can help and explained that a significant investment in the upgrade of the wireless system will go ahead at the Russells Hall Hospital site enabling handheld devices to operate more effectively supporting solutions such as electronic prescribing to be rolled out in the next year. Paula concluded by saying the way our staff interact and talk with patient's costs nothing yet can have a big impact on the way our patients, families and carers perceive their experience.

Bill Hazelton queried the meaning of the corporate objectives listed on page two of enclosure four.

Paula explained these are the objectives from 2011/12 and the new set of objectives is shortly to be signed off as part of the 2012/13 annual plan.

Mandy Green then asked those present to note the update on the 'Friends and family' survey results which had been covered in a recent governor training session.

Action point – Richard Beeken to provide an update on discharge transformation project to September 2012 Strategy meeting

5.2 Quality Account audit feed back (enclosure 4a)
Mandy Green, on behalf of Derek Eaves, asked the Council to receive the report.

6. Foundation Trust Membership Report (enclosure 5)

Helen Board asked the Council to receive the enclosed report.

7. Update from Governance Committee (enclosure 6)

Rob Johnson explained the committee had met for the first time and asked the Council to note the list of sources of and depth of information the Committee intended to make reference to in order to gain assurance.

John Edwards asked John Balmforth if after perusing the report if he felt assured by the approach of the Governance Committee.

John Balmforth replied he was not entirely comfortable but felt it was a step in the right direction.

Rob Johnson added that there is many touch points for Governors to use to gain assurance.

David Stenson reiterated the Council would be greatly concerned if the Business Assurance Framework and the Risk Register did not contain items of concern.

8. Update from the Strategy Committee (enclosure 7)

John Balmforth presented the enclosure and explained the group had met for the first time to develop their work plan for the coming year. The key items include;

 development of Trust strategy relating to care for elderly patients with potential to participate in Trust project group

- potential task force activity to work with Membership Engagement committee
- Governor involvement in next years annual planning cycle

John Edwards asked for clarification on the item for recommendation for approval by the Council.

John Balmforth confirmed it should read that the work of the Strategy Committee should focus on providing input into the development of Trust strategy for elderly care provision.

John Edwards said Board had focused in greater depth on the treatment of an increasing number of patients who presented with stroke or dementia. He then asked the Council to note the report and asked those present to approve the area of work for the committee should focus on providing input into the development of Trust strategy for elderly care provision.

All present agreed.

7.30pm Richard Beeken left the meeting.

9. Update from membership Engagement Committee (enclosure 8)

Darren Adams asked the Council to note the report and asked those present to;

- Seek out events in their constituency area where Governors can recruit new members and engage with the wider public and liaise with the Foundation Trust office for support with resources
- Review the Trust Recruitment and Engagement Strategy document available on the Governor Portal

Tessa Norris added the strategic issues discussed at the Strategy Committee will translate into actions for the Membership Engagement Committee and gave an example of work being done with the local Practice Managers Alliance to facilitate strategic engagement with patient panels.

David Stenson commented on current developments with the HealthWatch organisation and other groups, including the Healthcare Forum., All these new and evolving bodies are keen to increase their patient involvement and suggested the Trust should investigate the opportunity of sharing information on Patient Involvement activities instead of each organisation all asking the same questions over and over.

Tessa Norris replied this is being pursued and links will be made at the right time and Trust representatives will be placed as appropriate with the Commissioning Groups and Health Care Forum.

John Edwards commented the new Local Health Economy landscape is slowly developing to reflect the criteria as set out in The Health and Social Care Act 2012

10. Update from Governor Development Group (enclosure 9)

Rob Johnson asked the Council to note the report and highlighted the following points to those present;

- Actions from the action plan arising from the Deloitte review of Council effectiveness in 2011 are now complete
- Governor Business Calendar was still in development
- FTGA 2012 elections now underway with experienced Governors invited to stand

- Governor comment for the Quality Account is complete and forms part of the Annual report to be presented to Council at the September Annual Members Meeting
- The group will review and contribute to the Full Council meeting agendas

Governor attendance at Full Council meetings and training sessions will be a standing agenda item for the Governor Development Group and non-attendance managed in accordance with the process ratified at the February 2012 full Council meeting.

Rob Johnson asked all Governors to utilise the online resources provided by the FTGA (Foundation Trust Governors Association) and access the wealth of information offered to new and existing Governors.

11. Any other Business

11.1 Staff car parking. Paula explained there had been a lot of anxiety with staff about the salary sacrifice scheme which has been set up to both help staff save money against their car parking costs and enable the Trust to offset some of the rising costs of running our car parks. She added the reality is that the cost of providing and running the Trust car parks continues to rise as our income is being squeezed down. Although the Trust had saved £12m last year, this year the target is £10m just to maintain our current position.

To help put this in perspective Paula gave a breakdown of costs to illustrate why the Trust has to look at this as part of the savings plan for the coming year and upheld the view that the Trust cannot continue to use money for staff parking that should be spent on patient care. Paula explained that the annual cost to run the car parks is £690k and a further £30k per year to retain part of the V1 maternity car park for staff parking. From July, the V1 car park will revert to patient parking and additional spaces opened up on the Slinc at the rear of the hospital.

Paula continued to say the Trust took advice from the Trust's tax advisors, RSM Tenon, who has helped to successfully implement salary sacrifice schemes at several other trusts. The scheme means staff will pay less and the Trust will earn more. RSM Tenon is holding Q&A sessions in the Russells Hall Hospital main reception to help answer staff queries.

Alison Macefield thanked Paula for the update and commented that communication with staff was vitally important for this to be successfully implemented.

12. Close of meeting

John Edwards thanked all for attending and advised that now The Act was in place, update sessions and Board to Council networking workshop sessions will be arranged to review the implications and impact for Governors.

The meeting closed at 7.55pm.

The next meeting will be held on Thursday 6th September 2012 at 6.00pm in the Clinical Education Centre, Block C, Russells Hall Hospital. He reminded all Governors that the date for the Annual Members meeting is Thursday 13th September 2012 in the Clinical Education Centre, Block C, Russells Hall Hospital.

John Edwards, Chair of meeting	
Signed	Dated



Action Sheet Minutes of the Council of Governors Held on 24th May 2012

	Subject	Action	Responsi	Due	Comment
Item No			ble	Date	S
CoG1/4.2	Board summary report	Denise McMahon to receive invitation to present at the next meeting of the Full Council of Governors	НВ	6/6/12	Done
CoG2/5.1	Patient experience report	Richard Beeken to provide an update on discharge transformation project to September 2012 Strategy meeting	CE	6/9/12	
P12/053.1	Dementia Report		DOT	4/10/12	
P12/066.5	Developing the Healthcare Workforce		HHR	1/11/12	