

Annual Members Meeting

Thursday 18th July 2019 Clinical Education Centre, 1st Floor South Block, Russells Hall Hospital, Dudley, DY1 2HQ

4.00pm Health Fair – an opportunity to meet staff from a range of services provided by the Trust including Podiatry, Dudley Rehabilitation Services, Children's Services, Falls team, Ophthalmology, Gastroenterology, Community Single Point of Access, End of Life and Dudley Improvement Practice

Learn about the work of the Council of Governors and arrangements for governor elections being held later in 2019.

Hear more about the Dudley People Plan and other initiatives in place to support our staff. Find out what makes The Dudley Group a great place to work and the fantastic job opportunities available.

5.30pm	Welcome		Fred Allen, Public Elected Governor, Lead Governor
5.35pm	Chairman's opening remarks and approval of minutes of the Annual Members Meeting 2018 (appendix 1)		Dame Yve Buckland, Interim Chairman
5.45pm	End of Life services presentation		Dr Joanne Bowen, Palliative Medicine Consultant
5.55pm	Trust Constitution		Fred Allen, Public Elected Governor, Lead Governor
6.00pm	Chief Executive Overview 2018/19		Diane Wake, Chief Executive
6.10pm	Quality & Performance Report 2018/19	Ī	Mary Sexton, Interim Chief Nurse
6.20pm	Trust Financial Accounts 2018/19		Tom Jackson, Director of Finance
6.30pm	Auditor's Report		Alison Breadon, PwC
6.40pm	Resolution to accept and acknowledge formal statutory documents		Dame Yve Buckland, Interim Chairman
6.45pm 7.00pm	Questions Close of Annual Members Meeting		Dame Yve Buckland, Interim Chairman

Please remember to hand in your Quality Priority questionnaire as you leave.



Minutes of the Annual Members Meeting The Dudley Group NHS Foundation Trust Thursday 19th July 2018 Clinical Education Centre, Russells Hall Hospital

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Governors Status Representing Mr Fred Allen Public Elected Governor Central Dudley Mr Arthur Brown Public Elected Governor Stourbridge Dr Richard Gee Appointed Governor **Dudley CCG** Public Elected Governor Central Dudley Ms Sandra Harris Mrs Viv Kerry Public Elected Governor Halesowen Mrs Ann Marsh Staff Elected Governor Allied Health Professionals & Health Care

Mr Rex Parmley Public Elected Governor Ms Yvonne Peers Public Elected Governor North Dudley Staff Elected Governor Non Clinical Staff Ms Karen Phillips Ms Nicola Piggott Public Elected Governor North Dudley Mrs Patricia Price Public Elected Governor Rest of the West Midlands

Mrs Edith Rollinson Staff Elected Governor Allied Health Professionals & Health Care

Scientists Mr Peter Siviter Public Elected Governor South Staffordshire & Wyre Forrest **Dudley Council for Voluntary Service** Mrs Mary Turner Appointed Governor Mrs Farzana Zaidi Public Elected Governor Tipton & Rowley Regis

Board of Directors Status

Mr Julian Atkins Non-executive Director DG NHS FT Mrs Ann Becke Non-executive Director DG NHS FT Mr Jonathan Fellows Non-executive Director DG NHS FT Dr Julian Hobbs Medical Director DG NHS FT Mr Jonathan Hodgkins Non-executive Director DG NHS FT Associate Non-executive Director DG NHS FT Dr Mark Hopkins Ms Siobhan Jordan Chief Nurse DG NHS FT Mrs Karen Kelly Chief Operating Office DG NHS FT Mr Andrew McMenemy Director of HR DG NHS FT Mr Richard Miner Non-executive Director DG NHS FT Mrs Jennifer Ord Chairman DG NHS FT Mr Glen Palethorpe Director of Governance & Board DG NHS FT Secretary Chief Information Officer Mr Mark Stanton DG NHS FT Chief Executive DG NHS FT

Ms Diane Wake Mr Chris Walker Deputy Director of Finance on behalf of DG NHS FT Tom Jackson Director of Finance

Mr Richard Welford Non-executive Director DG NHS FT DG NHS FT Mr Doug Wulff Non-executive Director

Apologies Name

Governors **Appointed Governor** Cllr Adam Aston Mr Bill Dainty Ms Lydia Ellis Dr Anthea Gregory Ms Michelle Lawrence Mrs Natalie Neale Mrs Margaret Parker

Mr Alan Walker **Board**

Mr Tom Jackson Ms Natalie Younes **Status**

Staff Elected Governor Public Elected Governor Appointed Governor Staff Elected Governor Public Elected Governor Staff Elected Governor Staff Elected Governor

Director of Finance Director of Strategy & Business Planning

Representing

Scientists

Representing

Dudley Metropolitan Borough Council Nursing & Midwifery Stourbridge Wolverhampton University Nursing & Midwifery Brierley Hill Nursing & Midwifery Partner Organisations' Staff

DG NHS FT DG NHS FT

Item No	AMM 2018 minutes			
1.	Introduction Apologies received as listed above.			
	Mr Fred Allen – Lead Governor, Public Elected Governor Central Dudley			
	Mr Allen formally welcomed everyone to the 2018 Annual Members Meeting (AMM).			
	Mr Allen thanked Rob Johnson, the Trust's previous Lead Governor, the Board and the Council of Governors for their dedicated support to the Trust and their support as he took over the role of lead governor.			
	He gave an overview of the role and responsibilities of Governors and explained that one of their primary functions was to hold the Board to account.			
	Mr Allan informed the meeting that there would be three Governor vacancies arising later in the year and there would be a call for nominations in October 2018. There would be an open event held allowing prospective Governors to understand more about the role which he urged those interested in the role to attend. The Trust would both advertise the vacancies and the open event later in the year.			
2.	<u>Maternity service showcase</u> – Dawn Lewis (Head of Midwifery) and Julie Oakley (Chair of Maternity User Group)			
	Dawn Lewis and Julie Oakley provided a showcase of Maternity services at the Trust.			
3.	Stroke services showcase – Bal Lelli (Stroke Co-ordinator), Jenny Glynn (Speech & Language Therapy Service Manager) and Donna Beckley (Clinical Nurse Specialist)			
	Donna Beckley, Bal Lelli and Jenny Glynn provided a showcase of Stroke services at the Trust.			
4.	Chairman's opening remarks and approval of minutes of the Annual Members meeting in 2017 (Appendix 1) – Jenni Ord (Chairman)			
	The Chairman thanked Mr Allen for his work of Lead Governor since his appointment in December last year, and thanked governor Yvonne Peers for her hard work along with the Clinical Education Charity which had seen sufficient funds raised to replace the audio visual equipment that was in use in the Lecture Theatre for this meeting.			
	The Chairman also thanked the teams from Maternity and Stroke for their informative presentations.			
	The Chairman then reminded those in attendance that the meeting gives the Trust's governors, members and the public the opportunity to receive the Trust's Quality Report and Annual Report, the Trust's Financial Accounts and the Auditors report on them, and to hear directly about the Trust's performance over the previous year along with the Trust's plans going forward.			
	The Chairman confirmed that there would be time at the end of the meeting for questions on the content of the reports and presentations.			

The Chairman reminded the meeting that if there were questions on personal experiences or concerns then there would be an opportunity raise these with members of the Board who would remain at the end of the meeting.

The Chairman gave an overview of the previous year, recognising that feedback from patients have been used to shape improvements to the Trust's services. The Chairman also said that the Trust has seen strong performance against many of the national NHS performance targets, including referral to treatment, diagnostics and cancer. In respect of cancer he Trust received a letter last autumn from the Secretary of State commending the Trust for its performance in this area. The exception to the strong performance was the Trust's performance against the 4 hour emergency access standard which has seen the Trust continue to struggle to keep pace with the increase in attendances and especially ambulance attendances.

The Chairman then went on to talk about the challenges in the last year. These had been in relation to manging its finances against the context of increasing demands especially those for emergency services. The Chairman then reminded the meeting of the results from the last CQC inspection which resulted in the Trust being rated across a number of individual services including Maternity, Community and Medicine as "good" although the there were services identified as requiring improvement and one service, emergency services which had been rated as inadequate for some domains. As had been referred to in the previous show cases, improvement plans have been developed for every service. The Trust is disappointed by the inadequate ratings given but is determined through the focus on quality and safety to secure improvement to its emergency services.

The Chairman said that both the NHS as a whole and this Trust in particular is a reflection of its staff and their commitment to patient service. The Trust continues to recognise its great staff through its annual Committed to Excellence awards which were once again a huge success. Members of the Trust's staff have also been recognised nationally for a number of awards. The Chairman congratulated all of the Trust's staff for their commitment and dedication recognising their determination to not let any of our patients down. This was illustrate through their determination to not let patients and colleagues down during the periods of bad weather and snow last winter.

The Chairman also thanked the volunteers for their fantastic continued contribution and dedication to the Trust.

The Chairman asked all those present if they were content to approve the minutes from the 2017 Annual Members Meeting as a true and accurate record.

All present agreed to approve the minutes without abstention.

5. Quality Report and Account 2017/18 – Siobhan Jordan (Chief Nurse)

The Chief Nurse presented the highlights of the Quality Report

During 2017/18 the Trust had 5 quality priorities, including:

- Patient Experience
- Pressure Ulcers
- Infection Control
- Nutrition and Hydration
- Medication

The Chief Nurse gave an overview of initiatives undertaken for each of the 5 priority areas.

The Chief Nurse informed the meeting that as part of the Trust's drive for improvement then two further priorities had been added for 2018/19 in respect of discharge planning and learning from incidents.

The Chief Nurse then updated the meeting that in November 2017 the Trust launched a Nursing Strategy called Progress and Pride, a summary of this was included with the papers. This strategy is built around 6 C's, these being compassion, commitment, care, courage, communication and competence.

The presentation concluded with a video of patients telling the Trust what the six C's mean to them.

6. <u>Trust Financial Accounts 2017/18 – Chris Walker (Deputy Director of Finance)</u>

The Deputy Director of Finance presented the Trust Financial Accounts for 2017/18.

The Deputy Director of Finance commenced his presentation by informing the meeting of the wider context the NHS operates within and the national challenging financial environment.

The Deputy Director of Finance then updated the meeting that in 2017/18 the Trust ended the year with an actual deficit of £5.8m against a planned surplus of £11.1m. The Trust had earned £4.7m STF incentive monies based on its performance in that year and the Trust incurred capital spending of £17.2m, and the Trust ended the year with a cash balance of £13.9m. Capital expenditure for 2017/18 related to the co-location of the Urgent Care Centre, Imaging Suite at the Guest Hospital, Electronic Patient Record system, Medical equipment and Estates maintenance.

For 2018/19 the Trust has a set control total of £804k deficit and to achieve this the Trust has developed a cost improvement programme of £15.4m.

The Deputy Director of Finance confirmed that the full Annual Report is available on the Trust's website but the numbers he had just presented to the meeting were within the summary financial statements included in the latest Your Trust magazine, handed out at the start of the meeting.

7. Auditors Report – (Joanna Watson PwC)

Ms Watson presented the External Auditors Report and explained that the purpose of external audit was to make sure that financial statements presented a true and fair view of the Trust and to ensure the Trust is delivering value for money and makes an effective use of its resources.

Ms Watson informed the meeting that the auditors had issued an unqualified audit report on the financial statements but had as with many NHS Trusts added a sentence in respect of a material uncertainty referring to the Trust's potential for reliance on external borrowing if the cost improvement programme does not deliver. Ms Watson informed the meeting that a number of Trusts were actually borrowing monies already to meet their obligations and that whilst this sentence had been added to the Trust's opinion they were not having to access any external financial support at the present time.

Ms Watson confirmed that the Auditors had issued a modified use of resources conclusion. This was driven by the most recent CQC inspection which indicated that there were specific

gaps in the application of the principles and values of sound governance in A&E.

Ms Watson then talked the meeting through their role in respect of the Trust's quality report and confirmed that the report was prepared correctly and contained a balanced view of the Trust. This resulted in the issuing of a positive "limited assurance" report on the content and consistency of the Quality Report. Ms Watson then discussed the external auditors work in respect of auditing a sample of quality indicators, two of which were mandated. These related to the 18 week referral to treatment indicator and the 4 hour emergency access standard. The external auditors had issued a "disclaimed" limited assurance report for both these indicators. Ms Watson talked the meeting through their work on a third quality indicator chosen by the governors which this year related to falls. The auditors although for local indicators do not provide a formal opinion, confirmed they had found no issues with that indicator.

Ms Watson concluded by informing the meeting that she would remain for questions at the end of the meeting.

8. Community Services Showcase – Michelle Pinto (Matron, Community) & Bianca Mascarenas (Clinical Locality Manager)

Michelle Pinto and Bianca Mascarenas provided a showcase of the Trust's Community Services.

9. Questions

Mrs Ord, Chairman, thanked all those who provided showcases of their services and then invited questions from those present.

Mr Durrell representing St Margaret's Well Surgery commented that it was disappointing that Patient Participation Groups (PPGs) and Patient Opportunity Panels (POPs) were not mentioned during any of the presentations given the work they have done with the Trust to develop its services.

Mrs Ord thanked Mr Durrell for his observations and agreed that PPGs and POPs were indeed valuable for the whole system to develop and improve.

Mrs Wake added her thanks to Mr Durrell for his input in relation to Dudley End of Life Care strategy development and confirmed she would ensure there were other opportunities to engage with PPGs and POPs.

Mr Stokes asked about the Trust's progress with its internal communication systems to ensure that patient records are available to all clinicians involved in the patient's care at the hospital.

Mr Stanton confirmed that the Trust had invested in the Digital Trust system and electronic observations had now gone live allowing the results to be available to all those involved in the care of the patient. Further development of the fully electronic patient record continues with a go live date for the end of the year for a fully electronic record to be operational.

Ms Wells was heartened to hear about the work of the Trust in respect of dementia care but asked if there were any plans for a fast-track system for Dementia patients entering the emergency department commenting that this area was daunting for dementia patients and asked if the Trust had considered if dementia patients could have a dedicated quiet area within A&E.

Mrs Kelly acknowledged that elderly confused patients and those with dementia do find a busy area like the emergency department daunting and that the Trust is working to fast-track these patients through the pathway away from the busy area. A frailty area had been established and dementia patients can stay in this unit receiving the care and attention they need. This area is deliberately located close by the emergency department but in a quieter area of the Trust. Mrs Kelly acknowledged there is always more the NHS and the Trust can do for these patients and the Trust seeks out every opportunity to improve its services for its most vulnerable patients.

Ms Jordan asked if Ms Wells would like to join the Trust user group which would allow the Trust to access her experience as an quasi expert patient / carer. Ms Wells confirmed that she would welcome that.

Mr McClymont updated the meeting on the dignity project he talked about at the last meeting and that he was grateful for the Trust's support with this and would be contacting the Trust in respect of the next stage of this project. Mr McClymont then updated the meeting that he had been contacted by the Dudley Voices for Choices Group who had raised a petition regarding the lack of Learning Disabilities nurses at the Trust. He asked if the Board will consider employing more nurses to ensure that there is 24 hour provision of these specialist nurses to support people with learning difficulties.

Mrs Ord confirmed that she was aware of this petition and a meeting was in her diary with the lead for this initiative and the petition.

Ms Jordan added that she had met with the lead for this petition previously and that since that meeting the Trust has been looking at how it can develop its service. The Trust was working with the Dudley Clinical Commissioning Group to look at how access over 7 days a week could be provided. Ms Jordan updated the meeting that a business case is being presented to Directors to improve the Trust's current service provision in this area.

Mr Stenson asked how the work with GPs to get patients treated closer to home was progressing since last year's meeting where this had been discussed. He asked how the new Emergency Treatment Centre was working in relation to achieving the 95% target.

Ms Wake confirmed that the Trust was actively engaged with working with GPs and looking at a number of pathways to move care out of hospital and deliver it within the community. Whilst the Trust is waiting for the formal outcome of the Multi-Speciality Community Provider procurement process the Trust has established a Transition Board with local GPs which is taking forward changes to care pathways. Ms Wake asked Mrs Kelly to update the meeting on the Emergency Treatment Centre.

Mrs Kelly confirmed that the new building had opened and was operating well. However soon after it opened it was clear that it was too small to cope with the level of ambulance arrivals, which have increased by some 7.6% since last year. The use of the new area was therefore reconsidered and changed to deliver the Trust's minor injuries/ambulatory care area. This area works really well with all patients being streamed at the front door by skilled primary care staff and then patients with minor injuries and ailments are treated in the same building. Mrs Kelly concluded that the minors area works extremely well and because of this area as a general rule does not breach the 4 hour standard.

Mr Orme asked the Trust and the Auditors to consider the use of abbreviations within the presentations so as not to dissuade people from both taking an interest in the NHS and Trust but also in asking questions. Mr Orme also commented that he felt there was an error in the Auditors report with the use of the word 'of' and rather than 'any'. Mr Orme said that he also had some specific questions which he would take the opportunity to speak to the

executive about at the end of the meeting to progress.

Mrs Ord apologised for the abbreviations in the papers and that he was correct we should make our information accessible and understandable to all.

Ms Watson confirmed that she would correct the error on page 60 of presentation with the replacement word. Ms Watson confirmed that the auditors opinion was positive and there was not any matter they needed to draw to the attention of the meeting outside that discussed in her presentation

Mr Payne raised the a question with the Trust's financial accounts and certain patterns that appeared in relation to operating surplus and financial deficit across the last three years when he had looked at these statements on the Trust's web site.

Mr Walker confirmed that the Trust received bonus monies in 2016/17 and that this impacted on the Trust reported position last year.

Mr Payne asked if the underlying deficit was being brought about due to the ongoing burden of the PFI.

Mr Walker confirmed that the PFI did not drive the Trust underlying position but that this was driven by the key aspects he referred to within his presentation and offered to meet with Mr Payne to discuss further his specific observations.

Mr Durrell commented that whilst patients have call buttons many felt that they did not want to use these for fear of burdening the nurses.

Ms Jordan confirmed that some patients do feel that way and in the patient video shown earlier that same view was expressed by one patient but the Trust and its nurses must ensure that patients are always aware that they can press the button when they need attention and that this is not a burden.

10. Close of Annual Members Meeting

Mrs Ord thanked all for their attendance and drew the Annual Members Meeting to a close.