

**MINUTES OF THE FOUNDATION TRUST COUNCIL MEMBERS MEETING HELD ON
TUESDAY 2 APRIL 2013 IN DISCUSSION ROOM 1, LEARNING CENTRE, HRI**

PRESENT:

Andrew Haigh	-	Chair
Owen Williams	-	Chief Executive
Bernard Pierce	-	Public elected – Constituency 1
Martin Urmston	-	Public elected – Constituency 1
Linda Wild	-	Public elected – Constituency 2
Harjinder Singh Sandhu	-	Public elected – Constituency 2
Christine Breare	-	Public elected – Constituency 4
Marlene Chambers	-	Public elected – Constituency 4
Johanna Turner	-	Public elected – Constituency 6
Liz Schofield	-	Public elected – Constituency 7
Janette Roberts	-	Public elected – Constituency 8
Andrew Sykes	-	Public elected – Constituency 8
Avril Henson	-	Staff-elected – Constituency 10
Eileen Hamer	-	Staff-elected – Constituency 11
Liz Farnell	-	Staff-elected – Constituency 12
Bob Metcalfe	-	Nominated Stakeholder – Calderdale Metropolitan Council
Dawn Stephenson	-	Nominated Stakeholder – SWYPFT
Jan Giles	-	Nominated Stakeholder, Kirklees PCT

IN ATTENDANCE:

Kathy Bray	-	Board Secretary
Keith Griffiths	-	Director of Finance
Julie Hull	-	Director of Personnel & Development
Ruth Mason	-	Associate Director of OD
John Rayner	-	Director of Health Informatics Service (for part of meeting)
Peter Roberts	-	Non-Executive Director
Catherine Riley	-	Assistant Director (for Lesley Hill)

1/13

APOLOGIES:

Apologies for absence were received from:

Wendy Wood	-	Public elected – Constituency 3
Lesley Hill	-	Director of Planning, Performance, Estates & Facilities
Peter Middleton	-	Public elected – Constituency 3
Vic Siswick	-	Public elected – Constituency 5
Lisa Francis	-	Public elected – Constituency 5
Kate Wileman	-	Public elected – Constituency 7
Mary Kiely	-	Staff elected – Constituency 9

Julie Couldwell	-	Staff-elected – Constituency 13
Chris Bentley	-	Staff-elected – Constituency 13
Sue Cannon	-	Nominated Stakeholder, NHS Calderdale
John Playle	-	Nominated Stakeholder – Uni. of Hudds.
Helen Thomson	-	Director of Nursing
David Wise	-	Medical Director

The Chair welcomed all Membership Councillors and Peter Roberts, (Non-Executive director observer) to the meeting.

2/13 AN OVERVIEW OF THE IM & T MODERNISATION PROGRAMME

John Rayner, Director of the Health Informatics Service attended the meeting and gave a presentation to those present. The presentation gave a brief look back at the current IT systems available within the Trust and a vision of how the Trust could invest in the future to embrace a paperless patient record environment. It was noted that the Trust's strategy was to follow the European EMR (electronic medical records) Adoption Model. The Trust was currently between levels 1 and 2.

The benefits and level of investment involved in this 7 stage model had been discussed and agreed with the Trust. This approach was in line with Trust's 4 strategic themes:-

1. Keeping the base safe
2. Strategic alliances
3. Internal reconfiguration
4. Integrating our services

and the 6 underlying principles going forward. Particular reference was made to principle 4 :-

1. Your Care, Our Concern will be our mission and our values will be built around Patients, People, Partnerships and Pride.
2. We will be clinically led and treat patients, staff and partners as we would expect to be treated ourselves.
3. Collaboration in the interests of patient care will be central to how we work both within and outside CHFT
4. **Real time patient information will always be at hand for us and our partners to provide the best seamless care.**
5. We will ensure regulatory compliance by improving our access to care for patients and prioritising their safety.
6. We will meet the financial circumstances and use this challenge as a driver for change and not solely as a constraint.

Work had commenced on the infrastructure which included a new state of the art computer room and new servers. Both clinical and business case developments had been developed and these were discussed. This involved installation of wireless connectivity on both sites and over 700 new devices. It was hoped to engage a single supplier for the future development of this programme which

would enable linkage of all systems in the future, based around an electric patient record.

The Membership Council asked about the pace at which the Trust would be able to move up the EMR Adoption Model and it was noted that training for all staff would be critical to its success as it would not be possible to revert back to paper systems. Consent for release of data was discussed. It was emphasised that patient records belonged to individual patients and it was not the Trust's property.

3/13 MINUTES OF LAST MEETINGS

The minutes of the last meeting held on Monday 14 January 2013 were accepted as a correct record.

4/13 MATTERS ARISING

- a. **Update on Health & Social Care Act 2012** - It was noted that this item would be discussed within the Constitutional Changes papers later in the meeting.
- b. **Resignation of Jonathan Webb** – It was requested that the minutes be amended to reflect that Jonathan Webb will be joining the NHS Commission Board's West Yorkshire Local Area Team and not the WY Commissioning Consortium Support Unit as stated in the minutes.

5/13 TRUST FINANCIAL AND SERVICE PERFORMANCE REPORT

On behalf of Lesley Hill, Catherine Riley presented the service performance report as at the end of February 2013. The key issues of concern were noted:-

HSMR (Hospital Standardised Mortality Rate) - The average ratio was 100. The rebased figure for CHFT for April to December 2012 was 103. More work was being undertaken.
Weekly reviews of deaths to identify patterns or trends were being introduced.

Emergency Readmissions within 30 days of discharge – Improvement in month had been achieved at 6.5% against the month agreed target of 7.3% but further work was required to reduce the year to date (YTD) performance from 8% to the agreed YTD target of 7.2%.

Fractured Neck of Femur within 36 hours – An improvement in the number of operations being undertaken within 36 hours had been noted.

There was still some work to be undertaken to achieve the agreed YTD target of 85%. The YTD performance currently stood at 67.1%. Currently extra theatre lists and reorganisation of theatre lists were being undertaken to address the issue.

Stroke % of patients spending at least 90% of time on Stroke Unit - It was noted that the Trust had not achieved the agreed monthly target of 63% although YTD performance was at 84.6%, against a target of 80%.

Delayed Transfer – Work was ongoing to address the worsening position. The YTD and monthly target was 3.5% and unfortunately the YTD performance stood at 5.3%. This was partly due to the increased activity during February and work was being undertaken with partners to reduce this, along with our own internal processes to improve delayed transfers.

Total time in A/E - 4 hours – At the end of February the target had not been achieved. 94.5% performance had been recorded, set against a monthly agreed target of 95%. It was noted that a great amount of work is being given to improving the position.

Cancer 2 week waits from referral to date first seen for symptomatic breast – The YTD performance was on target at 96.1%. The performance at February was 88.9% set against the monthly agreed target of 93%. It was noted that work was being undertaken with GPs to encourage patients to attend their appointment within 2 weeks.

MRSA & CDiff – It was noted that the MRSA YTD performance of 4 set against the agreed ceiling of 4 had been reported. C.Diff currently stood at 29 cases against the agreed ceiling of 33. The likely levels set by Monitor for 2013/14, were currently out for consultation

DNA Appointments – Work continued to improve the number of patients who do not attend appointments. The Membership Council queried whether difficulties in car parking had contributed to the level of non-attendance and it was noted that this, together with the delay in patient transport following attendance and it was agreed that these issues would be looked into.

ACTION: CR/LH

Choose and Book – Sufficiency of appointments – Concern had been expressed regarding the sufficiency of appointment slots on the Choose and Book System. The current month performance was below target. This equated to 21% of patients not being able to be book through the Choose and Book system. Work was being undertaken to address this. Discussion took place regarding the number of GPs able to access the electronic system and it was noted that work was being undertaken to increase the percentage.

FINANCE

Keith Griffiths presented the finance report as at 28 February 2013, month 11.

The main points highlighted from the report were:-

- The year to date Income and Expenditure position for Month 11 is a surplus of £4.95m, against a planned £2.74m.
- Cash position at the end of February 2013 of £31.33m (11.83m above plan).
- Capital spend to date of £6.42m (£2.07m below plan).
- The current forecast year end position is to achieve a surplus of £3.79m, compared with a plan of £3.00m.

- Financial Risk Rating of 4 at the end of February 2013, and the forecast is to end the year at level 4, against a plan of level 3 (on a scale of 1=poor to 5=good)
- The improvement in forecast year end position is due to
 - improved performance against Commissioning for Quality and Innovation (CQUIN) targets
 - additional funding from commissions to support the delivery of 18 week targets.
- Key risks:
 - under-achievement of recurrent Cash Reducing Efficiency Savings (CRES) will carry a significant pressure into 2013/14.

6/13 CHAIRMAN'S REPORT

- a. Francis Report** – The Chairman reflected on the Francis Report which had been dominating the media and NHS for several weeks. The Trust was taking this very seriously and this was being discussed throughout the Trust in various forums. Julie Hull reported that this mainly affected the culture and workforce and actions were being led under the strap-line “Having the courage to put the patient first”. The Family and Friends Test would be going live from 1.4.13.

It was noted that some discussion had taken place about the Francis Report at the last MC Development session held on the 27 March and the Chairman agreed that the Membership Council would be kept informed of developments.

- b. Chairs Information Exchange** – The contents of the minutes circulated with the agenda were noted. The Chairs of the DRGs had agreed that in the future the content of the SOAP's would be taken by exception only. Ruth reminded the Membership Council of the purpose of the meeting which was to enable sharing of information between the DRGs and to inform the MC formal agenda. The culture of openness and sharing which had grown over time was acknowledged and appreciated.
- c. Remuneration Committee** – Julie Hull reported that a formal report would be taken to the AGM in September 2013. It was noted that the Remuneration and Terms of Service Sub Committee for Chair and NEDs had met on the 27 March 2013 and agree no uplift in line with the NHS pay freeze directive. A draft submission to the Annual Report had been circulated to members on the Committee for approval.
- d. AGM Planning Sub Group** – It was noted that plans were being made for the Health Fair and AGM to be held in the John Smiths Stadium, Leeds Road, Huddersfield on Thursday 19 September 2013. It was noted that the reason for holding the event outside was due to possible interest around the Strategic Review. This large venue would enable as many people as possible to attend.

7/13 MC'S EXTERNAL ACTIVITIES REPORTS

a. Health and Social Care Review Event

Chris Breare and Liz Schofield had attended this event on 27 February 2013 at the Shay Stadium, Halifax. Chris Breare gave a brief outline of the event which had been well attended from partner organisations. This had been facilitated by representatives of the NHS Institute for Innovation and Improvement. The event gave opportunity for participants to engage in the vision for services being developed through the care streams and through patient engagement. Key themes discussed included:-

- Access to shared information and patient held information
- Use of new technology
- Flexibility of contacting the public through technology
- Integrated commissioning
- Workforce – flexibility in roles
- Person centred care – support self-care/self management
- Standardisation across the service, including hours of delivery
- Communication and sharing of data – between organization and between the system and patients.

b. Lead Governors Event

Janette Roberts fed back on a recent Regional Lead Governors Event. Unfortunately this had not been very well attended. It had been suggested that CHFT might host a forthcoming event, although difficulties with car parking at the present time was a barrier to this. Discussion had taken place regarding the FT Governors Association and the feedback from the Regional Group was that membership of this was not considered worth pursuing at the present time but it may be appropriate for consideration in the future.

c. FTN Training – Appointing of NEDs

It was noted that Chris Breare and Linda Wild had attended a recent mock FTN Training Course which was being developed by the Foundation Trust Network. The course included sharing learning and mock interview techniques. Chris Breare reported that this had identified that CHFT's Nominations Sub Committee were in a very strong position of having efficient and effective systems and processes in place.

8/13 CONSTITUTION

a. Updated Register of Members – Resignations/Appointments

The updated and revised register of members was received for information.

b. Register of Interests/Declaration of Interests

The updated Register was received. Any amendments were requested to be notified to the Board Secretary as soon as possible.

b. Constitutional Changes – Health & Social Care Act 2012

Julie Hull presented Appendix F. She reminded the Membership Council that a sub-group of MCs, NEDs and Exec Directors had been established to look at the changes required following the implementation of the Health & Social Care

Act 2012. The work resulted in the development of a Matrix which had been circulated with the papers. The Matrix identified the issues to be addressed and the changes required. As a result of this work, a number of constitutional changes had been identified and the proposed revisions to the Constitution were noted.

RESOLVED: All present agreed the Constitutional changes, subject to approval by the Board of Directors at its meeting to be held on Thursday 25 April 2013.

9/13 CHAIR/NED APPRAISAL PROCESS

Julie Hull presented the Chair/NED proposed appraisal process timetable. It was noted that Janette would be sending a letter out to all Members requesting they complete and return the Chair's appraisal questionnaire before the MC Development Session on the 13 May 2013 when the responses would be collated and discussed with the Membership Council.

It was noted that the Board of Directors had commissioned Foresight Partnership to undertake an external Board Development Review later this year. The Chairman identified that a number of Membership Councillors may be contacted to complete questionnaires on behalf of the Board and asked for honest and candid support. It was suggested that this board development process may influence the appraisal of Chair and NEDs process going forward in the future and any changes would be discussed with the Membership Council in due course.

10/13 PROPOSED ELECTION TIMETABLE 2013/14

The proposed Election Timetable, together with identification of the vacant seats, prepared by ERS (Electoral Reform Services) had been circulated with the papers. The process would commence in June and the results would be issued on 26 August 2013, prior to the formal election announcement at the Annual General Meeting on 19 September 2013. It was noted that briefing sessions for prospective candidates would be held on 6 and 13 June 2013. The Membership Council were asked to encourage any eligible candidates to stand for vacant positions. The current vacant seats were within:-
Constituency 1, 2, 3, 5 (two seats) and 8.

RESOLVED: All present approved the Election Timetable for 2013/14

11/13 FASTTRACK ITEMS

- a. Updated Membership Council Calendar 2013 - was received and the contents noted.

12/13 ANY OTHER BUSINESS

a. Board Development Review

The Chairman reported that Foresight Partnership had been commissioned to undertake a review of the Board effectiveness and governance arrangements. It was noted that as reported earlier in the meeting, this may affect the Membership

Council in some being asked to complete questionnaires and provide feedback and Membership Councillors were encouraged to give honest feedback.

Arrangements were being made for representatives from Foresight to observe the MC and BOD joint Workshop on the 7 May 2013.

b. South West Yorkshire Partnership NHS Foundation Trust

It was noted that representatives from SWYPFT had made a request to observe a future Membership Council Public Meeting to get a feel for how other organisations conduct their business. This had been approved and SWYPFT had confirmed that reciprocal arrangements would be available for any interested MCs from CHFT. Ruth Mason requested any interested MCs to come forward.

c. Mike Savage, NED

The Chairman reported that Membership Councillors had been sent an email from him advising that Mike Savage, NED had taken up the post of Chief Finance Officer for West and South Yorkshire Commissioning Support Unit with effect from 1 April 2013. As this post was a conflict of interest with his NED role, a decision had been made for him to leave immediately. Arrangements were being made for the Nominations Sub Committee to interview for his replacement as soon as possible.

13/13 DATE AND TIME OF NEXT MEETING

Wednesday 3 July 2013 commencing at 4.00 pm in the Boardroom, Huddersfield Royal Infirmary.

The Chair thanked everyone for their contribution and closed the meeting at 6.00 pm.

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Mr Andrew Haigh, Chairman

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Date