

NHS Foundation Trust

MINUTES OF THE FOUNDATION TRUST COUNCIL MEMBERS MEETING HELD ON WEDNESDAY 8 APRIL 2015 IN THE LARGE TRAINING ROOM, LEARNING CENTRE, CALDERDALE ROYAL HOSPITAL

PRESENT:

Andrew Haigh Chair

Wayne Clarke Public elected – Constituency 2 Reserve register - Constituency 2 Linda Wild Public elected - Constituency 3 Dianne Hughes Reserve Register - Constituency 4 Liz Schofield George Richardson Public elected - Constituency 5 Public elected - Constituency 6 Brian Richardson Public elected - Constituency 7 Lynn Moore Public elected - Constituency 7 Kate Wileman Staff-elected - Constituency 10 Avril Henson Staff-elected - Constituency 11 Eileen Hamer Staff-elected - Constituency 13 Chris Bentley Dawn Stephenson Nominated Stakeholder - SWYPFT

Bob Metcalfe Nominated Stakeholder - Calderdale Metropolitan Council

IN ATTENDANCE:

Chris Benham Deputy Director of Finance (for part of meeting)

Kathy Bray Board Secretary

Lesley Hill Executive Director of Planning, Performance, Estates & Facilities

(for part of meeting)

Melanie Johnson General Manager – CGSU – (for part of meeting)
Ruth Mason Associate Director of Engagement & Inclusion

David Anderson Non-Executive Director

Dr Alistair Morris Clinical Director for Modernisation – (for part of meeting)

13/15 APOLOGIES:

Apologies for absence were received from:

Martin Urmston Public elected - Constituency 1 Public elected - Constituency 3 Peter Middleton Public elected - Constituency 4 Marlene Chambers Grenville Horsfall Public elected - Constituency 5 Public elected - Constituency 6 Johanna Turner Public elected - Constituency 8 **Andrew Sykes** Public elected - Constituency 8 Jennifer Beaumont Staff elected - Constituency 9 Mary Kiely Liz Farnell Staff-elected - Constituency 12

David Longstaff Nominated Stakeholder – Clinical Commissioning Group

John Playle Nominated Stakeholder – Uni. of Hudds.

Janice Boucher Nominated Stakeholder - Locala

Hilary Richards Nominated Stakeholder – Kirklees Metropolitan Council

Owen Williams Chief Executive

David Birkenhead Executive Medical Director
Julie Dawes Executive Director of Nursing

Julie Hull Executive Director of Workforce & Organisational Development

Victoria Pickles Company Secretary

Keith Griffiths Executive Director of Finance - (for part of meeting)

The Chair welcomed all Membership Councillors, David Anderson, together with other attendees present.

14/15 MINUTES OF THE LAST MEETING - 20 JANUARY 2015

The minutes of the last meeting held on 20 January 2015 were approved as an accurate record.

15/15 MATTERS ARISING

- a. Care of the Acutely III Patient Programme Ruth Mason reported that arrangements were being made for David Birkenhead to attend the MC Development Session on the 22 July to give the Membership Councillors an update on the Acutely III Patient Programme.
- **b.** Perfect Week Ruth Mason reported that feedback on the Perfect Week had been included within an edition of the MC News.
- **c. Constitution Update** The Board Secretary advised that the update Constitution had now been uploaded to the Trust website.

16/15 ELECTRONIC PATIENT RECORD UPDATE – PATIENT INVOLVEMENT – MEMBERSHIP COUNCIL ROLE

Alistair Morris, Consultant Paediatrician/Clinical Director for Modernisation attended the meeting to give the Membership Councillors an update on the current position regarding EPR. It was noted that the contract with Cerner and Bradford Hospitals Foundation Trust had been signed on 4 March 2015. The Trust were developing work streams to 'go and see' other Trusts with EPR in place. It was noted that the building of the system would take some months and it was hoped to make CHFT live first in mid 2016, followed by Bradford. Ongoing monitoring and enhancements would be made as required. The powerpoint presentation gave an overview of the governance structure which would be put in place and the role of the Membership Council within this was discussed.

Discussion took place regarding the work streams which were being developed:-PAS

Order Comms

A/E

Clinical Documentation

ePrescribing.

(Patient Portal)

General discussion took place regarding the security of the system and that the Trust would take on board feedback received from others currently using EPR systems. It was noted that it was the responsibility of individual patients to access and give access to the portal and that an audit trail would be available to view who had accessed the

patients portal records. Current problems with the speed of the Electronic Document Management System for scanning existing paper notes were being addressed and it was acknowledged that once the EPR system was live the speed of access difficulties would not be encountered.

Dr Morris felt that the Membership Councillors input into the work streams, particularly ePrescribing and Patient Portal would be of particular help and it was agreed that Dr Morris would prepare a letter for the Chairman to send out to Membership Councillors setting out how they might be able to help with this project.

ACTION: AM/AH

17/15 TRUST FINANCIAL AND SERVICE PERFORMANCE

Lesley Hill, Executive Director of Planning, Performance, Estates and Facilities and Chris Benham, Deputy Director of Finance presented the Performance and Finance reports as at the end of February 2015 together with information regarding the March position where available. The key issues of concern were noted:-

PERFORMANCE REPORT

- a. A/E ACTIVITY The Trust had not achieved the A/E target and although it was hoped to meet this in the first quarter this has been raised as an issue with Monitor. It was noted that the department had been extremely busy over the Easter period although contingencies had been put in place at the request of NHS England. Discussion took place regarding the number of Green X patients awaiting transfer to local authority care. It was noted that the Trust continues to work towards 7 day working in the future although it was appreciated that the Trust was some way from fully achieving this.
- **b. NON-ELECTIVE CARE** over performance affected these targets, i.e. patient moves with a number of outliers in the hospital and delayed discharges.
- **c. 62 DAY SCREENING TO TREATMENT** Target not being met but this was compounded by the low numbers requiring treatment and some due to patient choice.
- **d. COMPLAINTS** An improvement in processing these was noted.
- **e. INFECTION CONTROL** As at the end of February there had been 2 C.Diff cases assigned to the Trust. The Hospital Standardised Mortality rate continued to be above the national average and this was being addressed through the work within the Care of the Acutely III programme although not as quickly as the Trust would like.
- **f. FALLS** The number had increased. Work was on going through the nursing structure to address this by reinforcing the work previously done which had then improved the position.
- **g. COMMUNITY INDICATORS** It was noted that this was a new indicator and included maternity and children. The Trust was working with GP colleagues and the CCG to develop the indicator. Feedback from the CCGs was that they were satisfied with the community services being provided by the Trust.

h. WELL LED – Work continued within the Trust to improve the Appraisal and Mandatory Training targets. Plans were in place to spread Appraisals throughout the year to reduce the buildup of outstanding appraisals at year-end but was yet to show a real difference.

FINANCE REPORT

Chris Benham presented the finance report as at 18 February 2015.

The main points highlighted from the report were:-

- The year to date Income & Expenditure position for Month 11 is a deficit of £1.37m, against a planned surplus of £2.12m.
- Exceptional costs of restructuring have been incurred at a value of £1.34m and increase the deficit to £2.71m.
- CIP has delivered £8.66m against a plan of £16.96m.
- The cash position at the end of February 2015 is £16.77m against the planned level of £22.56.
- Capital spend to date of £19.71m compared to planned levels of £22.05.
- The Monitor 'Continuity of Service Risk Rating' (CoSRR*) is 2 at the end of February 2015 against a plan of 3.

Key Points and Risks:

- Year end forecast in line with reforecast deficit of £4.30m.
- CIP schemes to deliver £9.88m, £9.65m behind plan.
- Capital forecast to spend £22.39m.
- Forecast year end cash balance of £10.79m.
- Reserves utilised against CIP shortfall, after nursing investment.
- Winter pressures borne within re-forecast.
- Further restructure costs to be recognised within March and could affect closing cash position.
- Year end CoSRR of 2.
- Monitor enforcement.

18/15 CHAIRMAN'S REPORT

- a. MC/NED INFORMAL WORKSHOP 12.2.15 It was noted that the last MC/NED Workshop had been well received with good debate and discussions. This had been partly due to the small group present and feedback received was that they liked the format of the meeting. It was agreed that for further informal workshops a flexible approach would be taken depending on the numbers present and where possible create small discussion groups.
- **b.** CHAIR'S INFORMATION EXCHANGE MEETING 23.3.15 The minutes circulated with the agenda was taken as read. Any questions were welcomed to the Chair.

19/15 CONSTITUTION

a. MEMBERSHIP COUNCIL REGISTER

The updated register of members was received for information. It was noted that Joan Taylor, Constituency 2 had resigned on 3.2.15 and this vacancy would be left vacant until the Elections later in the year.

b. REGISTER OF INTERESTS/DECLARATION OF INTERESTS

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

c. MEMBERSHIP COUNCIL STANDING ORDERS

The updated Standing Orders was received and approved. It was noted that these would be circulated to the Board of Directors for agreement at its next meeting on Thursday 23 April 2015. Subject to approval these would then be loaded onto the Trust Policies site.

ACTION: BOD MEETING AGENDA – 23.4.15

20/15 MEMBER AND PUBLIC ENGAGEMENT

Ruth Mason presented a paper prepared which included actions required following annual review of the Code of Governance and requirements under the Health and Social Care Act 2012:-

- To hold the non-executive directors individually and collectively to account for the performance of the board of directors and
- To represent the interests of NHS Foundation Trust members and of the public

It was noted that the paper covered the numerous opportunities when the Membership Councillors were able to demonstrate 'holding to account' and 'representing the interests of members and of the public' through opportunities to understand the Trust and its strategy, sources of information and points of contact with staff, members, and the public. Future arrangements which were being put in place for the Membership Councillors to gain public views, in liaison with Healthwatch and the CCGs/patient reference groups were discussed.

It was suggested that a Task and Finish Group involving 2/3 Membership Councillors and a Non Executive Director be established to capture and consider other opportunities for Membership Councillors to 'represent the interests of members and the public'.

ACTION: RM

Linda Wild questioned whether the Membership Council should have challenged the Non Executive Directors regarding the financial position prior to Monitor intervening. The Chairman reported that the Board of Directors had similar thoughts but the strengthening of the governance arrangements now in place would improve rigour and accountability. This had entailed the review of the remit of the various sub-committees to the Board, to which designated Membership Councillors had been invited to be present in the future.

21/15 QUALITY ACCOUNT

Mel Johnson attended the meeting to give the Membership Council an update on the priorities for 2015-16:-

<u>Domain</u> <u>Priority</u>

Safety Improving Sepsis Care

Effectiveness To ensure Intravenous antibiotics are given correctly and on time

(continued from last year)

Effectiveness Improving the discharge process

Experience Better food

Discussion took place regarding the external scrutiny which would be undertaken by KPMG and discussion took place regarding the audit of the data quality which would be undertaken on the chosen indicators. Following discussion it was agreed that the following should be audited as part of the Quality Accounts:

Length of Stay in Medicine – first choice Falls in Hospital – second choice

The Chairman thanked Mel for the work she had undertaken on preparing the Quality Accounts and wished her all the best for the future as she was due to leave the Trust at the end of the month.

22/15 CHAIR/NON EXECUTIVES ANNUAL APPRAISAL PROCESS

Dr David Anderson as Senior Independent Non Executive Director presented the timeline for the Chair and Non Executive's Annual Appraisal Process. All presented noted the timeline and agreed that the process should be led Dr Anderson this year.

Discussion took place regarding the use of alternative (user friendly) paperwork in the future and it was noted that this was in hand by the Company Secretary.

ACTION: Company Secretary

23/15 INFORMATION TO RECEIVE

The following information was received and noted:

- a. Remuneration Sub Committee NEDs and Chair Minutes 27.1.15
- b. Updated Membership Council Calendar 2015.
- c. Attendance Register for Membership Council Meetings 1.4.14 to 30.3.15

24/15 ANY OTHER BUSINESS

a. Trust Organisation Structure

Rev Wayne Clarke questioned why the Membership Council had not been advised of the revised organisation structure affecting the Divisions. The Chairman apologised for the oversight but this decision had been made after the last MC meeting had taken place. The Chairman advised the Membership Council of the rationale and reasoning behind the revised divisional arrangements which had resulted in the following Divisions:-

Surgical and Anaesthetic Services - unchanged except A/E moving to Medicine

- Medicine Division to include A/E Department
- Children, Women and Families to include DATs
- DATS no longer existed as a separate division.
- Community Division to be created

It was noted that in the future the Membership Councillors allocation to the Divisional Reference Groups would be amended accordingly.

b. Trust Public Website

Ruth Mason advised the Membership Councillors that an automated message had been returned from the "Contact your Trust MC" site that the person concerned was unhappy about the use of a £20 voucher to 'bribe members to sign up'. All present agreed that this was an acceptable marketing technique and the voucher had actually been donated to the Trust. An appropriate response was to be returned to the sender.

25/15 DATE AND TIME OF NEXT MEETING

Thursday 9 July 2015 in the Boardroom, Huddersfield Royal Infirmary commencing at 4.00 pm

The Chair thanked everyone for their contribution and closed the meeting at 6.30 pm.