

**MINUTES OF THE FOUNDATION TRUST COUNCIL OF GOVERNORS MEETING HELD ON
WEDNESDAY 4 JULY 2018 IN THE BOARDROOM, SUB-BASEMENT, HUDDERSFIELD
ROYAL INFIRMARY**

PRESENT: Philip Lewer	Chair
Publicly Elected Governors	
Brian Moore Stephen Baines Paul Butterworth Rosemary Hedges Diane Hughes Alison Schofield Kate Wileman	Public elected – Constituency 8 /Lead Governor Public elected – Constituency 5 Public elected – Constituency 6 Public elected – Constituency 1 Public elected – Constituency 3 Public elected – Constituency 7 (+ carer) Public elected – Constituency 4 (Reserve Register)
Staff Governors	
Dr Peter Bamber Linzi Smith Sian Grbin	Staff elected – Constituency 9 Staff elected – Constituency 11 Staff elected – Constituency 13
Stakeholder Governors	
There were no stakeholder governors present at the meeting	
IN ATTENDANCE: Alastair Graham Alison Wilson Amber Fox David Anderson Gary Boothby Helen Barker Lesley Hill Lindsay Rudge Lisa Williams Mandy Griffin Owen Williams Sharon Appleby Victoria Pickles	Non-Executive Director General Manager, Estates Corporate Governance Manager Non-Executive Director/SINED Executive Director of Finance Chief Operating Officer Executive Director of Planning, Estates & Facilities Deputy Chief Nurse Assistant Director of Service Development Managing Director, Digital Health Chief Executive Transformation Programme Manager Company Secretary
APOLOGIES FOR ABSENCE WERE RECEIVED FROM:	
Anna Basford Brian Richardson Chris Reeve David Birkenhead Jackie Murphy Lynn Moore Suzanne Dunkley Veronica Maher	Director of Transformation and Partnerships Public elected – Constituency 5 Nominated Stakeholder - Locala Executive Medical Director Chief Nurse Public elected – Constituency 7 Executive Director of Workforce and OD Public elected – Constituency 4

34/18 WELCOME AND INTRODUCTIONS

The Chair opened the meeting and introductions were made around the table.

35/18 Digital Health Stabilisation and next steps

The Managing Director for Digital Health presented the story on Digital Health and what the future state will look like. The Managing Director for Digital Health reminded the Council of Governors that Calderdale and Huddersfield NHS Foundation Trust had implemented the electronic patient record (EPR) in partnership with Bradford Teaching Hospitals Trust, with CHF T going live in May 2017 and Bradford in September 2017.

She described the process to achieve stabilisation. All but one of the 99 items on the stabilisation plan had been resolved. There remained a number of larger issues to address. A number of forward projects have been agreed with Bradford including those to make the EPR function better and address the fractured work flows.

The key ambition is to become a UK reference site for Cerner. The business as usual team are now in place that look after the Core EPR, this is a shared resource with Bradford. The Electronic Patient Record has transformed the way care is delivered and a Digital Health Team was implemented on 4 June 2019 with training and change resources and this team will focus on re-education. One element outstanding from the stabilisation plan is the regular day attender which is being built next week.

An EPR upgrade is scheduled for early next year and in addition the drug catalogue in EPR will be updated in November.

The Trust were 113th in the country when it came to our Digital Maturity, last October the Trust were 13th place and are technically the 3rd highest in the country. The adoption rate of the Trust has been 1st class for usage across the UK.

There are now 3,000 patients registered on the patient portal and can view and print their records via the YourEPR application. Patients are asked to sign-up to the patient portal when they attend an Outpatient appointment; however, if they prefer, they can request access to their copy letters and results will still be sent to their GP.

The Electronic Document Management System (EDMS) will cease and a scanning solution is being explored from Cerner. The outstanding un-validated letters in EPR are now in the 100's and all rules have been put in place to stop this from re-occurring.

The Director for Digital Health was thanked for her presentation and enthusiasm.

36/18 DECLARATION OF INTERESTS

There were no declarations of interest at the meeting.

37/18 MINUTES OF THE LAST MEETING – 4 APRIL 2018 & 8 MAY 2018

The minutes of the last meeting held on 4 April 2018 and 8 May 2018 were approved as an accurate record.

38/18 MATTERS ARISING

No further matters arising.

39/18 CHAIR'S REPORT

a. UPDATE FROM CHAIRS INFORMATION EXCHANGE MEETING – 25.6.18

The Chair reported on the minutes from the meeting held on the 25 June 2018 which had been included with the agenda (Appendix B). The next meeting was scheduled to be held on the 18 December 2018.

OUTCOME: The Council of Governors **RECEIVED** and **NOTED** the Chairs Information

PERFORMANCE AND STRATEGY

40/18 CARE QUALITY COMMISSION REPORT

The Chief Executive announced the fantastic news the Trust received with achieving the CQC rating of 'Good' overall. The Chief Executive noted his thanks to the wider workforce, volunteers, our partners and our governors. It is important to reflect on the contribution which has been a joint effort, including patients as their feedback also counts. The Chief Executive explained the CQC will move to a Single Oversight Framework now which is a judgement on how we use resources. The ratings received following the inspection this year were as follows:

- Safety = Requires Improvement
- Caring = Good
- Response = Good
- Effective = Good
- Well-Led = Good
- Use of resources – Requires improvement

Our Trust is the 1st Trust in the North of England to be assessed under the new framework. The CQC prepared for 10-50% of those Trusts that were already designated as 'Good' or 'Outstanding' to go backwards under the new regime.

The Chief Executive highlighted moving from 'requires improvement' to 'good' cannot be understated given our underlying deficit position. He highlighted the importance of celebrating this status of the CQC 'Good' rating and the real achievement it reflects.

The next steps is action planning and this will be shared with the Quality Committee, Finance and Performance Committee, Board of Directors and Council of Governors.

Maternity services are now classed as 'Good' with some elements of outstanding practice which is a great move forward after receiving a 'requires improvement' from the previous inspection.

The Chief Executive passed on thanks to Brendan Brown, our former Executive Director of for his leadership and approach to working with the CQC.

A governor raised disappointment there is no place of safety for mental wellbeing patients, the main area of concern being A&E. The Chief Operating Officer reported that work on this had begun on the two sites. Alastair Graham reference the discussion at the Board of Directors on the 'Treat me Well' campaign.

OUTCOME: The Council of Governors **NOTED** the CQC update

41/18 RECONFIGURATION UPDATE - LETTER FROM THE SECRETARY OF STATE FOR HEALTH AND SOCIAL CARE

The Chief Executive made reference to the letter received on 12 May. There is particular focus on a Care Closer to Home and a reduced bed numbers model; however, there is concern in how the Trust can be confident on demand. NHS Improvement and NHS England (the regulators) have a deadline of 10 August to respond to the Secretary of State. If an agreement can't be made, a decision will be made by the Secretary of State. The Chief Executive highlighted the regulators do not see a model of having three A&Es across Calderdale, Kirklees and Wakefield which serves 930,000 patients and a solution with lower capital is required.

The outcome will likely be a modified plan for HRI with more flexibility on the A&E

capacity. The reconfiguration will not impact on the plans to have a single ICU. The Chief Executive clarified that it is likely that the overall current bed base will remain in place until Care Closer to Home shows evidence it is making a change. He pointed out that the Trust had worked with its clinical staff and the clinical commissioning groups to develop the draft proposals for submission to the regulators.

The Chief Executive referenced the enforcement notice which is still active for the Trust.

OUTCOME: The Council of Governors **NOTED** the reconfiguration update

42/18 OUTPATIENT TRANSFORMATION PROGRAMME

Lisa Williams, Assistant Director of Service Development described the Outpatient Transformation project launching with partners in Commissioning Groups across Greater Huddersfield and Calderdale in partnership with Healthwatch. The projects were started around 1 year ago with the focus on delivering care differently e.g. nurse led follow ups and one stop clinics.

The project team visited other organisations such as Stockport, Airedale and Morecambe Bay to find out 'What Good Looks Like' and how to shorten the patient journey and empower patients in the community to support self-care. The project team reviewed feedback from the Healthwatch survey which described more use of Digital technology, virtual clinics and the struggles with car parking.

The Outpatient Transformation Project is consulting with as many forums as possible with support from Anna Basford. There has been attendance at the GP Board, GP Federation and a Board of Partners has been created to steer this project including Directors, Clinical Directors and the Associate Medical Director.

The Project asked for a Governor to volunteer to help drive this project forward. Alison Schofield volunteered declaring an interest in chronic pain and will report back with updates to Council of Governors.

A governor raised more clarity is needed regarding Care Closer to Home and patients that are still being taken further away from home for Specialist appointments. Patients require more information to understand the reason they need to attend an appointment, such as specific equipment is required.

Lisa Williams attended the Digital Conference where a clinician described the transformation of their Stroke clinics via Skype.

OUTCOME: The Council of Governors **NOTED** the Outpatient Transformation Update and Alison Schofield volunteered to help drive this project forward

43/18 TRUST PERFORMANCE

a. Financial Position and Forecast

The Executive Director of Finance reported the Trust has not accepted the 18/19 NHS Improvement Control Total of a £23.2m deficit and is therefore not eligible to receive any of the £14.2m Provider Sustainability Funding allocated for this financial year, (previously Sustainability and Transformation Funding).

The year to date deficit is £9.24m as planned, in line with the plan submitted to NHSI.

The total forecast deficit is £43.04m, just within plan.

The National Pay Award for all staff (excluding including doctors and apprentices) will cost the organisation £8M and only £2.3M funding was in the plan.

Sian Grbin asked how much funding was for the conversion to a treatment room on the Cardiology Ward at CRH as feedback was it was in the millions, within the PFI. The Executive Director of Finance agreed to look into this and report back on the breakdown of costs.

ACTION: Executive Director of Finance

b. Performance Report (including Good News Stories)

The Chief Operating Officer reported a positive position with improvements from April into May with 4 amber, 2 green and no red domains.

The main highlights from the report were:

- The SAFE domain is now green following improvements in Harm Free Care including pressure ulcers
- Agency spend has reduced
- Cancelled operations are reducing and it has been the lowest month ever despite reducing bed base
- Sickness levels are on a positive reduction
- Positive recruitment into consulting staffing in the Medicine Division
- Complaints closed within timeframe - 2 Divisions have been escalated and are asked to attend the next Quality Committee
- Paediatrics have received a CHKS accreditation (National Healthcare Intelligence and Quality Improvement Service)
- Emergency care standard – closed June down at 94.78%, both sites have improved, Huddersfield was above 90% in June and Calderdale delivered over 95% every day of the month in June with very high attendance – there are discussions around how to acknowledge this achievement
- Finance & Performance Committee are looking at how we rank against the 3 metrics (national standards of emergency care, cancer and referral to treatment) and we are the best performing organisation in England thank you to all of our staff

44/18 Update on Wholly Owned Subsidiary

The Executive Director of Planning, Estates & Facilities informed the Governors the business case for the Wholly Owned Subsidiary is now available on the internet under Publications and Full Business Case. The project is on track to go live the end of August.

She explained that the TUPE consultation with staff is underway. The Trust is providing 'letters of comfort' with assurances from Board on the principles and agreement in relation to the transfer of staff. The team is also working with Unions on an agreement to protect these principles. The Executive Director of Planning, Estates & Facilities reported they are currently working on terms and conditions for new staff as well as the legal agreements.

There are still constructive relationships with our Unions, Unison and GMC. It was noted Unison didn't get enough votes to warrant strike action.

The Executive Director of Planning, Estates and Facilities described the significant amount of engagement taking place with staff. Alastair Graham added a number of Meet the Board sessions have taken place as part of the consultation. Work will start to take place around engagement and communications on the wholly owned subsidiary to inform the rest of the organisation.

The Executive Director of Planning, Estates and Facilities explained that she had met with

the Calderdale Scrutiny Panel who had agreed to send a letter to the Trust about their views. This has not yet been received and there had been a mixture of views expressed at the meeting.

A governor asked about the costs incurred as part of the set up of the company and if these costs are refundable to the Trust. The Executive Director of Finance explained the costs incurred are being considered; however, the Trust achieved a saving of over £2M to invest in patient care in last financial year. The money saved so far was around historical capital purchases over last 10 years, to reclaim an element of VAT. A governor responded this is an endemic in the health service and systems should be changed to allow hospitals to receive VAT back without diluting the NHS.

Discussion took place around how governors can have their views on the Wholly Owned Subsidiary recorded. The Chair asked them to write to the Company Secretary (Victoria.Pickles@cht.nhs.uk) stating whether or not they are in agreement. This will be recorded and reported at a future meeting. The public governors not in attendance will be informed.

ACTION: All Governors to send views to Company Secretary

Proposed changes to the Trust's Constitution to the staff membership categories

The Company Secretary asked the Council of Governors to decide if the Wholly Owned Subsidiary staff that transfer remain Foundation Trust members and have the right to stand as governors should they choose. Any new staff members wouldn't become a Foundation Trust member until they have been employed for 1 year.

Feedback from the lead governor was the Wholly Owned Subsidiary is a separate company not employed by the Trust and that the same conditions as ISS staff should apply as they are a 3rd party. The Company Secretary responded the contractual relationship is entirely different.

The Company Secretary informed the governors what it means to be a staff member is available in the Constitution on the policies database.

The suggestion was staff who have been members of the Trust to remain as members. Voting was deferred to the next meeting on the 19th July and governors are asked to read the papers and take any advice and guidance outside of the meeting.

OUTCOME: The Council of Governors **NOTED** the update on the Wholly Owned Subsidiary and will **WRITE** to Vicky Pickles with their views. **VOTING** on the Constitution will take place on 19 July

45/18 Car Parking Charges Prices Proposal

The Executive Director of Planning, Estates and Facilities explained that the item on car parking was brought to the Council of Governors as part of the consultation process prior to going to the Board for a decision. Feedback from the Governors would be presented at the Board meeting where the item is discussed.

Alison Wilson presented the car parking proposal which set out future arrangements for parking charges, access to spaces and additional parking options. The majority of complaints in Estates and Facilities are regarding car parking, particularly Acre Mill and the automatic number plate recognition scheme. In August last year, the contract was terminated and the same system at Huddersfield was brought in along with a chip and pin payment machine at Acre Mills. Since then, the number of complaints has reduced.

There are still complaints being received from members of the public struggling to find car parking spaces. Work is taking place with Calderdale Council to find parking spaces and

permits and a review of staff car parking is going to be rolled out across the Trust.

In terms of public parking, the proposal is to increase the cost from £2.80 to £3.00 which falls in line with partner sites. The proposal will also introduce a weekly pass for regular visitors and a 24 hour increase.

In terms of the income generation, based on the current usage of car parking at CRH, HRI and Acre Mill the total increases would realise a potential income of £86k for public parking and £35k for staff parking over 12 month period.

Alison Schofield raised the issue of charging for blue badge holders to park and a feeling that this had not properly been consulted upon. She asked that consideration be given to someone attending the disability forum to explain the parking arrangements. She also asked that greater clarity be given to the public as to who is entitled to free parking. A governor raised there should be no charges if a patient or visitor was to stay for treatment for a week. Alison Wilson explained there are certain categories that are allowed free parking and at the moment a weekly stay would cost £49.

Sian Grbin raised a question about the number of hospital that charge staff to park as figures showed that it was a third of hospitals nationally. The Executive Director of Planning, Estates and Facilities said that she did not recognize those figures and would check the available data. Sian explained the unpaid hours of staff would be larger saving than parking and feels parking costs should go down, not up.

The Chief Operating Officer explained that the Board had to make difficult decisions in light of the Trust's financial position and would welcome any other ideas the Governors have around savings. It was agreed to consider holding a joint workshop between the Board and the Council of Governors to consider the financial position and ideas for generating savings.

ACTION: Company Secretary / Corporate Governance Manager

The Executive Director of Finance explained the money would have to be spent in different ways if there were no parking charges. Staff on the lowest paid band will see a 5% parking increase and 9% staff increment.

The Company Secretary asked that Governors provide a response to her on their views on the car parking proposal. These would then be collated and presented to the Board alongside the item on car parking as part of their decision making.

OUTCOME: The Council of Governors **AGREED** to provide a response to the Company Secretary on the Car Parking Charges proposal.

GOVERNANCE

46/18 COUNCIL OF GOVERNORS REGISTER

The updated register of members as at 1 July 2018 was received for information. Governors will be updated on the Register at the end of this month 31 July 2018.

OUTCOME: The Council of Governors **APPROVED** the Register

47/18 REGISTER OF INTERESTS/DECLARATION OF INTERESTS

There have been no changes to the Register of Interests since the last meeting and the Chair requested that any amendments be notified to the Corporate Governance Manager as soon as possible.

OUTCOME: The Council of Governors **APPROVED** the Register of Interests

48/18 UPDATE ON PROCESS FOR ELECTION OF LEAD GOVERNOR

The Company Secretary informed the Council of Governors there have been 2 applications for election of lead governor. This would require a competitive process. Information and instructions will be sent out next week with 2 weeks to respond.

OUTCOME: The Council of Governors **RECEIVED** the update on process for election of Lead Governor

49/18 PROPOSAL FOR FUTURE COUNCIL OF GOVERNORS MEETINGS

The Company Secretary presented the proposal for future meetings with the purpose to give governors more opportunity to hold the NEDs to account for the performance of the Board. Feedback was requested on the proposal in advance of the meeting and so far has been in agreement.

The recommendation for 'Holding to Account' training was following the last training event and this will include training on induction and a full course every 2 years. There was general support for this element.

There was general support for a private Council of Governors meeting. The Trust will provide a room for an agreed date and location.

There was a difference of opinion around Divisional Reference Groups allocation for three years. The Company Secretary explained that any governor can raise a concern if they don't believe it is working or if they would like to change and this would be accommodated where possible.

The Chairs Information Exchange meeting was discussed. The Company Secretary highlighted that only the Chairs of the Divisional Reference Group currently attend this meeting and therefore are privy to information that is not open to all. By circulating the Summaries on a Page from each DRG and extending the private session with the Chair it is hoped that this will give greater opportunity for all governors to have access to information. As a result it was agreed to cease the Chairs Information Exchange meeting.

The Company Secretary provided re-assurance the feedback has been received from some of the governors not in attendance.

OUTCOME: The Council of Governors **APPROVED** the proposal for future Council of Governors meetings

50/18 UPDATE FROM BOARD SUB COMMITTEES

The updates from Board Sub-Committees were deferred to the next full meeting

a. QUALITY COMMITTEE

b. CHARITABLE FUNDS COMMITTEE

c. PATIENT EXPERIENCE AND CARING GROUP

OUTCOME: The Council of Governors Sub Committees/Groups updates were **DEFERRED** to the next full meeting.

51/18 INFORMATION TO RECEIVE

a. Updated Council Calendar – The updated Calendar was noted.

52/18 ANY OTHER BUSINESS

Paul Butterworth raised a concern that to receive incremental pay staff need to have undertaken their appraisal; however, staff who haven't undertaken an appraisal are still

receiving increments. This will be raised with Workforce Committee and the Company Secretary will provide a response to Paul Butterworth.

ACTION: Company Secretary

DATE AND TIME OF NEXT MEETING

Date: Thursday 19 July 2018 commencing at 4.00 pm

Venue: Large Training Room, Learning Centre, CRH

Date: Thursday 19 July 2018 – Joint BOD/COG Annual General Meeting commencing at 6.00 pm

Venue: Large Training Room, Learning Centre, CRH