

NHS Foundation Trust

Council of Governors Meeting Minutes, 17 July 2014

Attendees:

Sir Tom Walter Chris Christine	Hughes-Hallett Balmford Birch Blewett	Chairman Patient Patient Public	Hammersmith and Fulham 2	TH-H WB CBir CBle
Nicky	Browne	Appointed	The Royal Marsden NHS Foundation Trust	NB
Anthony	Cadman	Patient		ACa
Catherine	Faulks	Appointed	Royal Borough of Kensington and Chelsea	CF
Prof Brian	Gazzard	Staff	Medical	BG
Angela	Henderson	Patient		AH
Anna	Hodson-	Patient		AH-P
	Pressinger			
Jenny	Higham	Appointed	Imperial College	JH
Melvyn	Jeremiah	Public	Westminster 2	MJ
Martin	Lewis	Public	Westminster 1	ML
Kathryn	Mangold	Staff	Nursing and Midwifery	KM
Susan	Maxwell	Patient		SM
Wendie	McWatters	Patient		WMW
Tom	Pollak	Public	Wandsworth 1	TP
Sandra	Smith-Gordon	Public	Kensington and Chelsea 2	SS-G
Charles	Steel	Patient		CS
Steve	Worrall	Public	Wandsworth 2	SW

IN ATTENDANCE:

Professor Richard Kitney	Non-executive Director	RK
Jeremy Loyd	Non-executive Director	JL
Karin Norman	Non-executive Director	KN
Eliza Hermann	Non-executive Director	EH
Liz Shanahan	Non-executive Director	LS
Jeremy Jensen	Non-executive Director	JJ
Tony Bell	Chief Executive	APB
Rakesh Patel	Director of Finance	RP
David Radbourne	Chief Operating Officer	DR
Susan Young	Director of Human Resources and	SY
	Organisational Development	
Patricia Gani	Healthwatch representative	PG
Benjamin Sheriff	Deloitte	BS
Holly Ashforth	Deputy Chief Nurse	HA
Melanie Van Limborgh	Head of Assurance and Quality	MvL
Katie Drummond-Dunn	Communications Manager	KD-D
Vida Djelic	Board Governance Manager	VD

1.0 Council of Governors Quality Awards

TH-H

The Governors introduced the quality awards winners and the Chairman presented the quality awards to winners. These were:

- The revolutionary Sexual Health Screening Service Dean St Express
- Mars Paediatric Burns Dressing and Scar Management Team Moving forwards for a Family Friendly Service
- Practical guidance for the management of palliative care on neonatal units' a national document for all healthcare professionals caring for babies with palliative care needs and their families
- Turning around Phototherapy
- Birth Centre
- Clinical Nurse Specialist (CNS) contribution to patient centred care and information delivery to people living with HIV and cancer

The governors noted highly commended categories:

- Improving patient choice and Outcomes
- Looking after Lone Working Staff in the Community
- Radiology accreditation

1 GENERAL BUSINESS

1.1 Welcome & Apologies

TH-H

Chairman welcomed Catherine Faulks newly appointed governor from the Royal Borough of Kensington and Chelsea, Ben Sheriff, Auditor from Deloitte and Patricia Gani from Healthwatch.

Chairman welcomed the new Board members namely Eliza Hermann, Jeremy Jensen and Liz Shanahan.

Chairman thanked governors Cllr Frances Taylor, Cyril Nemeth and Caroline Fenwick who have recently left the Council of Governors for their contribution to the work of the Trust and the Council of Governors on behalf of the governors.

Chairman said that he has written to the Royal Brompton Hospital and to Westminster City Council inviting their representative to the Council of Governors.

Apologies received from governors were: Edward Coolen and Tom Church. Apologies received from the Board members were: Lorraine Bewes, Elizabeth McManus, Zoe Penn. Also newly appointed Board members Dr Andrew Jones and Nilkunj Dodhia send apologies.

Chairman noted that he has been advised that two governors have to leave at 5.30pm.

1.2 Declaration of Interests

TH-H

There were no declarations of interests received.

1.3 Draft Minutes of Previous Meeting held on 15 May 2014

TH-H

Minutes of the previous meeting were confirmed as a true and accurate record of the meeting.

1.4 Matters Arising

TH-H

Meeting room

Chairman noted that not much feedback has been received on the meeting room. He said that he and Susan Young worked on the current room arrangements and it seems satisfactory.

Tony Bell said that there was a plan to replace the ceiling microphones which would further improve the environment.

Staff Survey results

Sandra Smith-Gordon queried the staff survey results and said that she had spoken with Susan Young regarding the presentation of data, however, she still does not fully understand it. Susan Young will have a session with governors and explain the data.

1.5 Chairman's Report

TH-H

Chairman informed governors that he has had a very busy day and that he spoke with the Care Quality Commission (CQC) representatives in the morning and then with Monitor in the early afternoon.

Chairman noted that the day before he met with a small group of governors over lunch in order to understand governors' main concerns. Its aim is to support the Trust in delivering information to governors and vice versa.

Chairman thanked governors for comments on the Council of Governors committees. He said that his intention was to decrease the number of governor committees and to increase the number of executive task and finish groups on which governors can be represented. He said that he hopes that governors will feel as enthusiastic and he views it as a way of increasing the voice of governors.

Martin Lewis said that a list of committees and governors representation enclosed with the papers was pulled together quickly and apologised for any committees missing and any governors not being attached to the right committee.

Sandra Smith-Gordon said she was surprised by a number of committees she did not know of and added that the governors' handbook contains an up to date list of committees.

Chairman said that governors, as representatives of membership of the hospital, should represent members interest and our members should tell us about their interests.

Melvyn Jeremiah said that he is interested in Electronic Document Management

(EDM) and he is a governor representative on the Electronic Document Management Board. He added that he thought there ought to be a governor representative on the Audit Committee. He said he is happy to join a group discussing the committee structure. Chairman responded that Melvyn Jeremiah is welcome to join the group discussing the committee structure and that in relation to the Audit Committee he will speak with Sir John Baker, Chair of the Audit Committee.

Chairman noted that any comments on committees should be sent to Susan Young. Action: Governors to forward comments on committees to Susan Young.

All

Anna Hodson-Pressinger said that as a member of the Patient Led Assessment of the Care Environment Group (PLACE, formerly known as PEAT) she thinks that she acts as voice of governors on the valuable work of the group.

Chris Birch queried if the view was that there were too many governor committees. He said there are other Trust committees which are not a committee of the Council of Governors and thought that such committees would benefit from having a governor representative i.e End of Life Care Group. He added that he discovered by accident that there is a Health and Safety and Fire Committee. He had asked if he could attend the committee. The response he received was that as it is the Trust committee the Chair of the committee needs to be consulted. Karin Norman responded that the Health and Safety Committee reports to the Assurance Committee and there are two governor representatives who are members of the Assurance Committee, namely Melvyn Jeremiah and Christine Blewett.

Tony Bell said that the NHS has moved from being committee driven and we have to be disciplined regarding our committee structure. There are more than 60 Trust groups and he thinks there ought to be more task and finish groups and he would like governors involved in these groups. The committee structure and reporting levels of these committees need to be considered.

Chairman said that his intention was to reduce a number of governor standing committees and increase a number of governor task and finish groups.

Chairman concluded the discussion by saying that we need to work on how we take maximum input from governors in order to enable the Executive team to run the hospital in the optimal way and suggested that Susan Young leads on the constitution of governor committees and to explore how governors can help the hospital by considering individual skills.

Action: Susan Young to lead on the constitution of governor committees having received comments from governors as above.

SY

SY

Action: Susan Young to explore how governors can help the hospital by considering individual skills.

West Middlesex University Hospital visit

Walter Balmford queried if an afternoon visit to West Middlesex University Hospital could be arranged as he finds 9.00am early for elderly governors. Susan Young responded that a mini bus transport has been organised for people who expressed

interest in the visit on 29 July and the group will be accompanied by Layla Hawkins and Dominic Conlin, Director of Strategy and Integration. However, we will explore the option of an afternoon visit.

Action: Layla Hawkins to explore the option of the afternoon visit to West Middlesex University Hospital.

LH

1.6 Chief Executive's Report

APB

<u>Accountable Care Group (ACG)</u> –Tony Bell said that an update on the ACG was provided in his report.

<u>Foundation Trust Network seminar</u> – Tony Bell said that earlier in the day he attended the Foundation Trust Network seminar which aimed at addressing skills looking at how things can be done better. Collaboration with local providers is important and meeting the need of the local population.

Neonatal Intensive Care Unit (NICU) – Tony Bell said that an outbreak of infection in NICU happened and we were the first foundation trust who discovered it. He thanked the NICU team and Infection Control and Prevention Team for being proactive and acting quickly to find out the cause of the problem. He also thanked the Communications Team for handling queries very well. Dr Berge Azadaian, Director of Infection Prevention and Control was to be congratulated on his speed of response and coordination of this event.

Open Day 2014 – Tony Bell thanked governors who were involved in judging awards. He thanked Wendie McWatters for securing a VIP, Joanna Lumley and Steve Worrall who helped with judging stands on the day. He also thanked all governors who helped in the governors stand and the ISS team led by Rochelle Gee and Communications Team on excellent organisation. Congratulations were conveyed to all award winners.

<u>CQC announced inspection visit</u> – Tony Bell noted that CQC visit encompassed all sites and all clinical areas.

The inspection team conducted the patient listening event, focus group with governors, focus groups with staff, interviews with the Executive team, Chairman and key staff. Feedback outlining key findings and next steps was given to staff at an informal session on 11 July. Most staff felt that they had engaged well and hoped that their views had been taken on board through the process. An email was sent to all staff that could not make this session. There has been nothing of particular concern to us and we await a report which is expected in the next few weeks.

Sandra Smith-Gordon queried if the Accountable Care Group (ACG) could expanded to other boroughs. Tony Bell said that we had applied to become an early adopter of the ACG in an assessment process and we are expected to get go ahead in next two weeks. He added that it needs to be considered how to involve other boroughs.

Melvyn Jeremiah said that governors welcome the update on the ACG and that governors have an open mind on this. Governors would like to be informed of any progress on this.

Tom Pollak asked for a view on a recent article in the Daily Telegraph regarding the Trust appearing high on a list of Foundation Trusts with some issues around bullying. Tony Bell responded that the Trust is trying to understand the background of it. Susan Young added that she will hold a session for governors on issue of bullying, harassment and abuse as part of the planned session on staff survey. This will look more in-depth into staff's perception of bullying in relation to other staff and patients.

Nicky Browne commented that Royal Marsden Hospital had very similar results and some work has been done on understanding it deeper. Susan Young added that the Chelsea and Westminster Hospital did exactly the same last year and will continue to try to understand deeper.

2 CORE ITEMS

2.1 Review of 2013/14 – presentation

APB/RP

Tony Bell gave a presentation on the review of 2013/14. Highlights include:

- A broad range of local acute services and a smaller set of specialised services, supported by academic research that we provide
- Trust's good record in delivering safe and effective care
- Key highlights in 2013/14
- Clinical performance results and how to improve performance in other aspects through implementing good practice across the organisation
- Patient access to facilities good and positive patient and staff survey results and adapting for the future by learning from the past experiences
- Key challenges 2013/14 and beyond and key opportunities
- Trust's strategic vision

In response to a question from Martin Lewis if the Trust plans to expand on a number of senior nurses, Tony Bell responded that this will be looked into and also any training needs will be addressed as part of Chief Nurse's review.

In response to Sam Culhane's comment on generating more income by charging all foreign patients both adults and children Tony Bell responded that paediatric is an opportunity and our paediatricians have some private patients and noted that there is a room for improvement in relation to providing high standard paediatric services.

2.2 Care Quality Commission (CQC) Announced Inspection update (oral)

APB

This item was discussed earlier in the meeting.

2.3 West Middlesex update (oral)

APB

Tony Bell noted that work is ongoing on due diligence process around the potential acquisition of West Middlesex University Hospital.

There are lot of opportunities and we need to understand risks linked to these opportunities. The West Middlesex Acquisition Steering Group is in place to assist with the process and negotiations on resolving issues with the NHS Trust Development Authority are taken forward by Dominic Conlin, Director of Strategy

and Integration. Sir Tom Hughes-Hallett is the Chair of the Group and the membership consists of Sir John Baker, Jeremy Jensen and Eliza Hermann. Once the key financial issues have been satisfactorily resolved we may then proceed to Full Business Case. If that happened it would then subsequently be presented to the Board of Directors and the Council of Governors.

Dr Anthony Cadman asked if the decision needs to be made before the new government is in place. Tony Bell responded that there should be clarity about the transaction before the next election.

Chairman concluded the item by saying that the governors will be regularly updated on the strategy.

2.4 Presentation of Annual Report & Annual Accounts 2013/14

RP/TH-H

The Council of Governors noted the Annual Report and Annual Accounts 2013/14.

Charles Steel queried £33m debt in 2013/14 and whether the position is expected to reverse next year. Rakesh Patel responded that it was due to a number of factors such as cash, bad debt which was due to sexual health and timely payment is now ensured. Where there are any financial issues in year these are flagged up very early. Tony Bell said that this is expected to decrease as the timely payment has been ensured, however we will need to renegotiate contracts.

Charles Steel said he was concerned about the cash position. Benjamin Sheriff commented that this situation is common amongst other Trusts and it is due to the change in the landscape, in this particular case with the Health Act 2012 the local Primary Care Trusts (PCTs) were removed and we managed to recover money before this happened so the cash position is expected to improve.

Professor Richard Kitney said that this was discussed by the Audit Committee in great detail. We are aware of shortcomings, however, patients need to be treated.

Christine Blewett queried if the sexual health tariff will change in 2014/15. Brian Gazzard commented that the tariff will stay till next year.

2.5 External Audit Report to the Governing Body on the audit of the Trust's year BS ended 31 March 2014 financial statements

Benjamin Sheriff summarised the findings of the external audit of the Trust's 2013/14 financial statements. The audit was performed in accordance with Monitors' Audit Code. The approach to audit was outlined in section 1 with the significant audit risks identified in section 2 which were the key areas of focus were:

- NHS revenue and provisions
- Revenue from grants and charitable contributions
- Property valuation and
- Management override of controls

Benjamin Sheriff noted that a clean unmodified opinion was issues on the Trusts financial statements.

2.6 Findings and recommendations from the 2013/14 NHS Quality Report External Assurance Review

Benjamin Sheriff noted that the requirement to review the content of the Quality Report is set out in Monitor's Annual Reporting Manual. A sample testing of three indicators was performed. These were 28 day emergency re-admissions and 62 day cancer waiting times and complaints. Three local indicators were selected by the Council of Governors. It was noted that there were some challenges with the access to data. The report sets out findings and recommendations for improvements for the indicators tested.

Nicky Brown commented that findings regarding 62 day cancer waiting times are concerning and suggested that a joint working with the Royal Marsden Hospital might be helpful. Tony Bell said he agreed.

Chris Birch queried Trust's performance regarding discharge which was only 23 in 2013/14 against the target set of 28 complaints. Benjamin Sheriff responded that this depends on how the local target was set up as it was set up internally. Tony Bell commented that the target will be reviewed.

Chairman thanked Benjamin Sheriff for performing the external assurance review.

2.7 Audit Committee Annual Report 2013/14

RK

BS

Professor Richard Kitney noted that there was a thorough discussion at the Audit Committee meeting on 22 May regarding the Audit Committee Annual Report with the satisfactory outcome by the auditor.

2.8 Membership Engagement and Communications Strategy Update 2014/15

WB

The Council of Governors noted the strategy update provided in the paper.

Katie Drummond-Dunn highlighted that as agreed at the June Membership subcommittee this year's strategy is focusing on engaging with the members and due to a steady membership figures there is no need for the additional recruitment activities.

Katie Drummond-Dunn highlighted the planned engagement activities and the funding requested attached to each activity for funding from the Council of Governors budget.

She thanked all governors involved in helping organise this year's Open Day and thanked the Council of Governors for funding the event.

Martin Lewis emphasised that all governors are welcome to join the meet a governor session and in particular welcomed new governors to join in.

The governors discussed the issue of recruitment of members and the item concluded on the note that the Trust needs to work more on engaging with members, highlighting the benefits of being a member, understanding members expectations and noted the opportunity for marketing and communication with members.

The Council of Governors approved the Membership Engagement and Communications Strategy update 2014/15.

3 UPDATES

3.1 **Governors' Questions APB** This paper was noted. Sandra Smith-Gordon noted that as point of clarification her question no.3 should be read in the context of web page. **Governors Visits to Clinical Areas (oral)** 3.2 HA There was nothing to report on. 3.3 **Council of Governors Funding Report – update** SY The Council of Governors noted that this item was discussed earlier in the meeting under item 2.8. 3.4 *Membership Engagement and Communication – update KD-D This paper was noted. 3.5 Membership Report – tabled SY A copy of the membership report was tabled. 3.6 **Open Day 14 June 2014 – Evaluation Report** KD-D The Council of Governors noted that this item was discussed earlier in the meeting. Martin Lewis said that the ISS reception staff was very presentable on the day. He said he is aware that the training session across the hospital are taking place for all reception staff and looks forward to seeing some improvements in this area. Rochelle Gee commented that meet and greet training is very important. 4 ITEMS FOR INFORMATION 4.1 *Quality Sub-Committee report MvL Noted. 4.2 *Quality Sub-Committee Terms of Reference MvL Noted. 4.3 WB *Membership Sub-Committee report Noted.

5 ITEMS FOR INFORMATION

5.1 A copy of the Finance and Performance Reports are available via Board papers which are available on the website at the following link:
http://www.chelwest.nhs.uk/about-us/organisation/trust-meetings and a hard copy of the board pack in the governors' room

6 ANY OTHER BUSINESS

Wendie McWatters noted that she raised money for giggle doctors. She has worked on finding a story teller for children and she works closely with Vanessa Sloane and someone is starting in autumn and will come on Saturday afternoon and is thrilled about it.

Chairman noted that the Chelsea and Westminster Health Charity launched its appeal for the arts programme in the emergency department and it reminded him how many people are interested in performing arts and whole environment. Some high profile individuals and others in the art world are involved.

Sandra Smith-Gordon noted that the Crossrail is consulting the public on a new line for London and encouraged governors to take part as there was the possibility of a station in Chelsea.

7 DATE OF THE NEXT MEETING

The next meeting of the Council of Governors will be held on 18 September 2014.