GOVERNORS’ COUNCIL

Minutes of a Meeting of the Sheffield Teaching Hospitals NHS Foundation Trust
GOVERNORS’ COUNCIL held on Tuesday 3rd March 2009 in the Chatsworth Suite, Rivermead Training Centre, Northern General Hospital

PRESENT: David Stone (Chair)

PATIENT AND PUBLIC GOVERNORS

Georgina Bishop    John Holden    John Warner
George Clarke      Philip Seager  Beryl Wilson
Susan Coldwell     Graham Thompson Susan Wilson
Anne Eckford       Christina Wakefield

STAFF GOVERNORS

Rosemary Bollands  Mark Hattersley Stephen Westby
Mike Collins

PARTNER GOVERNORS

Jack Scott

APOLOGIES

Joe Abson          Kaye Meegan     John Watts
Rhiannon Billingsley Martin Rosling Tony Weetman
John Laxton        Hilary Scholefield Jeremy Wight
Heather MacDonald

IN ATTENDANCE

Andrew Cash        Richard Parker  Neil Riley
John Donnelly      Jane Pellegrina Mike Richmond
Chris Linacre      Neil Priestley

MEMBER OF THE PUBLIC

2 Members of the Public

Prior to the commencement of business, the Chairman welcomed Jack Scott, Partner Governor representing Sheffield First Partnership, to his first Governors’ Council Meeting. Jack gave a brief explanation of the role and purpose of Sheffield First Partnership in bringing together public, private, voluntary, community and faith sectors across Sheffield to identify the key issues facing the City, develop a widely supported vision for the City and produce a strategy to deliver it.

The Chairman also announced that he had recently been contacted by the Chairman of Monitor about a serious situation at Mid Staffordshire NHS Foundation Trust. He said that the Healthcare Commission had carried out a detailed investigation at this Foundation Trust and that a report of the investigation would be published shortly. Following the resignation of the Chair and the Chief
Executive at Mid Staffordshire Monitor had asked Mr Stone to step in for a short period to act as Interim Chair at the Trust. Mr Stone said that he had accepted with the caveat of continuing his commitment to Sheffield Teaching Hospitals, he had no intention of ‘walking away’ from STH. The Governors’ Council congratulated the Chairman.

**GC/09/02**

**Minutes of the Previous Meeting**

The Minutes of the Meeting held on Tuesday 25th November 2008, were agreed as a correct record and signed by the Chairman.

**GC/09/03**

**Matter Arising**

(a) **Final Report following Healthcare Commission Inspection**

Richard Parker, Deputy Chief Nurse, gave a presentation (copy attached to these minutes) on the Healthcare Commission Hygiene Code Inspection in November 2008.

The Healthcare Commission inspected every hospital trust in 2008 to check that guidance is being followed on how to protect patients from infections, such as MRSA and C.diff. STH had been inspected on 19 and 20 November. The inspection covered four duties of the hygiene code:

- **Duty 2**: the Trust must have in place appropriate management systems for infection prevention and control
- **Duty 4**: the Trust must provide and maintain a clean and appropriate environment for healthcare
- **Duty 8**: the Trust must provide adequate isolation facilities
- **Sub-duty 10j**: the Trust must have in place an appropriate policy in relation to antimicrobial prescribing

The overall position had been assessed as very positive with the Trust receiving 3 green ratings and only 1 amber that related to Duty 4.

The issues identified:

- The Trust did not have policies for planned preventative maintenance
- Storage of linen
- Mattress staining – mattress audits

Other comments:

- Commode cleanliness
- Satellite Endoscopy (decontamination) areas

Actions taken:

- Estates policies have been amended
- Storage of linen is now included in the Ward Accreditation Scheme for 09/10
- Mattress audits undertaken and 200 mattresses have been changed – 79% found to be faulty
- Commodes replaced immediately
- Where appropriate and safe to do so satellite endoscopy areas would be decommissioned and all areas would be subject to quality control audits.
In response to John Holden’s question regarding mattresses Richard Parker said the problem related to the impermeable covers. The inspectors had found staining around the zips and inside some mattresses. When held up to the window, it was discovered that pinholes in the covers had allowed fluid to enter the mattresses. On further inspection stains were found on 200 mattresses, 79 of these contained a manufacturing fault. The manufacturer had replaced the faulty mattresses.

The Healthcare Commission/Care Quality Commission will be checking on the results of the action plan in May 2009.

GC/09/04

Trust Operations

(a) Chief Executive’s Report

The Chief Executive presented and elaborated upon his written report previously circulated with the agenda papers (Enclosure C), on matters of topical interest and concern with particular reference to the following:-

Performance

Performance remains very challenging.

Performance against the Emergency Services target for the year to date was 98.1% at the end of quarter 3. Monitor requires the Trust to provide a governance report as part of its quarterly declaration if performance in the quarter falls below 98%. A report approved by the Board had therefore been provided to Monitor. Quarter 4 is also likely to be problematic and achieving the 98% target for the whole year is particularly challenging. January 2009 challenges were a combination of high levels of emergency attendances/admissions (9% above expectation) and the impact of novovirus across the organisation with up to a maximum of 12 wards closed to admissions. This had led to a reduced flow of patients through the organisation. Also with over 300 patients across the Trust staying in hospital for 3 weeks or more the lack of intermediate care in the Sheffield is a particular problem. This issue was raised at a high level with Sheffield City Council and with NHS Sheffield with a positive response of enhanced home care and residential Placements promised. Jack Scott reinforced the importance of pursuing issues with the City Council particularly regarding budget constraints. Governors raised the issue of a contingency plan for future challenging times around insufficient bed capacity and asked about reopening mothballed ward space. The Chief Executive explained that Chris Linacre had been commissioned to look at provision of additional ward accommodation.

Academic Health Science Centre Bid

Unfortunately the International Panel had decided not to shortlist the White Rose Partnership. This was disappointing but the partners were keen to continue with the collaboration.

Infection Control

The Trust’s performance on infection control remains very good.

- MRSA - 4 bacteraemias were recorded in January bringing the total to 21 but maintaining the overall performance against the contract plan of 24 cases below the national target.
• C.Diff – the Trust is currently in a very good position against target, with 22 positive recorded samples, 22.1 cases under plan for the January and 211 cases under plan for the year to date.

• Norovirus – NGH had a significant outbreak peaking at 10 wards affected causing significant disruption due to bed closures. The situation is now resolving. RHH had sporadic outbreaks affecting Q1 and Q3.

In response to John Holden’s question regarding strategy for a flu pandemic, it was confirmed that a robust strategy is in place, including addressing difficult ethical issues.

NHS Constitution

A copy of the NHS Constitution was provided to Governors for information.

Sheffield Quality Conference

STH is to host an innovation/quality conference to be attended by David Nicholson, Chief Executive of the NHS and Professor Ara Darzi, on 4 March. Professor Tindale will present the D4D work at the Conference. Professor Darzi will also officially open the Critical Care unit at NGH and he and David Nicholson will join a discussion with David Stone, Andrew Cash and senior colleagues at the Trust.

Consultation document on revised guidance on NHS patients who wish to pay for additional private care

Mr Linacre said that in its response the Trust had suggested that the guidance and/or policy should be redrafted in order that consistency is clear.

Governors asked why the Trust had not expressed an opinion on the issue of patients who wish to pay for additional private care. Mr Linacre clarified the situation and confirmed that it was not for the Trust to have a view on the substantive issue but to comment on the revised guidance. Governors requested clarity of the Trust’s position. Mr Cash agreed to consider the matter further.

Appointments

John Watts, Director of HR, retires at the end of April 2009 following distinguished service. Mark Gwillam, currently Associate Director of HR at Central Manchester University Hospitals FT, has been appointed as Deputy Director of HR at STH. On taking up his post he will immediately act up for six month to the role of Director of HR until the Director post is advertised.

GC/09/05

Standards for Better Health 2008-2009 – to note the Governors’ Council Statement

The Governors’ Council APPROVED the content of the Governors’ Council Statement which was to be included in the Standards for Better Health 2008-2009 Declaration.
Trust's Mental Health Strategy – Update

Mark Cobb gave a presentation on the “Mental Health Strategy for Sheffield Teaching Hospitals”. A copy of the presentation is attached to these Minutes.

This is a developmental Strategy produced jointly by Sheffield Care Trust (now Sheffield Health and Social Care Trust) and Sheffield Teaching Hospitals. A stakeholder event provided some of the evidence to draft the strategy. The strategy contains expert opinions of mental health organisations and takes account of legislation, NICE guidelines and local strategies and protocols. The draft strategy had city-wide consultation.

The Strategy will enable STH to raise the profile of mental health and its reciprocal relationship with physical health; improve quality of care and clinical outcomes; assess and develop STH capacity and capability in mental health and develop alliances and collaborations across Sheffield.

In a recently published paper the NHS Confederation said that “Mental health care must be compassionate and understanding and spare people battles with services that do not help them fast enough, well enough or indeed at all.”

In response to a Governor’s comment about the challenges facing Sheffield in relation to demographic change it was confirmed that a case has been submitted to Commissioners to improve mental health of older people in STH including an enhanced specialist liaison team working into STH from SHSC and a team of dementia specialist nurses.

In response to comments regarding the impact of addressing the challenging financial questions it was noted that coding is an issue and requires addressing.

Governors thanked Mark Cobb for an excellent presentation.

Neil Riley gave details of the Health and Safety Executive action against the Trust. In this case, the patient, Mr Stoker, had a mental health problem and was also deaf. At the time of his death in 2004 resulting from a fall from a window, Mr Stoker was awaiting psychiatric assessment whilst in the care of STH. In his summing up the Judge referred to the rigorous steps taken by STH to ensure no recurrence of the incident. He expressed concern at the length of time it had taken for the HSE to bring the case. STH was fined £18,000 plus costs. The Trust issued an unreserved apology for failing to meet the required safety standard on the ward window and had taken action to rectify this including ensuring that restrictors are in place on all windows.

Governors’ Matters:-

(a) Governors’ Forum Meeting held on 19th February 2009

Anne Eckford highlighted the following points from the Meeting Notes:

- A paper on the Role of Governors at STH is being prepared and it is anticipated that this will be used to form the basis of the agenda for a Governors’ Time Out to discuss this important issue.
- It has been agreed to increase the number of Forum Meetings from 4 to 6.
- Governors’ had attended a very interesting presentation by the charity Neurocare.
- Hilary Scholefield had provided a very informative session for Governors on Quality Accounts. This was thought to be a very challenging new development but Governors were pleased to have been included in the discussions with the
Chief Nurse at such an early stage in the process and were looking forward to continued involvement in developments.

Anne Eckford said that Governors were aware that the last quarter had been a particularly difficult period and Governors’ wished to record their thanks to all staff for their endeavours and for the additional work they had carried out to ensure that patients had continued to receive excellent care.

(b) To note Governors’ Visit Report

The Governors’ Council RECEIVED and NOTED a report on a visit to the Dermatology Department on 23rd October 2008.

(c) Patient Representative Group – to note a Report

The Governors’ Council RECEIVED and NOTED the report from the Patient Representative Group.

(d) Joint Governors’ Event with Sheffield Children’s and Sheffield Care Trust

Anne reported that a joint meeting, hosted by STH, of Governors from STH, Sheffield Children’s Hospital and the Sheffield Health and Social Care Trust had taken place on 26 February. This had been an excellent event with 70 people attending, including colleagues from Sheffield LINks. The event had provided good opportunities to network and discuss how Governors may be able to collaborate in the future. It is hoped that more similar events will be held.

On behalf of all the delegates Anne thanked Chris Welsh for his stimulating presentation on Darzi, and David Stone and Neil Riley for their valuable contributions to the event.

(e) Regional Governors’ event to be hosted by STH – update

Anne reported that discussions are taking place with Governors from other Trusts in the region to set the agenda. It is hoped the event will be in May.

(f) FTN and FTGA Governors’ Development Programme – feedback

Some issues of interest arising from this event held in Leeds on 18th February were highlighted:-

- Governors’ would like more interaction with NEDs. The possibility of NEDs attending Governors’ Forum Meetings was raised.
- Governors felt that their involvement in strategy should be happening at a much earlier stage in the process.
- STH Governors are still leading the way in some areas but Governors from other Trusts are starting to develop new and innovative ways of working within their organisations. STH Governors are keen to keep abreast of all the current developments.
- A number of Trusts carry out appraisals of their Governors, with Governors having a short annual one to one meeting with the Chair.

GC/09/08

Elections to Governors’ Council 2009

The Governors’ Council RECEIVED and NOTED the paper on the Elections.
The Governors’ Council **RECEIVED** a tabled paper and **NOTED** the following points highlighted by Chris Linacre and Neil Priestley:-

- **Consistency with Corporate Strategy**
  - Consistency between the 2009-10 Business Plan and the Corporate Strategy is important.
  - Growth in Specialised Services.
  - Equality and Sustainability have a high profile.
  - Quality Accounts have a role to play in customer care improvements as will the introduction of ‘Real-Time’ patient feedback.
  - Further thought to be given to car parking improvements in conjunction with discussions regarding the possibility of 4 additional wards. Consideration to be given to how the Trust might pursue both objectives with the use of discretionary capital.

- **Contract Negotiations with Commissioners**
  - Move from familiar contract to a new standard acute contract.
  - Patient Transport Services becoming the responsibility of PCTs from 1-4-09.
  - Cancer targets remain challenging.
  - Standard Contract to include formal quality standards known as CQUIN (Contracting for Quality and Innovation) to be funded 0.5% of tariff subject to negotiation and 0.5% non-tariff income. Future costs of meeting these standards not yet determined.

- **Financial Plan**
  - Continue to deliver 5% efficiency gains of £20 million.
  - HRG version 4 risks – it is imperative that transitional arrangements will deal with the anticipated £8 million loss.
  - Capital investment plans take account of the Corporate Strategy and the need to deliver all other aspects of the Business Plan. Particularly highlighted were the Estates Infrastructure Renewal (£6.9m) and the Plastics hand unit/burns improvement scheme (£4.2m). The capital investment programme is currently over-committed by £10 – 12m.

Governors’ Council **NOTED** that Neil Priestly will be providing a detailed financial briefing for Governors on 12 March.

The Annual Plan for Monitor will be presented to the Board of Directors on 20 May 2009. In response to Governors’ concern about the importance of health promotion in the Community it was noted that these issues are reflected in the Strategy of NHS Sheffield.

**GC/09/10**

**Date and Time of Next Meeting**

2.00 pm, Tuesday 2nd June, 2009 in the Chatsworth Suite, Rivermead Training Centre, Northern General Hospital.

Signed ………………………………………………………………………………… Date:…………………
Chairman