

GOVERNORS' COUNCIL

**Minutes of a Meeting of the Sheffield Teaching Hospitals NHS Foundation Trust
GOVERNORS' COUNCIL held on Tuesday 2nd March, 2010, in the Undergraduate Common
Room, Medical Education Centre, Northern General Hospital**

PRESENT: David Stone (Chair)

PATIENT AND PUBLIC GOVERNORS

| | | |
|-----------------|-----------------|---------------------|
| Georgina Bishop | John Laxton | Graham Thompson |
| Yvonne Challans | Shirley Lindley | Christina Wakefield |
| George Clark | Andrew Manasse | John Warner |
| Anne Eckford | Kaye Meegan | Michael Warner |
| John Holden | Danny Roberts | Beryl Wilson |

STAFF GOVERNORS

| | |
|-------------------|-----------------|
| Frank Edenborough | Mark Hattersley |
|-------------------|-----------------|

PARTNER GOVERNORS

| | | |
|------------------|------------|--------------|
| Heather McDonald | Gail Smith | Richard Webb |
|------------------|------------|--------------|

APOLOGIES

| | | |
|-----------------|---------------|----------------|
| Rose Bollands | Mark Gwilliam | Vivien Stevens |
| Paul Broadbent | Charlie Khan | Tony Weetman |
| Richard Chapman | Phil Seager | Jeremy Wight |

IN ATTENDANCE

| | | |
|---------------|-----------------|--------------------|
| Andrew Cash | Jane Pellegrina | Mike Richmond |
| Sue Coulson | Neil Priestley | Iain Thompson |
| Chris Linacre | Neil Riley | Hilary Scholefield |

PUBLIC

4 members of the public

Prior to commencement of the meeting, the Chairman welcomed Gail Smith, Cabinet Member, Healthy and Independent Living and Richard Webb, Executive Director (Communities) from the Sheffield City Council Member to their first meeting of the Governors Council. He also welcomed Mr. Mike Smith, Chairman of Links, who was attending as a member of the public.

GC/10/01

Minutes of the Previous Meeting

The Minutes of the Meeting of the Governors' Council held on Tuesday 1st December, 2009, were agreed as a correct record.

GC/10/02

Matters arising

(a) Update on Planning for the Financial Downturn

(GC/09/31(b)) The Director of Finance reported that there was nothing further to report in terms of the feedback from Monitor.

The Trust plans for 2010/11 were well advanced. The view at the moment was that overall the position was marginally better than the central scenario. The tariff position was becoming clearer. However, the contract negotiations were likely to be extremely difficult.

He also reported that the Trust's plans for achieving a further £100 million efficiency savings over the next three years were progressing well. He explained that that level of savings was achievable on paper, however the delivery was going to be extremely difficult and challenging.

In response to a question regarding Monitor Assessment, the Director of Finance confirmed that the Trust was not required to resubmit any plans to Monitor other than the Annual Plan submission in May 2010.

(b) Update on Productivity and Efficiency Programme

- (GC/09/31(c)) The Chief Executive reported that there had been a further deterioration in Directorate P&E performance for Quarter 3 with a considerable under delivery against plans and the Trust P&E Target for 2009/10.

He explained that the plans for 2010/11 were well advanced and all Directorates had produced second cut plans covering three areas Service Improvement, Clinical Improvement and Workforce. The Director of Finance and Chief Nurse/Chief Operating Office would work through the second cut plans following which Directorates would be asked to produce a third cut.

The Board of Directors would set the budget for the next financial year at their Strategic Session to be held on Friday 12th March, 2010.

Discussions with NHS Sheffield regarding the contract were ongoing and it was hoped to bring this matter to a conclusion in the next few weeks.

(c) Update on progress on Service Reconfiguration

(GC/09/31(d)) The Director of Service Development reported that since the last meeting of the Governors' Council, Phase 1 of the service reconfiguration had been completed and work had now commenced on Phase 2. Phase 2 involved a set of complicated logistical moves to take place by September/October 2010. It was noted that during the transfer of services across the city there would be some small loss of capacity.

The Director of Service Development would be attending 2 meetings of the Overview and Scrutiny Committee in March (Chairs of South Yorkshire OSCs Meeting) and April (Full Sheffield Overview and Scrutiny Committee) in order to share the plans with them. He was in the process of preparing briefing papers for these meetings. When the papers had been finalised, he agreed to circulate copies to members of the Governors' Council for information

Action: Mr. C. C. Linacre

He also reported that since the previous meeting there was now a revised view and a clear clinical consensus that Stroke Services should be located at the Royal Hallamshire Hospital.

(d) Update on Results of the 2008/2009 Annual Health Check

(GC/09/31) The Chief Executive was pleased to report that the Trust had been successful in its appeal against a particular element of the quality assessment concerning participation in heart disease audits.

The outcome, therefore, was that the Trust's quality of care score would be adjusted from Good to Excellent which meant that the Trust remained one of only a handful of hospitals achieving the highest possible score for both the quality of its services and use of resources (financial management) over the last three years

(e) Board Guidance on Trust Membership Strategy

(GC/09/34) The Chairman reported that he had held a meeting with a representative group of Governors and had discussed various developments including the difficult issue of membership. Although members elect Governors it was difficult to know how many members the Trust should have. The outcome of that meeting was that the Trust should have two categories of members, public and staff (patients would be absorbed into the public membership). The objective would be that public members would be in the majority which was not the case at present. Governors now had a clear target for the membership strategy.

The Chairman confirmed that the Trust supported this approach and would provide the necessary funding.

GC/10/03

Chief Executive Officer Report

The Chief Executive, presented his written report (Enclosure K) and elaborated upon the following topics:-

➤ Performance

18 Weeks – Plans had been submitted from the relevant Directorates and signed off by the Trust Executive Group for all specialties with the exception of Orthopaedics. These plans would ensure that all specialties, other than Orthopaedics, achieved 18 Weeks within quarter 4. Each of the plans had been risk assessed and although there were some residual risks none had been rated Red. This was particularly important given that the CQC's assessment of performance against 18 Week RTT at specialty level would be for performance during quarter 4.

A separate report on the difficulties with Dermatology and Neurosurgery was circulated with the agenda papers (Enclosure C). However, he was pleased to report that, through the planning process for quarter 4, those issues had now been successfully resolved. .

In respect of Orthopaedics, there were significant challenges to achieving 18 Weeks RTT and, as previously reported to the Board, it would not be possible for this specialty to achieve 18 Weeks in quarter 4. Work was currently being carried out to assess when this specialty could reliably meet and sustain 18 weeks. Subject to further detailed planning, this was likely to be from the beginning of quarter 2 in 2010/11 The significance of this plan was that the NHS Constitution and the revised regulatory framework would focus on achievement at specialty level from 1 April, 2010 onwards. Given that the final version of the plan would also need to be submitted to Monitor it was important that the plan was as

robust as possible and work was urgently being carried out to ensure that this was the case with as many contingencies as possible built in order to secure delivery. An interim report would be provided to Monitor by 12th February, 2010, with a full report by 26th February 2010.

The Chief Executive **AGREED** to circulate a copy of the Orthopaedic Plan to Governors.

Action: Sir Andrew Cash

The Chief Executive emphasised that 18 weeks RTT was a patient's right under the NHS Constitution for both Commissioner and Provider.

➤ Financial Position

The Chief Executive reported that the Trust was overspent by £5.7 million at the end of month 10 which was a deterioration of £1 million from the previous month. However, that position was better than expected. The deterioration was mainly due to the severe weather conditions and norovirus and the affect that these factors had on elective work. The Trust had reserves in place to cover that level of overspend but the financial position was strained and an 8-point action plan was in place.

➤ Infection Control

- MRSA - 2 bacteraemias were recorded in January. The Trust was 0.66 cases under the stretch target for the month and 2.3 cases under contract. Full year performance was 28.23 cases under contract and 11.66 cases under the stretch target for the year to date:
- C.Difficile - In December, STHFT recorded 16 positive samples. This was 9.3 cases under the stretch plan for the month. Year to date performance was 80.3 cases under the stretch plan, and 149.8 cases under the contract plan.

The health community recorded 25 positive samples, against the plan of no more than 40.75 cases per month. This was 15.75 cases under plan for the month and brings the financial year to date performance to 149.25 cases under plan.

- Norovirus - Both campuses continued to experience Norovirus activity although the number of wards and bays affected had reduced significantly. The Trust currently had 11 partially closed wards but no fully closed wards. Enhanced infection prevention and control measures remain in place in a number of areas
- Care Quality Commission Inspection Report – The Prevention and Control of Infections - On the 21st and 22nd January 2010, the Care Quality Commission undertook an unannounced inspection of the Trust to determine whether the Trust was compliant with the 15 measures reviewed as part of an assessment. The final report had now been received and the Care Quality Commission had confirmed that they found that the Trust was compliant with all 15 measures.

- Car Parking – The Board had discussed a proposal to increase car parking charges from 1st April 2010 and the implications for patients and carers. The proposal included the introduction of a car parking management scheme at Weston Park Hospital (£40,000 pa) in order to manage that car park more effectively and reduce the queues down Whitham Road.

The following points were made in discussions:-

- Concern at the level of increase in car parking charges which was above inflation. This would need to be carefully publicised together with any concessionary arrangements
- Encourage car sharing for staff as at weekends car parking was not a problem

- Concern was raised that there was a change from current practice in that the funds raised from the increase in charges would be used to fund other hospital services

The Chief Nurse/Chief Operating Officer reported that the Trust had a Travel Co-ordinator who was taking forward many initiatives including car share scheme, cycle to work initiative, salary sacrifice scheme, working closing with public transport authorities and improving shuttle bus and park and ride services. She explained that there were no plans to extend the tram routes in Sheffield.

- Equality and Human Rights – A Governor requested an update on the work undertaken on this issue. It was agreed to place this item on the agenda for the next meeting of the Governors' Council.

Action: Jane Pellegrina

➤ Appointments

The Chief Executive reported the following appointments:-

- Mark Gwilliam had been appointed as the Director of Human Resources and Organisation Development
- Richard Parker had been appointed to the post of Deputy Chief Operating Officer
- Chris Morley had been appointed to the post of Deputy Chief Nurse
- Andy Riley would be retained for a further year to assist with P & E issues

➤ Robert Francis Report

The Robert Francis Report on Mid-Staffordshire had recently been published and the Trust was considering the recommendations.

➤ National Quality Board

Sheffield was hosting on 15th March, 2010 the first meeting of the National Quality Board outside London. Staff from across the health and social care community would be participating in that meeting.

➤ Boorman Review

Concern was raised at the number of staff on long term sick. The Trust Executive Team had begun consideration of the Boorman Review. Work was being taken forward to develop a proactive Occupational Health Service in line with the recommendations.

Proposals on how to manage staff who had been off sick for 28 days or more would be submitted to the Board for consideration.

GC/10/04

Feedback on regulatory meeting held with Monitor on 4th February 2010

The Chairman reported that the Trust was currently subject to Monitor's A & E Escalation Policy which formed part of the compliance framework for 2009/10.

This had involved the Trust attending a regulatory meeting with Monitor in London given that the Trust had breached the emergency services target in three quarters out of the last five quarters in the relevant twelve month period was required. The purpose of the meeting was to assess the significance of the breach in order that the Compliance Director and her team could form a recommendation for the Monitor Board as to whether the Trust was in significant breach of its terms of authorisation. The outcome of that meeting was detailed in a letter dated 12th February, 2010 (Appendix 2 of Enclosure D) and was that Monitor's

Executive Team would be recommending to the Board of Monitor that STH was not in significant breach of its Authorisation. Monitor's Board upheld that recommendation at its meeting on 24th February, 2010.

The next steps were:-

- That the Board maintained close scrutiny of the actions already implemented and the further planned actions to ensure compliance with this target in Q4 and in subsequent quarters.
- That the learning from this process was incorporated into the Board development work which would be undertaken, as part of the cycle of Board development, in 2010.
- That the Governors Council continued to receive detailed updates on this issue via the CEO report to the Governors Council and on an ad hoc basis as required if performance was unsatisfactory.

It was noted that the Trust had experienced problems in Quarter 3 due to Norovirus and the adverse weather conditions. The Trust's winter plan would be reviewed and updated for next winter.

The following points were raised during discussions:-

- In response to a question on how deliverable was the action plan the Chief Executive reported that the key to delivering it was the provision of intermediate care services. However, the Chief Executive reported that there may be an affordability issue over the planned new 120 bedded unit and he was to meet Jan Sobieraji that week to discuss the matter.
- The importance of local communities supporting each other
- Governors' visit to Accident and Emergency – Governors would find it useful to have an update on the action taken following their visit to A & E some time ago. It was **AGREED** that this would be placed on the next agenda.

Action: Jane Pellegrina

- How was the morale of A & E Staff? The Chief Nurse/Chief Operating Officer explained that A & E staff were extremely resilient and generally very buoyant. She had worked a shift in A & E last month and found staff morale to be good although A & E remained a challenging area in which to work.
- Flow of over 75's – there was a need to shift from episodic to a continuing relationship. There was need for a revised model focussing on keeping people in their own homes.

GC/10/05

Governors' Matters

(a) Notes of Governors' Forum Meeting held on 2nd February 2010

Mrs. Eckford extended congratulations on behalf of the Governors to Mr. Stone on his Doctorate at Sheffield University.

She also extended the Governors thanks to all staff who coped admirably during the adverse weather conditions.

The Governors Council **RECEIVED** and **NOTED** the notes of the Governors' Forum Meeting held on 2nd February 2010

(b) Governors' Time Out "Role of Governors at STH" : Update

Mr. Laxton reported that Governors were happy with the way the problems with A & E had been reported to them.

The following 5 themes were discussed at the Time Out:-

- Membership
- Contribution to the Annual Plan – Proposals for a quarterly meeting with the Director of Service Development had been agreed.
- Review of Workstreams to consider Governors involvement
- Developing relationship between Governors and Non Executive Directors
- Holding the Board to account – Governors to consider Chairman's proposal of the Chairman holding a series of meetings with Governors to discuss Board activities.

(c) Governors' Visit Reports

The Governors Council **RECEIVED** and **NOTED** the content of the following visit reports:-

- Visit to RHH Day Case Centre - 5th November 2009
- Visit to RHH Pharmacy - 7th December 2009

(d) Nomination of a Lead Governor

The Trust Secretary reported that this matter was currently on hold pending on how Monitor wished to proceed.

(e) Governors' Council Nominations Committee

Mr. John Holden, Vice Chair Nominations Committee, reported on the Chairman's appraisal process.

He reported that the Chairman had another effective year in 2008/09 and this was endorsed by the Foundation Trust receiving the Dr Foster Foundation Trust Hospital of the Year for a second year. The areas in which the Chairman would like to make progress in the coming year included:-

- Provide clear guidelines for developing Membership of the Foundation Trust
- Help Governors to communicate with the Membership
- Bring forward initiatives to develop the role of Governors and in particular to assist them to:-
 - hold the Board to account for performance.
 - appoint the Non-Executive Directors and contribute to their annual performance evaluation
- Review the process for (re)appointing Non-Executive Directors

GC/10/04

Quality Accounts 2010/11

Professor Mike Richmond, Medical Director, referred to his written paper (Enclosure H) circulated with the agenda papers.

He explained that as of April 2010, the DH required all providers of NHS healthcare to produce annual Quality Accounts. These were reports to the public on the quality of the services provided, through the three domains of quality:- safety, effectiveness and patient experience. They would also be included in Trusts' Annual Reports.

He emphasised that the timescale was extremely tight in which to produce them. The first draft had to be finished by early April 2010 for discussion with partner groups and organisations e.g. Link, PCT, Overview and Scrutiny Committee. In producing the draft Quality Accounts he would also be requesting a significant input from the Governors in the process. Trusts must submit their Quality Accounts to the DH by 30th June 2010, and include them in their Annual Reports published in September.

He explained that the difference this year was that the guidance from the DH was somewhat prescriptive and Trusts had been provided with a new template to use. This year's Accounts would, therefore, be a much more regulated document and there was little scope for Trusts to produce them in a user friendly way.

GC/10/05

Update on Draft Annual Plan for Monitor 2010-2011

The Director of Service Development reported that he had held two meetings with Governors to discuss the Draft Annual Plan. The themes covered were:-

- Process - how can Governors become more involved
- Content - what goes in the annual plan for 2010/11

The Director of Service Development felt that it would be more appropriate if a group (5 – 10) of Governors were to meet with himself and colleagues on a regular basis, say quarterly, so that the views of Governors' could be brought into the process in developing the Annual Plan.

The Governors reported that they had found the meetings with the Director of Service Development extremely useful and were in favour of the above suggestion of a quarterly meeting.

GC/10/06

Elections to Governors' Council 2010

The Governors Council **RECEIVED** and **NOTED** the contents of the report on elections to the Governors Council (Enclosure I) circulated with the agenda papers.

GC/10/07

Date and time of Next Meeting

The next Meeting of the Governors' Council will be held at 5.00 pm, Tuesday 8th June 2010 at a venue to be confirmed

The Sheffield Town Hall was suggested as a suitable venue.