

WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST
MINUTES OF THE ANNUAL GENERAL MEETING HELD ON
THURSDAY 29 SEPTEMBER 2016, WORCESTER

Present:

Chairman	Caragh Merrick	Chairman
Board Members	John Burbeck Rob Cooper Stephen Howarth Bryan McGinity Andrew Sleigh Jan Stevens Chris Tidman	Non-Executive Director Interim Director of Finance Non-Executive Director Non-Executive Director Non-Executive Director Interim Chief Nursing Officer Interim Chief Executive
Board Attendees	Kimara Sharpe Denise Harnin Sarah Smith Lisa Thomson Paul Crawford	Company Secretary Director of HR & Organisational Development Director of Strategy, Planning and Improvement Director of Communications Patient and Public Involvement representative
In attendance	Richard Percival	Grant Thornton
Members of the public and staff	12	
Apologies for absence	Stewart Messer Rab McEwan Lynne Todd Dr Bill Tunnicliffe Andrew Short	Chief Operating Officer Interim Chief Operating Officer Board Advisor Associate Non-Executive Director Acting CMO

1/16 (AGM)

Introductions and Opening remarks

Mrs Merrick welcomed everyone to the Trust's AGM. She reflected that there had been a number of challenges faced by the Trust in the past year and the presentations would reflect those challenges and also the many achievements of the year.

She went onto say that she had attended the Staff Long Service awards earlier in the day. It had been a privilege to give awards to staff who had served either 25 or 40 years with the Trust.

She then turned to the AGM agenda.

2/16 (AGM)

Declarations of interests

There were no declarations of interest.

- 3/16 (AGM) **Minutes of the Annual General Meeting held on 23 September 2015**
Resolved: that
- **The Board approved the Minutes of the meeting held on 23 September 2015 and were signed as a true record.**

- 4/16 (AGM) **Review of 2015/16**
Mr Tidman, the Interim CEO gave a short presentation on the activities of year 2015/16.

He acknowledged that it had been a year of challenges with safety being the Trust's main priority. He stated that the inpatient maternity and Gynae services were temporarily centralised, pending consultation, at Worcestershire Royal in November 2015. This was due to the clinical concerns of the inability to maintain the rota for staff for the neonatal unit and to ensure that medical staff were utilised more effectively. He was pleased that the feedback from mothers using the facilities at Worcestershire Royal has been excellent.

He went onto reflect on the good aspects of the CQC inspection which has taken place in July 2015. He was pleased that the Trust had been rated 'good' got the care domain and within Women and Children, it had been rated as 'outstanding'. The overall 'inadequate' rating however, had been devastating for the staff and the Trust. As a result of being placed in Special Measures, the trust has formed a good relationship with three 'buddy' trusts to improve governance.

Mr Tidman then turned to the challenges with performance, in particular patient flow. A&E attendances have increased and emergency admissions have increased. The Health Economy is working together to facilitate earlier discharge. These challenges link to the increase in waiting times and the Trust has plans to ensure that waiting time targets are met.

Mr Tidman continued and spoke about the intense media coverage that has taken place in relation to the Trust. He acknowledged that the Trust needed to be more proactive about the work being undertaken, particularly about the developments at the Alexandra Hospital, Redditch.

He was pleased that the Breast Unit has opened and thanked the people of Worcestershire for raising £1m to enable this to take place. The emergency department extension at Worcestershire Royal was on track to open shortly. He was pleased that the modular theatre at the Alexandra Hospital was fully operational and has facilitated all orthopaedic planned surgery to take place at either the Alexandra or Kidderminster Hospitals. He also mentioned the memorial feature for donors which was now installed at the Worcestershire Royal.

Other notable developments during 2015/16 included the refurbishment of the main corridor at the Alexandra, a new service for children with cystic fibrosis and bowel screening at Malvern. He stated that the ophthalmology service had been recognised by the King's Fund and Monitor.

There have been improvements during the year, most noticeably within

the emergency department with respect to triage and assessment. He was also pleased that nine physician associates had been recently appointed and the associate nurse role was being embedded.

Finally, he turned to the staff. He acknowledged the commitment staff had to ensuring that patients were cared for in the best possible way. He was ensuring that the trust invested in training and also time in listening to staff and enabling them to find solutions to issues within the workplace through Listening in Action. He thanked the staff for their continued work over the past year.

5/16 (AGM)

Quality Account 2015/16

Ms Stevens began by thanking all the staff for their care and compassion when caring for patients. She was pleased to report that harm incidents had fallen, in particular the Trust has low infection rates and harm as a result of a fall has also decreased. Serious incidents have also reduced.

She acknowledged the need to ensure we were meeting the needs of our aging population including patients with dementia. She stated that the dedicated team is working hard to improve the care and environment for patients with dementia. A new Dementia Strategy for the Trust is in development, working with our partners and will be launched soon.

She was looking forward to continuing to improve the Trust's ability to access patient views and experience. She was pleased that the Trust now responds to complaints and concerns in a timelier manner with improved quality of letters. She was now developing a system to ensure cross-Trust learning from all areas such as complaints, serious incidents and patient experience.

There had been a steady improvement in reducing falls and a reduction in the numbers of patients who suffer harm as a result of falling. The Trust was also proud of the low health care infection rate and reduced number of pressure ulcers. Overall there has been a reduction in serious incidents.

She then outlined the key challenge, currently 184 vacancies for registered nurses and the Trust was finding it difficult to recruit into these posts due to a national shortage. She was delighted with the response from health care assistants in relation to the post of nursing associate and already 25 had commenced their training with another 40 planned in the new year.

She concluded by stating that she was positive about the future with the work being undertaken at the current time.

6/16 (AGM)

Annual Accounts 2015/16

Mr Cooper presented the annual accounts for 2015/16. The Trust did not achieve the break even duty i.e. was overspent by £59.9m against the planned £31.3m. He reassured people present that the Trust had enough cash to pay suppliers, despite the deficit. He reported that the Trust had received an unqualified audit opinion.

He then presented a graph which showed the agency expenditure contributing £20m of the £30m overspend. This amount has since reduced. Other pressures in 2015/16 included a 5% increase in emergency admissions against a planned health community increase of 2%. There was then the resultant less elective activity due to these bed pressures.

He then went through the financial plan for 2016/17 which planned a £34.6m deficit. This was a very significant reduction from the final position in 2015/16. As at month 5, Mr Cooper reported that the Trust was on target to meet planned deficit.

In relation to capital spend in 2015/16, £4.3m was spent on improving IT and £1.3m on the Breast Unit. A total of £3.2m was spent on statutory standards for example boilers, windows etc.

7/16 (AGM)

Audit Opinion

Mr R Percival, Grant Thornton, presented the independent Audit opinion. He congratulated the Trust for inviting Grant Thornton to the AGM and stated that this was unusual within the NHS.

The Audit Opinion was unqualified for 2015/16. A focus of the Audit was the ability of the Trust to ensure that it had enough cash and assurance was obtained to this effect. The Audit also reviewed the valuation of assets which had concluded that the valuation was appropriate. He thanked the finance team for the work involved with the final accounts.

The value for money statement was qualified due to the CQC visit and the placing in special measures, the challenges with performance and the financial deficit. Three areas were identified to support the Trust during 2016/17 in value for money – staff engagement in the savings plan; effective trust wide performance management system and delivery on CQC ‘must and should dos’.

In respect of the Quality Account, Mr Percival indicated that the qualified audit was in respect of the VTE indicator as there was no evidence that all eligible patients were being assessed.

In respect of the audit for 2016/17, the Auditors will be looking for the Trust to demonstrate that the PCIP (Patient Care Improvement Plan) is having an impact; operational performance improves; and there is a grip on the financial position over the medium term.

8/16 (AGM)
8/16/1(AGM)

Panel Q&A

Graham Vickery, County Councillor from Redditch asked the following question: What are your reflections on the meeting held in Redditch last night in respect of the future of the Alexandra hospital?

Mrs Merrick thanked Mr Vickery for his question. She reflected that there had been a number of learning points for her personally and for the Trust. She stated that the population in North Worcestershire was reflecting the anger felt in the lack of engagement by the Trust and wider health community in acknowledging the cares and concerns and the services

that they wished to be provided at their local hospital. There were significant concerns about the safety of children, when born and the emergency service. She stated that changes cannot take effect without consideration of transport both availability and cost. She acknowledged that there needed to be more engagement with smaller communities.

She was determined to improve relationships and start the journey to build trust. There needed to be a step change in public engagement and she reflected that many people at the meeting were unable to ask pertinent questions and there was no real exchange of views.

Mr Tidman agreed with Mrs Merrick. There was a lot of anger and frustration and he agreed that there was a need to engage more with the people in North Worcestershire. He was disappointed that the investment plans for the developments at the Alexandra hospital had not been able to be articulated. He also agreed that the Trust needed to be more supportive to families needing open access for their chronically sick child.

Mr Vickery congratulated members of the trust on their courage to face an antagonistic meeting and he congratulated the clinicians for their patience and dignity as they provided the answers. The contribution of the CCG was very helpful and positive and suggested that other organisations such as the ambulance trust should be present at future events.

8/16/2(AGM)

Peter Pinfield, Chair of Worcestershire HealthWatch:

'I have spent three hours in the hands in the medical staff having a small procedure today. They did not know I am chair of HealthWatch. I was treated with dignity and constantly asked whether I was comfortable.'

'We attend the AGM for all local trusts. For us patients and users in Worcestershire, the journey has not been easy. We really want to be a critical friend and we feel the trust is in a difficult position and we can see a plan to rectify the situation. When we made our contribution to the CQC we made the point that we believe that the Trust needs to engage more fully with the people of Worcestershire in the next 12 months.'

He stated that the within the review of acute services, transport is key and this has not been sorted out.

He then asked whether the auditors' role was to point out what needs to be improved or what needs to be done?

Mr Percival stated in the next 12 months, he would expect the Trust to have as its primary concern the financial management and ensure that finances are secure. It is not the Auditor's role to manage the Trust.

Ms Stevens thanked Mr Pinfield for his story and she was pleased that he had received a positive experience. She welcomed his role as a critical friend and she would be contacting him to contribute to the patient involvement strategy that she is developing.

8/16/3(AGM)

Brendan Young, patient and stroke campaigner, noted that the sustainability transformation funding for the acute trust is quite

considerable. He wondered whether the deficit is due to underfunding.

Mr Cooper confirmed that there is less funding per head of population but it is acknowledged that people tend to be healthier living in a rural community. However there was no recognition that Worcestershire was underfunded.

Mr Tidman stated that in the future, the deficit will be for the health community and there will be a move towards overall system management.

9/16 (AGM)

Ophthalmology services

There followed a presentation about the ophthalmology services from Mr Tarun Sharma, Consultant Ophthalmologist.

Mrs Merrick thanked the Mr Sharma for his inspirational presentation. She was impressed with the utilisation of technology for the benefit of patients.

10/16 (AGM)

Looking ahead

Mrs Merrick committed to ensure a step improvement in the engagement of the public, stakeholders and the wider community. She stated that in the Board meeting in November, there will be an opportunity to have a dialogue with the public for one hour.

She is committed to stabilising the Trust Board membership which she has already commenced.

She then thanked all the staff, non-executive directors and executive directors for their dedication, perseverance and resilience. She particularly thanked Mr Burbeck for his time as interim chair.

She was optimistic about the future and looked forward in 12 months' time to reporting positive achievements.

11/16 (AGM)

Date of next meeting

To be advised.

The meeting closed at 19:03.

Signed Date

**Caragh Merrick
Chairman**