
Minutes of the Public Meeting of the Council of Governors
held on July 15 2014
The Mount, Sheffield

Members of the Council of Governors present:

Nicholas Jeffrey	Trust Chairman (Chair)
Alan Baranowski	Partner Governor - Yorkshire Ambulance Service
Momtaz Begum	Public Governor – Sheffield South East
Mary Gerrard	Public Governor – Sheffield North West
Jackie Griffin	Public Governor – Sheffield North East
Thomas Hall	Public Governor – Sheffield South East
Luke Jenkinson	Public Governor – Sheffield South East
Richard Knighton	Public Governor - Sheffield South West
Amaka Offiah	Partner Governor - Sheffield University
Joy Owens	Staff Governor - Medical / Dental
Deborah Salvin	Staff Governor - Nursing & Midwifery
Dawn Walton	Partner Governor – Sheffield City Council

Also present:

Derek Burke	Medical Director
Judith Green	Trust Secretary
Isabel Hemmings	Chief Operating Officer
Alastair McCloskey	Communications Officer
Simon Morrill	Chief Executive
Steven Ned	Director of HR & OD
John Somers	Director of Finance
Naomi Beauchamp	FT member
Gareth Watkins	NED

Apologies:

Philip Ayrton	Staff Governor - Non Clinical
Holly Blair	Patient / Carer Governor
Sue Greig	Partner Governor – 0-19+ Partnership
Hassan Hajat	Public Governor – Rest of England
Julia Hirst	Partner Governor – Sheffield Hallam University
Med Hughes	NED
David Jefferson	Staff Governor - Non Clinical
Sarah Jones	NED
Neil MacDonald	NED
Kate Quail	Carer Governor
John Reid	Director of Nursing & Clinical Operations
Nicholas Roe	Staff Governor - Nursing & Midwifery
Gillian Sykes	Public Governor - Sheffield North West
Gerard Tayeh	Public Governor – Barnsley
Lindsey Thompson	Carer Governor
David Williams	NED
Faye Wooding	Public Governor – Rotherham

32/14	<p>Welcome & Introductions</p> <p>The Chairman welcomed Governors and a member to the meeting. The Chair noted that it was the first meeting with Richard Knighton as lead governor.</p>	
33/14	<p>Apologies for absence and declarations of interest</p> <p>Apologies were received as noted above.</p>	
34/14	<p>Minutes of the previous meeting</p> <p>The minutes of the meeting held in public on 13 May 2014 were taken as a true and accurate record subject to the correction of an omission relating to attendance by public governor, Ms M Gerrard.</p>	
35/14	<p>Matters arising</p> <p>It was confirmed that in relation to matters arising 02/13 (Liaison between Sheffield City Council and Trust re Every Child Matters questionnaire) some e-mail correspondence had taken place and that this needed to be picked up again.</p> <p>The majority of delarations of interest had now been completed – matters arising 09/13</p> <p>The forward plan (matters arising 23/14) was on the agenda for discussion.</p>	
Getting involved - looking and listening		
36/14	<p>What have you been doing?</p> <p>Governors were invited to report into the meeting activities they had been involved in across the Trust.</p> <p>Jackie Griffin reported that she had attended the Helena Trust Open Day</p> <p>Richard Knighton stated that he had taken part in a further cleanliness audit and gave further encouragement to all Governors to participate in these audits, reminding the Council that these could be arranged at difference times of the day and evening to accommodate governor availability. Richard also reported that he had attended a membership engagement event at Sharrow Vale.</p> <p>A further membership engagement event had been attended by Momtaz Begum at Weston Park.</p> <p>Both Richard and Momtaz stated that these events were a great opportunity to represent the Council of Governors and speak to members of the public about the Trust and find out their views.</p>	
Your role as Governors		
37/14	<p>Appointing Non-executive Directors</p> <p>The Chair spoke about how it was reassuring for any organisation to have Non-executive Directors scrutinising it. The Chair said he was very grateful to all involved in the recruitment process and that it was an important responsibility in the role of governors to make sure this process was done correctly.</p> <p>The Chair then invited to Alan Baranowski, Partner Governor, to explain the recruitment process. Alan described how the Remuneration and Recruitment Committee of the Council of Governors had appointed Saxton Bampfylde as external recruitment consultants. The candidates for the role were found to be of high calibre and possessed a range of skills. Alan</p>	

	<p>thanked Saxton Bampfylde for their help in finding the candidates and added that there was a lot of interest in the positions as potential candidates were keen to be a part of Sheffield Children's.</p> <p>An initial field of 25 candidates was reduced to 15 following a long listing exercise. Seven candidates were interviewed for the role.</p> <p>Jacqueline Griffin, Public Governor, was part of the interview panel and explained that the scoring system used went beyond a candidate's CV, but also looked at their additional skills. She told the Council how the successful candidates, John Cowling and Patricia Mitchell, not only had distinguished careers, but also demonstrated a keen interest in the Trust.</p> <p>The Chair offered his thanks to all involved in the recruitment process and said he was very grateful to the Governors for their recommendations.</p> <p>The Council of Governors was then asked to approve the appointment of John Cowling and Patricia Mitchell as Non-Executive Directors for Sheffield Children's NHS Foundation Trust, subject to references.</p> <p>The Council voted unanimously to approve the appointments which will commence from 01 October 2014.</p>	
<p>38/14</p>	<p>Asking questions about the Trust's performance</p> <p>The Chair invited Chief Executive, Simon Morritt, to present the Directors' report to the Council of Governors.</p> <p>Simon confirmed the Trust's current risk ratings from Monitor, with a Continuity of Service Risk Rating of 4 and a Governance Risk Rating of Green.</p> <p>Simon added that Monitor had visited the Trust on 10 June 2014 to speak to Executive and Non-executive members of the board. The main focus of conversation was around the Trust's capacity to deliver to its plan.</p> <p><u>Financial performance</u></p> <p>In the summary of the Trust's Financial Performance, it was noted that the Trust had a total deficit of £506k against a planned surplus of £453k. This was largely due to a reduction in clinical activity including planned and unplanned surgery and Outpatients attendances. Simon explained that the Trust was not delivering according to plan and that recovery plans were being developed to set things right.</p> <p>Simon invited to John Somers, Chief Finance Officer, to further explain the Trust's position. John said that there was activity at the hospital as expected, but that the Trust was not getting the throughput it requires. Productivity must be raised and weekend lists were one of the ways of doing this. The Trust would also look to solidify financial plans and make them more robust as the Trust needs to harden its approach as the whole sector is under increased pressure. He added that the Trust's credible position was in real danger of being eroded and that plans were needed to address this.</p>	

Isabel Hemmings, Chief Operating Officer, noted that the new PAS system was playing into the adverse position. She said that while everything necessary was in place when Medway launched, there were still a few unforeseen issues and the system was still developing its capacity. A Medway Action Group had been set up to address these issues. This has already resulted in fewer issues with Medway.

A question was asked regarding whether the launch of Medway had impacted on waiting times. Isabel said that queues had grown, but the Trust was still meeting the waiting time targets but there was now added pressure.

The Chair noted that although the Trust had experienced a swing of £1m off plan in two months, it was still early in the year and there was time to catch up. The Trust was working hard to identify the issues and implement recovery plans, but with the skills available in the Trust it should be able to see out this difficult period.

Data reporting issues were highlighted and Simon explained that the Trust was not alone in having issues as a result of moving between patient administration systems. All the identified issues with the system are under review and action is being taken to resolve migration and data quality issues.

Quality

The inspection report, which is now a requirement in response to recommendations from the Mid Staffordshire Enquiry, was presented and it was noted that there were no new issues to be aware of.

It was announced that the CQC had sent through their draft report earlier that day and the Trust had 10 days to send over any issues for the CQC to consider. Simon explained that the report needed to be further considered, but the Trust was likely to challenge a few points in the report.

The date for the Quality Summit had been agreed for 31 July and the CQC would send through their final report shortly after that.

Operational issues

Simon explained that the Trust had started the process for implementing an electronic document management system (EDMS). Derek Burke, Medical Director, explained that the Trust was looking to identify a system that not only fulfils requirements, but also delivers cost efficiency most effectively. It was also noted that a bid to the NHS Technology Fund had been made to help support the project.

Capital developments

An update was provided on the hospital's redevelopment with contractors Simons set to start on site in the next two weeks. The University was also set to make a public announcement on the contractors for the multi-storey car park on Clarkson Street.

The Theatres Expansion Project is still on plan and work is due for completion in April 2015.

	<p><u>Items related to staff</u></p> <p>Steve Ned, Director of HR & OD, presented an update on the Trust's workforce report. He explained that Personal Development Reviews (PDRs) and mandatory training attendances were not where they should be. He explained that the PDR policy was currently under review and the Trust was looking at how to increase mandatory training compliance.</p> <p><u>Other Trust news</u></p> <p>The Charity's Make it Better day had been held on 27 June. It was noted that the hospital staff were far more engaged in the day than in the previous year.</p> <p>The elections process for the Council of Governors was also underway. Foundation Trust Secretary, Judith Green, told governors that the deadline for nominations was close and encouraged them to ask friends or colleagues who may be interested in the roles to nominate themselves.</p> <p>Lead Governor, Richard Knighton, asked if the Trust had any plans to publish another members' newsletter as he was impressed by the Trust's most recent newsletter. He also felt that these would be useful for engagement events and were a good way of promoting the Trust to the public and prospective members.</p> <p>Judith explained that the Trust had been focussed on revamping its website over the last 12 months as well as other media. Steve Ned added that the Trust had recently appointed a new Associate Director of Communications who would be able to look further into the possibility of more regular newsletters.</p>	
--	--	--

Helping to shape the Trust's forward plans

<p>39/14</p>	<p>External assurance on radiology diagnostic waiting times</p> <p>Isabel Hemmings, Chief Operating Officer, noted that at the previous Council of Governors meeting Governors were asked to pick a selected local quality indicator. Governors opted for radiology diagnostic waiting times.</p> <p>She explained that the audit had now been carried out by the Trust's external auditors and the report was attached.</p> <p>It was noted in page 10 of the report that auditors had found one case where the referral for a diagnostic test had been left in the patient's notes, and a breach of the waiting times target had occurred as a result of this. The link between radiology and Medway was being investigated as one way of helping to prevent this in the future.</p> <p>Richard Knighton asked if checks would be brought in to prevent an incident like this happening again. Isabel explained that the auditors had looked through a number of cases, but had only found one error and so random sampling may not be the most effective way of preventing errors.</p> <p>Derek Burke explained that the Trust needs to get clinicians used to the system and this would lead to a decrease in clerical errors.</p>	
---------------------	---	--

	<p>Isabel then moved on to the issue of waiting times that had also been flagged up by the external auditors. Guidance for waiting times allows the waiting time clock to be restarted from the appointment date when an accepted appointment is cancelled or not attended by a patient. Currently the Trust only does this where 'reasonable' appointments have been missed or cancelled. It was noted that the Trust was aiming to find the happy ground between delivering good care and reasonable waiting times.</p> <p>The Chair explained that it was a critical situation if the Trust failed to meet its targets, but that the audit had made the Trust better and it was a useful piece of information to have.</p>	
40/14	<p>Trust's forward plan in summary</p> <p>Chief Operating Officer, Isabel Hemmings, gave a presentation on whether the Trust could succeed in a difficult environment moving forward.</p> <p>She explained that she would provide an overview of the Trust's forward plan and how the plan was devised. For the first time, Monitor are asking foundation trusts to provide a financial plan for the next two years and five years respectively, but Isabel explained that predicting this far into the future can be very difficult.</p> <p>The five year plan must include a declaration on sustainability, market analysis of the local health economy, strategic plans and supporting financial information.</p> <p>Isabel said that the local health economy was also providing a challenging backdrop for health services in the region. It was therefore important that providers worked together to meet these challenges.</p> <p>It was also noted that there had been a rise in the number of live births in Sheffield over the last five years and this was expected to continue at the same rate. Yorkshire and the Humber have a comparatively high level of children living in poverty, and poor health was linked to those in poverty.</p> <p>Isabel moved onto the key issues facing children's services in the region with workforce issues, such as nurse recruitment and a reduction in medical trainees, along with an increase in surgical standards and fewer trained surgeons in paediatric care being the main concerns.</p> <p>These factors would lead to a centralisation of children's health care in the future.</p> <p>Activity at the Trust continues to rise, whereas elsewhere activity at other trusts is starting to level out. Elective treatment was pointed out as being on a significant rise.</p> <p>Isabel highlighted the Trust's strengths and weaknesses. Capacity was said to be an area of weakness for the Trust and was an important part of the forward plan. A strong financial base and a wide range of services were noted as two of the Trust's strengths.</p> <p>The national agenda for specialist services was found to be both an opportunity and a threat to the Trust. Isabel explained that the agenda presented the Trust with a number of opportunities, but losing out on these to competing trusts would be detrimental to the organisation.</p>	

Monitor have also asked the Trust to consider its service lines and whether the Trust expected services to shrink or grow. A list of services was presented to the Council.

Isabel also announced the Trust's five main goals as part of the forward plan. These were to provide the standard of care, develop and expand role as a specialist service provider, work in partnership with other providers in Sheffield, expand the Trust's role as an expert provider of specialised pathology services and be a national leader in research and education.

Isabel then invited Chief Finance Officer, John Somers, to explain the figures behind the forward plan. John explained that the Trust's plan was recognised by Monitor as financially sustainable. The plans have been awarded a risk rating of four – the lowest risk in the sector.

John said that the five year plan extrapolates the two year plan and Monitor were happy with the planning assumptions made by the Trust. The Trust had also checked with auditors KPMG to make sure assumptions were in line with benchmarks in the sector.

John explained that the Trust had experienced a 20% growth in activity which was uncommon in the sector, but provided the Trust with an opportunity to do more and if carried out efficiently then the Trust could make the most of it.

John then noted the financial pressures currently faced by the sector. Trusts were making between four to seven per cent savings, whereas the Trust was only make a three per cent saving. This was below the required saving of four per cent each year. The Trust was also being paid less each year, but having to do more and action needed to be taken to address these pressures.

The Trust had also been set a tame cost improvement programme (CIP) target, but it was imperative to deliver this target or it would be added onto next year's target. John said that it was important to deliver as much as possible early in the planning period as this would make the process easier.

The Chair added that the treasury was using the savings made by local authorities as an example for the NHS to follow, but unlike the local authorities who could reduce certain services, such as bin collections, this was much more difficult to do in the NHS.

John also explained that the four per cent efficiency savings were cumulative each year, so in actuality were 100%, 96%, 92%, 88% and so on.

He explained that as part of the plan the Trust had built in known cost pressures such as VAT, the new PAS and junior doctors. This was in order to give assurance to Monitor that the Trust had looked at the broader picture. John explained that it was vital the Trust delivered an increase in activity and the CIP target. The Trust had delivered a financial plan that Monitor was happy with, but needed to keep an eye on the ongoing pressures in the sector and make plans to mitigate any challenges to the Trust's plan.

The Chair thanked John and Isabel, and praised the plan as remarkable due to the tremendously difficult nature of predicting risk.

Council matters**41/14 FT Office update**

Judith Green, Foundation Trust Secretary, announced that the Sheffield Clinical Commissioning Group have announced they are replacing Dr Richard Oliver with Dr Nikki Bates as their representative on the Council of Governors and looked forward to welcoming Nikki to the next meeting.

42/14 Any other business

The Chair announced that Non-executive Directors David Williams and Gareth Watkins would be retiring in September and it was the last opportunity for Governors to thank them for their contribution.

The Chair thanked Gareth for his involvement with the Trust's clinical governance, his diligence and ability to look at the Trust objectively. The Chair also paid tribute to David by saying that the Trust's financial stability was due to his wisdom and foresight.

Gareth said he would like to speak on behalf of David as well and thanked The Chair and the Governors for their kind words.

43/14 The meeting closed at 8.40pm.