

**Minutes of the Public Meeting of the York Teaching Hospital NHS Foundation Trust
Council of Governors held on 20th March 2013, in the Malton Rugby Club, The
Gannock, Old Malton Road, Malton, YO17 7EY.**

Present at the meeting

Chairman of the meeting:

Mrs Dianne Willcocks, Non-executive Director/Vice-Chairman

Public Governors:

Mr Terry Atherton, Bridlington
Mrs Margaret Jackson, City of York
Mr Paul Baines, City of York
Mrs Helen Mackman, City of York
Mr James Porteous, City of York
Mrs Penelope Worsley, City of York
Dr Jane Dalton, Hambleton District
Mrs Ann Bolland, Selby District
Mr Andrew Butler, Selby District
Mrs Jeanette Anness, Ryedale & East Yorkshire
Mrs Sheila Miller, Ryedale & East Yorkshire
Mr Brian Thompson, Ryedale & East Yorkshire
Mr David Wheeler, Scarborough,
Mr Stephen Hinchliffe, Whitby

Appointed Governors:

Councillor Michael Beckett, North Yorkshire & York Forum
Mr Philip Hewittson, Scarborough Whitby Ryedale Clinical Commissioning
Group
Dr Rowena Jacobs, University of York
Councillor Joseph Riches, City of York Council
Councillor Caroline Patmore, North Yorkshire County Council

Staff Governors:

Mrs Helen Noble, Scarborough/Bridlington
Mr Les North, Community Staff
Dr Andrew Volans, Scarborough/ Bridlington

Attendance:

Mr Michael Proctor, Deputy Chief Executive
Ms Elizabeth McManus, Chief Nurse
Mrs Anna Pridmore, Foundation Trust Secretary
Mrs Lucy Brown, Head of Communications

Miss Cheryl Gaynor, Chief Executive's Office Manager

Apologies for absence:

Mr Alan Rose, Chairman
Mr Martin Skelton, York Staff Governor
Mrs Sue Wellington, Scarborough, Public Governor
Mr James Carder, Bridlington, Public Governor
Mr Nevil Parkinson, Selby District, Public Governor
Ms Kay West, East Riding of York Council, Appointed Governor

13/01 Declaration of Interest

Mrs Pridmore requested that any amendments to the declarations be emailed to her to update for the next meeting.

13/02 Minutes of Council of Governors Private Meeting – 12th December 2012

The minutes were approved as a true record of the meeting.

13/03 Matters Arising from the Minutes

There were no matters arising.

13/04 Update from the Private Meeting held earlier

Prof Willcocks advised that the Council of Governors had discussed a number of issues and made a number of decisions as follows:

- Patient Experience was **agreed** as an inclusion for the Governors to receive an update from the Chief Nurse (or her nominated representative) to brief the Governors on the patients' experiences in relation to things like exploring patient confidentiality, visibility, 15 steps etc.
- To receive a regular update on the Clinical Commissioning Groups (CCG) including any relevant information in particular where the Governors can engage. This is to be incorporated into the Chief Executive's Report
- Approved the appraisal of Non-executive Director Philip Ashton
- Approved the appraisal of Prof Willcocks and her reappointment for a further term of three years.*
- Supported the continued development of the Commitment Document and Charter in relation to the Health and Social Care Act 2012 and action list;
- Confirmed the initial definition of a 'Significant Transaction; and
- Approved the amendments to the Constitution

*Prof Willcocks withdrew from the meeting for the duration of this item and took no part in the discussion.

13/05 Lead Governor and Other Governor Reports

Lead Governor report

Mrs Mackman reported that, since the last meeting in December, the new Governors (along with some of the old) have been completing the induction

process which involved some introductory presentations from Directors and some Senior Managers. The induction also involved site visits to many of the hospital sites which were beneficial to the Governors by giving them the opportunity to observe building and patients. The Council of Governors thanked all the staff involved in the arrangements of the induction process.

Mrs Mackman highlighted the core values of the Trust and commented on their appearance on the front page of the Council of Governors agenda. She advised that the values are a significant part of the Trust and that each report incorporates them into its front sheet, identifying which values the report will be aiming to address.

Mrs Mackman commented that the Governors were now getting involved in a whole host of things across the Trust which is giving added assurance to the public.

Mrs Mackman expressed her thanks to the Chairman, Chief Executive and Chief Nurse for their recent open session on 26th February 2013 which focussed on the KPMG report, Francis report and briefly touched on the recent CQC report. It was commented that the Governors felt very assured on the CQC report given the previous negativity.

Quality Group

(Margaret Jackson/Sheila Miller)

Mrs Jackson advised that the group had met on one occasion and gave a brief outline of the discussion.

Constitutional Review Group

(Michael Beckett/Helen Noble/Jeanette Anness)

Mr Beckett assured the Council of Governors that the group had thoroughly reviewed the Constitution. Mrs Pridmore advised that, even though the Constitution was now approved (in the earlier Private meeting), the Constitutional Review Group would continue and will move its focus onto contribution to the Charter.

Annual Planning Group

(Stephen Hinchliffe/Andrew Volans/Andrew Butler/Sue Wellington)

Mr Hinchliffe reported that the group had met on 20th February where they were presented with the previous years plan and a five year strategic plan. He advised that the group were digesting the documentation and arranging to meet again at some point in April to look at the draft plan for 2013/14 based on what Monitor requires. It is anticipated that the May meeting will approve the final 2013/14 plan.

Family and Friends Communication Group

(Helen Noble/Margaret Jackson)

Mrs Jackson advised that the Friends and Family test was an important opportunity for patients to provide feedback on the care and treatment they receive and to improve services. Starting from 1st April 2013, patients will be

asked whether they would recommend hospital wards and A&E departments to their friends and family if they needed similar care or treatment. This means that every patient in these wards and departments will be able to give feedback on the quality of the care they receive.

The test results will be published on NHS Choices at the beginning of July 2013 and will be reported on the Trust website and will also be included in the annual report and quality accounts.

Mrs Noble explained, when patients are discharged, or within 48 hours that follow, the patient will be asked to answer the following question:

“How likely are you to recommend our ward/A&E department to friends and family if they needed similar care or treatment?”

Patients will be given a question card when they are discharged. They can also complete the questionnaire online.

Mrs Dalton queried how the data will be handled when received. Mrs Noble advised that the results will be gathered and analysed rapidly. An overall score for each ward can then be published. The results will be analysed alongside other feedback to identify where action needs to be taken. Although the feedback is anonymous, the cards are coded to ensure that it is clear which area the feedback has come from.

Dr Volans reported that Scarborough Emergency Department had done something of a similar nature previously. There were lots of useful comments but some contradictory. It would have been useful to know when the patients were treated to give a better idea of their situations.

Mrs Noble proposed that it may be useful for the Governors to receive an update of how the Trust is doing. Ms McManus commented that the Trust wants to do this and it has been shown that the impact is greater when feedback is given directly to wards rather than gradually disseminated from numerous direct reports.

Prof Willcocks **requested** an outside meeting of the Governors to update on the progress of the Friends and Family.

Equality and Diversity Committee (Ann Bolland)

Mrs Bolland reported that the first meeting of the Equality and Diversity Committee took place on 29th January 2013 where Sue Holden, Director of Applied Learning and Research, introduced herself as the new Chair of the committee.

Mrs Bolland advised that the committee had discussed the policy for guide dogs accessing the hospital. Currently no such policy existed within the Trust.

The Governors noted that the committee had discussed the use of ‘Pictocom’. Mrs Bolland explained that Pictocom is a communication system that uses distinctive white symbols on a black background providing a focus for

communication and instruction. The symbols capture the common-sense and conventional knowledge of visual representation for ideas and emotions and present these concepts in a clear drawing for effective communication. Pictocom would be used by patients who suffer with communication because of diseases such as cerebral palsy, downs syndrome, autism, stroke patients, individuals who are deaf etc. She advised that she was working closely with Karen Cowley (Specialist Nurse for Learning and Safeguarding) and Margaret Milburn (Equality and Diversity Facilitator) to further develop the use of Pictocom.

Patient Focus Group
(Martin Skelton)

Mr Porteous presented on behalf of Mr Skelton. He reported that this group was making slow progress and it was suggested that the group be revived with new membership. He requested that Governors notify Anna Pridmore, Foundation Trust Secretary if they were interesting in becoming involved with the group.

Patient Experience Steering Group
(Martin Skelton)

Mr Porteous reiterated the need for new membership and urged the Governors to make contact with Mrs Pridmore. Ms Pridmore confirmed that she would email the Governors with the groups and to request any interested Governors to come forwards. She advised that the groups will be formed swiftly in order to get moving with the discussions/decision of the groups.

Mrs Worsley expressed her concern of a patient's experience that was brought to her attention at a recent meeting she had attended. The patient had explained that they had received four copies of a letter in relation to only one appointment. A few of the other Governors reported that a similar incident had happened to patients in Scarborough and Malton hospital. Prof Willcocks advised that she would take this issue back to the relevant department for investigation.

13/06 Minutes of Board of Directors

The Council of Governors noted the minutes from the Board of Directors meetings from November 2012 through to January 2013.

13/07 Chief Executive Report

Mr Proctor, Deputy Chief Executive/Chief Operating Officer attended and presented the report on behalf of the Chief Executive.

Francis Report

Ms McManus reported on the Francis report and the previously mentioned open session with the Governors. She ensured that she was aware that people were conscious of how seriously the Trust was taking the report and its recommendations and assured the Governors that it was her job to lead a response and that the Trust was encouraging staff all the way. She advised that the Government were yet to consider the report and how it resonates with the Trust and what it has already done or has to do. She is now awaiting the Government's response but does not anticipate it being 290 recommendations

as with the Francis report. Ms McManus emphasised that the report is not only about nursing care. Governors will be involved in the Trust's final response.

KPMG

Mr Proctor reported that the KPMG report is now known as the North Yorkshire Strategic Review and has two main focuses:

- Collaborative Improvement Board – This involves representation from York, East Riding, Vale of York and Scarborough and Ryedale. Part of the agenda is to move forwards and work on adequate services on funding provided. Mr Proctor clarified the GPs were represented on this Board.
- CEO – Patrick Crowley, Chief Executive, had pulled together a large group of Chief Executives and Chief Officers of all Clinical Commissioning Groups. They are scheduled to meet bi-monthly at the moment and Mr Crowley is the Chair of these meetings. Hambleton, Ryedale and Whitby were not included in this and were picked up with the Trust separately.

Community Services

Mr Proctor updated that community services management structure had recently been reviewed to enable these services to be more responsive to local needs and to make best use of the community and hospital-based services and estate to help secure their future.

He advised that Community Services Locality Managers had been appointed to give leadership at a local level and to help deliver a consistency of standards across the whole organisation.

From 1st April 2013, the following people will take up their new positions as Community Service Locality Managers (with the exception of Whitby, which will be effective from 1st May 2013):

- Archways Community Hospital and East and West York Community Services: Linda Smith
- Malton Community Hospital, South Ryedale and Scarborough Community Services: Tanya Wilbor
- St Monica's Community Hospital and North Ryedale and North York Community Services: Gerry Rook
- Selby Community Hospital and South York Community Services: Linda McDonagh
- Whitby Community Hospital and Whitby Community Services: Beverley Proctor

Mr Proctor also reported that in addition, Lyeanda Berry had been appointed as Senior Nurse for Quality and Performance (based at Malton Community Hospital but working across Scarborough, Whitby, Ryedale, York and Selby Community Services).

The Council of Governors congratulated everyone on their new appointments.

Site Development

Mr Proctor reported that the Trust was in the planning stage in terms of the York site and will be looking at the Bootham site but it was believed that the focus will

be on children's services. He advised that he would be able to elaborate on this at the next meeting. In terms of the Scarborough developments are the 2nd storey on Maple ward followed by the development of the Duke of Kent ward. Mr Proctor stressed that he doubted work on any scheme would begin until at least another 12 months.

Mr Proctor updated that the car park for Scarborough was at its final planning stages. The site was a former tip so tests were being done but he anticipated work to begin in summer 2013. The car park will create up to 260 spaces.

Brian Golding's presentation that was provided for the Governors in January 2013 is attached for information. The presentation gives further information on the developments of the Trust.

Performance

It had been an incredibly difficult winter for the Trust. There is a national issue of increased waiting times. 30% of foundation Trusts had failed quarter three and it was suspected that up to 50% will fail in the fourth quarter. In terms of York Teaching Hospital, there has been:

- Additional capacity in Malton
- Increase in admissions
- Increase in complexity of admissions
- Norovirus in 10 wards (which is the worst ever reported for York)
- Increase in social services delays. There had been a big increases seen in delays

Mr Proctor reported that the Trust was looking at what can be done to improve things. He expressed that most of the problem was likely to be in the Emergency Department and the lack of bed capacity. The Trust's Acute Board is working on this and is included in the four general areas to develop. The primary area being to try and have a service at the front of the line to assess and treat patients without admission and York is developing its area learning from the Scarborough site. There is a huge plan that the Trust is committed to.

Ambulance Service

There had recently been a strike of the ambulance service and surprisingly eased the running of the emergency department. Patients were intermittently arriving rather than all arriving at roughly the same time. Mr Proctor advised that the next planned strike was scheduled for 2nd April 2013.

Mr Porteous had received some personal comments from an Ambulance Driver and commented; 'surely it only required someone in A&E to be lead in communications with ambulances'. 'The staff (Ambulance Driver) are not aware of who to talk to when they arrive/come through the door'. Mr Proctor advised that the breach of ambulance turnover is not just a local problem. The 15 minutes turnover becomes difficult when the ambulances are backing up. There is always a shift coordinator available but they may not have been available in previous incidents.

Mr Proctor reminded the Council of Governors of their responsibility to hold the Board of Directors to account for breaches. In terms of the waiting times breach, there are consequences. The Trust had failed Q2 but if it fails Q3, it will depend

on what Monitor's (Independent Regulator) view on this is. He assured that the Trust has measures in place but will not do anything that will detrimentally impact on patients. The Trust will do everything it can and Mr Proctor was confident that the Trust has everything in place to deliver.

13/08 Non-executive Directors (NeDs)

Mrs Willcocks invited Mrs Adams to talk a little about herself and her business and organisational background.

Mrs Adams described her professional background and experience as well as her work in the Trust. Mrs Adams is a Non-executive representative on the following groups:

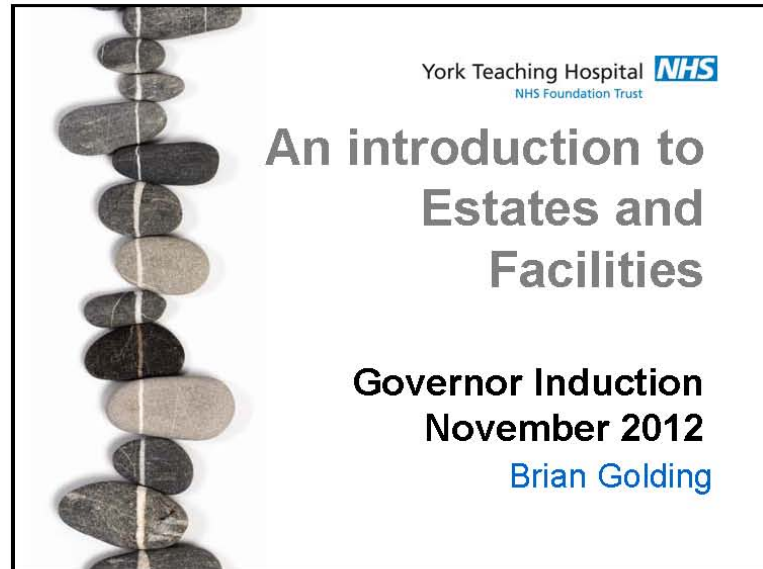
- Board of Directors
- Quality and Safety Committee
- Charitable Funds Committee

13/09 Any Other Business

Mr Butler requested that the Governors awareness and concern around the breach of waiting times be brought to the attention of the Board of Directors.

There was no other business discussed.

Appendix









What's in Estates and Facilities?



- Health and Safety
- Maintenance
- Rates
- Utilities
- Capital Development

- Fire Safety
- Post room
- Print room
- Transport
- Portering



- Catering
- Linen
- Security
- Helpdesk



- Cleaning
- Car Parking
- Grounds and Gardens
- Switchboard



- Reception
- Uniforms
- Waste management
- Minor works

- Decorating
- Medical Equipment maintenance
- Window cleaning
- Pest control



Some statistics

- Over 800 staff
- Annual budget of approx £25M p.a.
- Capital programme of approx £10M p.a.
- Strategic funding of £20M for Scarborough



Current Challenges

Cost improvement programme

Estate Condition

Carbon reduction

Estate rationalisation



Cost Improvement programme

- Modernising catering
- Automated switchboard
- New waste management contract
- Linen service
- Energy saving initiatives
- Combined heat and power



Estate Condition


- Scarborough site
- Community properties
- Routine wear and tear
- National standards



What is Sustainable Development?

“The aim of Sustainable Development is to enable all people to satisfy their basic needs and enjoy a better quality of life, without compromising the quality of life for future generations”

Sustainable Development Commission



“....our children and grandchildren will ask not what our generation said, but what it did.”



Prince Charles, Copenhagen December 2009



How to get involved:

- Travel and Transport group
- Sustainable Development group



Estate Development Plans

Master planning York Hospital



Impression of the proposed new OPD / Paediatric unit at SGH

