

## Annual Members' Meeting



Meeting to be held on Tuesday 04 July 2017, at 4pm  
in The Inspire Centre at the Queen Elizabeth Hospital King's Lynn, PE30 4ET

There will be an opportunity to talk to Governors and Directors over refreshments,  
from 3.30pm.

### ~AGENDA~

1.	4.00 pm	INTRODUCTION AND WELCOME – Trust Chair
2.	4.05 pm	MINUTES OF THE 2016 ANNUAL MEMBERS' MEETING – Trust Chair
3.	4.10 pm	THE WORK OF THE GOVERNORS IN 2016/17 – Lead Governor
4.	4.15 pm	INTRODUCING THE TEAM – Trust Chair
5.	4.20 pm	LOOKING BACK - 2016/17 (Annual Report, Financial Accounts and Quality Report) – Chief Executive Officer
6.	4.40 pm	STROKE SERVICES – Medical Director & the Stroke Team
7.	5.00pm	QUESTIONS
8.	5.15 pm	LOOKING FORWARDS - #TeamQEH – Chief Executive Officer
9.	5.40 pm	QUESTIONS
10.		CLOSE – Trust Chair

Apologies to: Corporate Office, Mary Denmark on 01553 613142 or email [mary.denmark@qehkl.nhs.uk](mailto:mary.denmark@qehkl.nhs.uk)

## **Conduct at Members' Meetings**

### **Extract from the Trust's Constitution - Annex 9**

- 1.16** Any approval to speak at a members' meeting must be given by the Chairman. Speeches must be directed to the matter, motion or question under discussion or to a point of order. Unless in the opinion of the Chairman it would not be appropriate or desirable to time limit speeches on any topic to be discussed having regard to its nature, complexity or importance, no proposal, speech or any reply may exceed three minutes. In the interests of time, the Chairman may, in his or her absolute discretion, and where that discretion is exercised reasonably, limit the number of replies, questions or speeches which are heard at any one members' meeting.
- 1.17** A person who has already spoken on a matter at a members' meeting may not speak again at that meeting in respect of the same matter except (i) in exercise of a right of reply, or (ii) on a point of order.
- 1.18** The Board of Directors shall cause minutes to be made and kept, in writing, of all proceedings at members' meetings.

## ANNUAL MEMBERS' MEETING

**Minutes of the Annual Members' meeting held on Wednesday 20 July 2016  
at 4 pm in the Hub Restaurant at the Queen Elizabeth Hospital King's Lynn**

### Present:

Edward Libbey (EL) Chair	Trust Chair
Dorothy Hosein (DH)	Chief Executive Officer
David Stonehouse (DS)	Finance Director
Catherine Morgan (CM)	Director of Nursing
Bev Watson (BW)	Medical Director
Sandy Spencer (SS)	Chief Operating Office (Interim)
Gary MacLeod (GMI)	External Auditor
Stephanie Beavis (SB)	External Auditor

### Also in attendance:

Maureen Carson (MC)	Non-Executive Director
Ian Pinches (IP)	Non-Executive Director
John Rees (JR)	Non-Executive Director
Dave Thomason (DT)	Non-Executive Director

### Governors:

Steve Clark (SC)	Public Governor – West Norfolk
Esme Corner (EC)	Public Governor – West Norfolk – (Lead Governor)
Jonathan Dossetor (JDo)	Public Governor – West Norfolk
Penny Hipkin (PH)	Public Governor – West Norfolk
Robert Outred (RO)	Public Governor – West Norfolk
Peter Tasker (PT)	Public Governor – West Norfolk
Barrie Taylor (BT)	Public Governor – West Norfolk
Aimee Hicks (AH)	Public Governor – SE Lincs
Clive Monk (CRM)	Public Governor – Breckland, North Norfolk & Rest of England
Jennifer Brodie (JB)	Public Governor – Cambridgeshire
Betty Lewis (BL)	Public Governor – Cambridgeshire

Ray Johnson (RJ)	Appointed Governor – Freebridge Community Housing
Jim Perkins (JP)	Appointed Governor – Norfolk County Council
Hilary De Lyon (HdL)	Appointed Governor – West Norfolk CCG
Jane Evans (JE)	Appointed Governor – West Norfolk Carers

Mark Abbott (MA)	Staff Governor – Clinical
Darren Barber (DB)	Staff Governor – Non-Clinical
Sophia Buckingham (SB)	Staff Governor – Non-Clinical
David Coe (DC)	Staff Governor – Non Clinical
Julie Calton (JC)	Staff Governor – Clinical
Nigel Tarratt (NT)	Staff Governor – Clinical

### Staff In attendance:

Gill Rejzl (GR)	Trust Secretary
Dominic Chessum (DCh)	Communications Lead
Victoria Fear (VF)	Communications Officer
Mary Denmark (MD)	FT Membership Officer & minute taker

**01/16 1. INTRODUCTION AND WELCOME****Action**

Trust Chair, Edward Libbey (EL) welcomed everyone to the meeting.

It was reported that the Trust had come a long way over the last 12 months:

- Exiting special measures and making much progress in what had been a challenging environment;
- Estate improvements had been excellent;
- The guest Wi-Fi system had gone 'live' and was now available to staff, patients and visitors;
- The last quarter saw record breaking numbers of patients attending the hospital with staff working tirelessly to provide a quality service;
- Staff, volunteers and governors were thanked for their hard work and loyalty.

Medical Director, Beverly Watson was due to retire from the Trust in September 2016 after 19 years at the QEH. On behalf of the Board and all staff, EL expressed his gratitude to BW for the contribution she had made to the Trust over that period.

**02/16 2. MINUTES OF THE ANNUAL MEMBERS' MEETING: 23/07/2015**

The minutes were agreed as an accurate account of the meeting.

**03/16 3. THE ANNUAL REPORT 2015/16**

Chief Executive Officer, Dorothy Hosein (DH) gave an overview of the year. 2015/16 was a busy year for the QEH:

- A year of significant achievement for the Trust;
- One of the biggest milestones was the lifting of Special Measures following a positive inspection by the Care Quality Commission, which also praised staff for their care and compassion; This year saw the Trust complete major projects such as the opening of the new Midwife-Led Birth Unit, the Breast Unit and the state-of-the-art operating theatre 6 (all delivered on time);
- Wi-Fi implementation – a welcome platform for the IT strategy;
- The hospital was continuing to achieve its objectives, despite seeing rising levels of patients;
- The Trust met its budgetary commitments;
- The Trust met its 18 weeks referral to treatment target;
- The Trust delivered the 62-day cancer standard;
- More rigorous infection prevention and control measures were in place.

Figures -:

- 59,902 patients arrive at the A&E Department compared 56,779 in 2014/15,
- 38,055 inpatients were treated compared with 36,451 in 2014/15
- 280,721 outpatients were seen compared with 265,508 in 2014/15
- The Trust carried out 33,820 day-case procedures compared with 31,777 in 2014/15
- 2,479 babies were born at the hospital compared with 2,446 in 2014/15

Staff were thanked for rising to meet the hospital's challenges, which were increasing day-on-day. Staff had demonstrated that they were committed to the ambition and expectation to 'aim for excellence' now and going forward.

Key challenges for 2016/17:

- Financial stability
- The emergency pathway
- Nurse and medical staff recruitment and retention

- Embedding and sustaining quality improvements

## **THE ANNUAL MEMBERS' MEETING NOTED THE 2015/16 ANNUAL REPORT**

### **04/16 4 THE QUALITY ACCOUNT**

Catherine Morgan (CM), Director of Nursing, presented on the Quality Report and highlighted achievements, which included:

- Providing more choice to patients at the end of life;
- The external ceiling for the number of Clostridium Difficile cases was met (39 cases during the year);
- There had been a monthly reduction in cases since October 2015;
- Improvements achieved in medicines management which include:
  - 11% reduction in recorded incidents
  - 25% reduction in administration errors
  - 30% reduction in incidents leading to harm
- A continued reduction in hospital-acquired pressure ulcers, achieving a 29% reduction compared to the previous year;
- Recruitment drive for nurses and midwives with more than 50 more in post compared to 2014/15.

Medical Director, Bev Watson commented that the Frailty Pathway was a high priority for the organisation and improvements had been made to this service.

The Trust remained committed to continuing to focus on those quality areas where further improvement needs to be embedded. This included:

- Improvements in patient flow for emergency patients, taking into account the 6% increase in attendance during the last quarter. Focus on improvements to the discharge pathway and working together with partner agencies;
- Improving the recommendation scores on both the patient and staff Friends and Family test by listening to feedback and responding to concerns and comments with action and change;
- A further reduction in the number of cases of hospital-acquired C. Difficile;
- Reducing the number of inpatient falls.

## **THE ANNUAL MEMBERS' MEETING NOTED THE QUALITY ACCOUNT**

### **05/16 5 THE ANNUAL ACCOUNTS 2015/16**

The Finance Director, David Stonehouse (DS) reported the Trust had delivered the £13.9m deficit in line with plan.

- The Trust had a Financial Sustainability Risk Rating of 2 (lowest level of assurance is 1); the improved rating was associated with the achievement of the 2015/16 financial plan £13.9m deficit;
- The Trust received £21m of new loan funding from the Department of Health in 2015/16. The funding ensured that the Trust could continue to meet day to day financial obligations and supported an £11.8m investment in capital infrastructure – demonstrating a confidence in the hospital;
- The Trust delivered cost improvements, productivity and efficiency gains of £6.9m against a plan of £8.2m. This included income associated with managing unplanned care volumes;
- The cost of agency staff remained a significant challenge at £10.4m, an increase of circa 300k on 2014/15.

2016-17 looked equally challenging with the required delivery of a £5.3m deficit plan

dependent upon:

- Cost efficiency and productivity improvement and agency reduction of more than £6m;
- The receipt of £6.5m Sustainability and Transformation Funding through delivery of the Trust's financial plan and operational performance.

The Trust would look to further reduce agency pay, to help drive savings.

Longer term financial sustainability of the Trust would build on the CPT work, which was being developed locally with West Norfolk CCG as part of the Norfolk and Waveney Sustainability and Transformation Plan.

## **THE ANNUAL MEMBERS' MEETING NOTED THE 2015/16 ANNUAL ACCOUNTS**

### **06/16 6 THE AUDITOR'S REPORT - KPMG**

Stephanie Beavis of KPMG advised that the last year's accounts had been the 'cleanest' set of accounts audited to date.

Key findings:

#### **Financial Statement –**

- There were no unadjusted audit differences;
- KPMG agreed minor presentational changes to the accounts with Finance, mainly related to compliance with the Annual Reporting Manual (ARM);
- KPMG obtained routine confirmations from management in their representation letter.

They reviewed the annual report and had no significant matters to raise.

#### **Use of Resources - Going Concern:**

The Trust's Annual Governance Statement set out progress made against the plan and also highlighted a number of on-going challenges around:

- Financial sustainability;
- Emergency pathway;
- Nurse and medical staffing; and
- Embedding and sustaining quality improvements.

The Trust delivered its financial plan in 2015/16, (a deficit of £13.9 million), although the Trust was not able to meet its in-year stretch target of £13.3 million set by Monitor. The Trust remained reliant upon cash support from the Department of Health. As a result of previous breach of licence and these matters, KPMG were unable to satisfy themselves that the Trust made proper arrangements for securing economy, efficiency and effectiveness in its use of resources for the year ended 31 March 2016. The Trust remains a Going Concern.

#### **Quality:**

The Trust achieved a clean limited assurance opinion on the content of its Quality Report.

- KPMG tested (i) percentage of incomplete pathways within 18 weeks for patients on incomplete pathways, and (ii) percentage of patients within a total time in A&E of 4 hours or less from arrival to admission, transfer or discharge.
- Work on the two mandated indicators has concluded that:
  - There was insufficient evidence to provide a limited assurance opinion in respect of the percentage of incomplete pathways within 18 weeks indicator. This was because there were system limitations that meant

that the Trust was unable to provide the appropriate data for that indicator as at 31 March 2016;

- There was sufficient evidence to provide a limited assurance opinion in respect of the A&E four-hour indicator;
- Work on the local indicator 'pressure ulcers' as selected by Governors indicated that if required, KPMG would be in a position to provide a limited assurance opinion.

In respect of any public interest matters, which should be subject to immediate report, there were no matters KPMG wished to report.

Overall, significant progress was reported to have been made.

### **THE ANNUAL MEMBERS' MEETING NOTED THE 2015/16 AUDITOR'S REPORT**

#### **07/16 7 APPOINTMENT OF THE TRUST'S EXTERNAL AUDITOR**

David Stonehouse (Director of Finance) advised that:

- The Trust's existing contract with KPMG was due to expire and an Audit Task & Finish Group had evaluated submissions and presentations from prospective candidates for the new contract;  
The new contract would run for 3 years with an option to extend for a further 2 years.

The Governors' Council had convened earlier to consider the report and proposal and following a vote, the preferred candidate (the name was not released to the AMM) was unanimously approved as the Trust's Auditors.

The notification period would take approximately 10 days, after which the appointment would be made public.

### **THE ANNUAL MEMBERS' MEETING NOTED THE PROPOSED APPOINTMENT OF THE TRUST'S EXTERNAL AUDITOR (KPMG – added to the minute following announcement)**

#### **08/16 8 MEMBERSHIP STRATEGY**

Jonathan Dossetor (JD), Chair of Membership and Communications Committee (M&CC) gave an overview of the membership strategy.

Total Membership as of July 2016	7,261
By area:	
Breckland, North Norfolk & Rest of England	1,298
Cambridgeshire	653
South East Lincolnshire	588
West Norfolk	4,722
By gender:	
Males	2,912
Females	4,349

The Trust sought to maintain membership at around the 7,000 - 7,500 mark and to ensure that this was representative of the population. Key engagement links were:

- 'Trust Matters' newsletter: a summer edition was due to be published shortly – feedback would be welcomed;
- Healthcare Events: in May, a successful Arthritis Event was held with 100 people attending. A Parkinson's Event would be held on Thursday 8 September.

JD gave thanks to the Communications Department and Mary Denmark for their assistance in advertising and organising the Arthritis Event.

### **THE ANNUAL MEMBERS' MEETING NOTED THE MEMBERSHIP STRATEGY UPDATE**

#### **09/16 9 ADOPTION OF THE REVISED CONSTITUTION**

The Chair and the Lead Governor (Esmé Corner, OBE) advised the AMM of the statutory obligation for the members to approve the adoption of the revised Constitution as detailed below:

- Changes were agreed by Governors in October 2015, to make the Council more representative of the patients, members and the public served by the hospital, following work carried out by a Task and Finish Group;

PREVIOUS		REVISED	
Public Constituency Area	Govs	Public Constituency Area	Govs
West Norfolk	9	West Norfolk	9
North Norfolk	2	Cambridgeshire	3
Breckland	1	South East Lincolnshire	2
Cambridgeshire	4	North Norfolk, Breckland and Rest of England	2
South East Lincolnshire / Rest of England	1		
Total Elected Governors	17	Total Elected Governors	16

- There was a consultation through 'Trust Matters' in October / November 2015 – 23 responses – all but one supporting the proposal;
- The proposed revision of a decrease of 1 public governor (from 17 to 16) and realignment of constituencies was adopted by both the Governors' Council and the Board of Directors.

EC explained that the 'Rest of England' category, in the main, represented holiday makers / visitors in the region, especially North Norfolk, who subsequently had need to use the QEH services.

Following a show of hands to approve the adoption of the revised constitution; this was unanimously agreed.

### **THE ANNUAL MEMBERS' MEETING UNANIMOUSLY APPROVED THE REVISED CONSTITUTION**

#### **10/16 10 THE ELECTION REPORT**

The Lead Governor, Esme Corner, advised:

<b>Public: West Norfolk</b> Number of eligible voters:	4,708	Turnout 15.5%
Votes cast by post:	536	
Votes cast online:	195	
Total number of votes cast:	731	

The following candidates were elected (using the single transferrable voting system)

- **BROKE**, Robin
  - **CLARKE**, Simon
  - **OUTRED**, Robert
  - **TASKER**, PETER
- (in alphabetical order)

<b>Staff – Non clinical</b> - Number of eligible voters:	1,109	Turnout 13.4%
Votes cast by post:	26	
Votes cast online:	123	
Total number of votes cast:	149	

The following candidates were elected (using the single transferrable voting system)

- **BARBER**, Darren
  - **BUCKINGHAM**, Sophia
- (in alphabetical order)

**Four areas were uncontested:**

- Breckland, North Norfolk & Rest of England: **NAVARRE** Xavier - appointed
- Cambridgeshire: **BRODIE** Jenny – re-appointed
- SE Lincolnshire: **HICKS** Aimee – appointed
- Staff Clinical: **ABBOTT** Mark and **TARRATT** Nigel – appointed / re-appointed

There is currently 1 vacant governor post in the South East Lincolnshire constituency.

Online voting took place for the first time and was expected to continue to increase turnout in the future. The next election process, whilst still following statutory requirements, would commence a week earlier (helping to avoid the Christmas postal period). It was hoped the Trust might see increased turnout as a result.

## **THE ANNUAL MEMBERS' MEETING NOTED THE ELECTION REPORT**

### **11/16 QUESTIONS**

There were no questions.

EL thanked Dorothy Hosein, all staff, governors, volunteers, FT members and patients for their support over the last 12 months and looked forward to continued support during 2016/17.

**The meeting concluded at 5.10 pm**