

**MINUTES OF THE BOARD MEETING**

**HELD AT THE HOLIDAY INN TELFORD, ST QUENTIN GATE, TELFORD TF3 4EH**

**AT 4.45 PM ON MONDAY THURSDAY 13 OCTOBER 2016**

**PRESENT**

**Chair and Non-Executive Members (Voting)**

Mr. Mike Ridley	<i>(Chairman)</i>
Mr. Rolf Levesley	<i>(Vice Chairman)</i>
Mr. Steve Jones	<i>(Non-Executive Director)</i>
Ms. Nuala O’Kane	<i>(Non-Executive Director)</i>

**Executive Members (Voting)**

Ms. Jan Ditheridge	<i>(Chief Executive)</i>
Ms. Ros Francke	<i>(Director of Finance)</i>
Mr. Steve Gregory	<i>(Director of Nursing and Operations)</i>
Ms. Mel Duffy	<i>(Director of Strategy)</i>
Dr. Mahadeva Ganesh	<i>(Medical Director)</i>

**Executive Members (Non-Voting)**

Ms. Julie Thornby	<i>(Director of Corporate Affairs)</i>
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**Staff, Partners and Members of the Public**                      Approximately 50

**In Attendance**

Mrs Louise Tompson	<i>(Personal Assistant, to record the minutes of the meeting)</i>
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**1. Welcome and introductions**

On behalf of the Board Mr Ridley welcomed all those present to the Trust’s Annual General Meeting, including representatives from partner organisations, members of the public and Trust staff. He thanked all of the exhibitors for their very informative displays. He commented that the performance of the Trust has improved through the year and we have maintained financial balance. He said that it continues to be a privilege to be the Chair of this Trust; staff do so much for the community and it is good to see the number of compliments received, and positive feedback from the friends and family tests and from patient and carer groups.

<b><i>Position noted.</i></b>
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**2. Apologies**

Ms. Jane Mackenzie	<i>(Non-Executive Director)</i>
Mr. Peter Phillips	<i>(Non-Executive Director)</i>

**3. Minutes of the AGM held on 28 September 2015**

The minutes of the last AGM were received and approved.

***Mr Jones FORMALLY PROPOSED that the Minutes of the Board Meeting of Shropshire Community Health NHS Trust held on 28 September 2015 be received and approved as an accurate record. The proposal was SECONDED by Mr Gregory.***

#### **4. Chief Executive's Review of the Year (Annual Report 2015/16, available on our website)**

Ms Ditheridge presented an overview of the Trust including what we did in 2015/16, how we did it, and an overview of the services the Trust provides. She took the opportunity to remind people who we are and what we do, explaining that often people are not aware of services the Trust provides unless they have used them. She was pleased that so many staff were able to attend. She thanked the League of Friends for their continued support and the work carried out by the many volunteers and partners.

Ms Ditheridge summarised the key services we provide, ie supporting:

- vulnerable people with long term conditions
- families
- patients, to enable them to live the life they want

A substantial amount of work around our values had been done this year. All staff work to these values, and they have been agreed by staff, including respect and dignity, everyone counts, and working together with our partners. We couldn't do what we do without strong links with others.

Our services are delivered by 1600 dedicated and professional members of staff who support children and adults across Shropshire, Telford and Wrekin, Dudley and surrounding areas. We are responsible for about £80m and we make that funding go a long way.

Last year we said we will progress work on the future models of community services, and we did:

- Development of clinical and quality strategies
- Urgent Care Centres and Community Hospital Strategy including Neighbourhoods
- 0-25 Emotional Health and Wellbeing Service

We said we will continue to support staff to do their jobs, and we did this by:

- Development of the Organisational Development Framework
- Staff Away Days
- Learning from feedback with our Patient and Carer Panel
- University-accredited Mentor programme
- Staff Awards

We said we will choose and implement our new Electronic Patient Record (EPR). The system has been chosen and we have started to train staff in advance of the expected launch in January 2017.

The Trust was inspected by the Care Quality Commission (CQC) in March 2016. Sixty percent of services were rated good, and children's services and dental services were rated good in all areas. Ms Ditheridge said that the domain of 'care' was rated as good in all areas, but she recognised that there were areas which required improvement, which had been our overall rating.

Our priorities for the year ahead include:

- Getting to 'Good' and beyond
- Building our 5 year plan
- Implement Electronic Patient Record

## **5. Presentation of our Quality Accounts**

Mr Gregory presented an overview of the Trust Quality Account which can be viewed on the Trust website.

He explained the priorities over the last year which included:

- Sign up to safety campaign – resulted in a reduction in the number of omitted medications. We have also changed the way we handover care in our Community Hospitals.
- Learning from incidents – sharing good practice when things go right and sharing the learning and saying sorry when things are not as they should be.

Referring to the Trust's CQC inspection, Mr Gregory said that we were rated as inadequate in relation to end of life care. It is really important that we do better on this. No one organisation can fix the situation in isolation, but we believe we have the skills within this Trust to be a system leader in relation to it.

Mr Gregory explained the priorities for the year ahead:

- Supporting urgent care in Shropshire by keeping people safely at home or getting them home where they want to be
- Working together to further improve the care that we provide to people at the end of their lives
- Acting upon feedback to change the way services are delivered
- Setting out clearly what good looks like; helping our staff to better understand and use information to make changes

## **6. Presentation of our Annual Accounts**

Ms Francke provided a brief overview of the Trust's financial performance over the last year. She explained that our income totalled £78,940,000. We did not achieve a surplus of £1,355,000 due to technical issues with the implementation of EPR, which required more authorisation by regional and national authorities. There was a danger that ring-fenced money for this project would be lost but we have found a way of preserving the money to fund the EPR implementation.

It was noted that 53% of the Trust's income was received from Shropshire Clinical Commissioning Group and 19% from Telford and Wrekin Clinical Commissioning Group and the remaining amount from NHS England, Local Authorities and other partners. In terms of expenditure for 2015/16 the majority (72%) of the income was spent on staff and 12% was spent on clinical supplies.

The Trust has invested £1.3m in our assets including medical equipment purchases, therapeutic garden, and refurbishment and updating of premises and information technology and software. This year this included £159k from charitable donations, and Ms Francke thanked the community hospital Leagues of Friends for all of their donations over the past year.

## **7. Questions or comments from members of the audience**

Mr Ridley invited questions from the public. A member of the audience raised a concern on behalf of the deaf community. She commented that when patients are admitted to hospital, an interpreter is often not available quickly enough, which is a vital area for improving patient care. Mr Ridley thanked her for the comments and our position on this would be looked at.

## **8. A Patient's Story – how telling my story is making a difference**

Julie Southcombe explained how she feels telling her story to different groups in the Trust is making a difference. She provided an overview of her experience as a patient and service user and her contact with NHS services to date. Julie was diagnosed with type 1 diabetes at 17 years of age which resulted in her sight loss.

Julie described how she attended a Trust Board meeting last year to share her experiences of healthcare - primary, secondary and in the community. Her involvement with the Trust since then has continued in many ways including as an active member of the Trusts' Patient and Carer Panel, as has helped her grow as a person.

She believed that patient stories give invaluable insight for the Trust and its staff, she would welcome the opportunity to become more involved in the coordination of patient stories so that they can be shared even more widely to improve services and create change.

Ms Ditheridge thanked Julie for coming today, and for always sharing things constructively while pointing out areas that needed improvement. We appreciate her valuable input in to the Trust and Julie was involved earlier this year on the panel to appoint the Trust's Freedom to Speak up Guardian.

## **9. Queens Nurses – recognising and encouraging excellence in clinical practice**

Jo France, Head of Nursing and Quality Children and Families and Angela Cook, Head of Nursing and Quality for Adult services spoke about the Queen's Nurse Institute, the purpose of the role of Queen's Nurse, and what it means to them to be a Queen's Nurse.

The purpose of the Queen's Nurse title is to recognise and encourage excellence in practice, innovation and improvements in care. It recognises and promotes effective relationships between nurses and patients in the community. The title links Queen's Nurses together for learning, leadership and practice development.

Angela and Jo explained that the Trust has 10 Queen's Nurses in Shropshire, Telford and Wrekin and Dudley. They spoke about what it takes to become a Queen's nurse, and the commitment needed. The titles are awarded to individuals for implementing innovative projects that improve care for patients.

## **10. Closing Comments**

Mr Ridley closed the meeting by saying that it continues to be a privilege to chair this organisation. He thanked the Trust Board and the executive team and commented that we have progressed enormously since the inception of the Trust. He especially thanked all those who attended, including partners, Patient and Care Panel representatives and staff.