

Minutes of the Blackpool Teaching Hospitals NHS Foundation Trust
Council of Governors Meeting held on Monday 21st May 2012
at 9.30 am in Room 4, Health Professionals Education Centre, Blackpool Victoria Hospital

Present: Mr Ian Johnson – Chairman

Council of Governors

Public Governors:-

Mr Eric Allcock – Blackpool Constituency
Mr John Bamford – Wyre Constituency
Mr John Butler – Blackpool Constituency
Mr Ramesh Gandhi – Wyre Constituency
Mrs Hannah Harte – Blackpool Constituency
Mr George Holden – Blackpool Constituency
Mrs Jo MacDonald – Lancashire & South Cumbria Constituency
Mr Chris Smith – Blackpool Constituency
Mrs Anne Smith – Fylde Constituency
Mr Chris Thornton – Blackpool Constituency
Mrs Lynden Walthew – Wyre Constituency
Mr Tony Winter – Fylde Constituency

Staff Governors:-

Mr Andrew Goacher – Nursing and Midwifery
Mrs Cherith Haythornthwaite – Clinical Support
Dr Tom Kane – Medical and Dental
Mrs Claire Lewis – Community Services
Mrs Sam Woodhouse – Nursing & Midwifery

Appointed Governors

Mr Roy Fisher – NHS Blackpool
Dr Tom Kennedy – University of Liverpool
Mrs Jean Taylor – UCLAN
Mrs Susan Rigg – Lancashire Care NHS Foundation Trust

In Attendance: Mr Aidan Kehoe – Chief Executive
Tim Welch – Deputy Chief Executive
Mrs Pat Oliver – Director of Operations
Mrs Wendy Swift – Managing Director of Community Development and Transformation (for items 30 – 51)
Mrs Mary Aubrey – Deputy Director of Corporate Affairs and Governance
Miss Judith Oates – Foundation Trust Secretary
Mr Paul Olive – Non-Executive Director
Mr Malcolm Faulkner – Non-Executive Director
Dr Mark O'Donnell – Medical Director (for items 3 and 4)
Mr Paul Jebb – Patient Experience Manager (for item 5 and 6)
Mr Mike Hodgkinson – Blackpool LINKs

1. Chairman's Introduction

The Chairman welcomed all Governors to his first meeting and expressed thanks to the Governors for making him feel so welcome at the Trust. It was noted that the Chairman had now had the opportunity to speak to the majority of the Governors, either on the telephone or in person.

The Chairman expressed the view that he believed the Governors had a vital function in the work and life of the Trust and that he would welcome engagement collectively and individually; it being noted that the changes as a result of the Health and Social Care Act would only reinforce this position.

The Chairman stated that he looked forward to establishing a good working relationship with the Governors.

At this juncture, the Chairman apologised for the length of the agenda, which contained 51 items, and stated that he would endeavour to progress through the business in the most effective way possible. With regard to items 24 – 27, the Chairman suggested that consideration be given to ways in which the agenda could be streamlined to ensure more effective use of Governors' time.

2. Register of Interests

The Chairman reminded Governors that they were required to complete the "Declarations of Interests" form on an annual basis and therefore requested that they complete the form and forward it to Miss Oates, either today or within a reasonable timescale.

RESOLVED: That Governors would complete the "Declarations of Interests" form and return it to Miss Oates.

3. Introduction by Dr Mark O'Donnell, Newly Appointed Medical Director
4. AQuA Mortality Report and Trust Action Plan

The Chairman introduced Dr Mark O'Donnell, the newly appointed Medical Director and thanked him for attending the meeting and making himself visible to the Governors.

Dr O'Donnell welcomed the opportunity to introduce himself to the Governors and provided background information as follows:-

- He had assumed the role of Medical Director on the 9th April 2012.
- He had been an employee of the Trust for eighteen years and was initially appointed as a Consultant Geriatrician with an interest in rehabilitation.
- He was currently a full-time Stroke Physician and had been involved in the development of the Stroke Service in Blackpool.
- He had been the Clinical Lead for the Stroke Network in Cumbria and Lancashire.

Dr O'Donnell advised the Governors of the issues that featured high on his agenda as follows:-

- Zero tolerance to patient harms – he was working with Mr Bamford to take this issue forward.

- Perceived high mortality in the Trust – this was partly due to the way in which mortality was reported. Reference was made to the mortality report produced by AQuA, which was a lengthy and complex document, and it was noted that the Trust had produced a detailed action plan which has been agreed by AQuA and shared with Monitor.
- Medical education and training – he was keen to integrate training and development much more into the day to day work of the hospital.
- Medical revalidation – this initiative was driven by the GMC and required all doctors to be revalidated on a five year cycle from 2013.

At this juncture, Dr O'Donnell left the meeting.

Mr Bamford stated that he had missed the opportunity to ask questions and he provided the following comments.

- *"AQuA should be complimented on producing such a thorough report so quickly.*
- *The Trust should also be complimented on producing a mortality reduction plan so quickly.*
- *The whole area of mortality indices is complex and controversial. The AQuA report highlights coding as the likely source of most of the adverse variance in the Trust's SHMI and HSMR.*
- *The work to improve coding is clearly sensible. If it transpires that coding is not the reason for the high mortality, then the report indicates that there are 120 more patient deaths in the Trust than in an "average" Trust treating the same number and mix of patients.*
- *It is important to focus on reducing patient mortality and to use the metrics to monitor improvement.*
- *Inclusion within the Trust's action plan to develop the recognition and response to the deteriorating patient is welcomed. I would suggest that a review of timely escalation by junior staff is included within this action.*
- *The review of the numbers of doctors and nurses per bed and the mix of skills and the recognition of the need to move towards 7 day working is welcomed."*

Mr Kehoe agreed with Mr Bamford's comments and assured the Governors that the action plan included all relevant issues and that it was important to concentrate on improving clinical quality, therefore the work would include care pathways, care bundles, auditing best practice, etc.

RESOLVED: That the Governors would receive regular updates on the Mortality Action Plan.

22. Final Corporate Objectives 2012/13

Mr Kehoe presented the final draft of the corporate objectives which incorporated all elements of the Trust's vision.

Mrs Walthew referred to the 30% reduction and green rating for Hospital Acquired Pressure Ulcers and suggested that it might be clearer to have numbers rather than colours.

RESOLVED: That numbers would be included within the corporate objectives.

Mrs Smith expressed concern about the lack of privacy and dignity for in-patients who were attending out-patient clinics.

RESOLVED: That Mrs Oliver would liaise with Mrs Smith outside the meeting regarding this issue.

Mr Butler asked about the equipment policy and whether equipment was checked on a daily basis. Mr Kehoe responded that there was a process for checking equipment. Mrs Walthew commented that she had experienced two cancelled operations due to equipment failure.

RESOLVED: That Mrs Walthew would forward details about the cancellations to Mrs Oliver for investigation.

At this juncture, Mr Faulkner advised the Governors that the Medical Equipment Service (MES) was currently being reviewed and that a different approach to managing equipment in the hospital was being considered, which would involve using the services of a single contractor. It was anticipated that one provider would result in an improved service and it was noted that one of the key issues in the debate was the quality of the service, i.e. response times. Mr Kehoe stated that this would be a much better way of ensuring that equipment was replaced on a rolling programme. Mr Allcock pointed out that the “lean” philosophy was about having the right equipment in the right place at the right time.

With regard to the Corporate Objectives, it was suggested that they should be used as a key for the Governors about the work being undertaken by the Board. Mr Kehoe confirmed that 24/7 working was included but that a clear objective was needed about how this could be achieved, possibly by comparing outcomes from weekend admissions with outcomes from weekday admissions.

Mr Bamford pointed out that the benefits of the community services transfer were not included within the objectives. Mr Kehoe confirmed that this was included as part of the patient pathway work but that a specific indicator could be included.

RESOLVED: That a specific objective about the benefits of the community services transfer would be included within the corporate objectives.

Mr Bamford referred to an email he had forwarded in March in relation to assurance around the corporate objectives to which he had not received a response. The Chairman apologised to Mr Bamford for the fact that he had not received a response to his communication in March and confirmed that assurance for Council of Governors could be discussed.

Post Meeting Note: the email from John Bamford had not been received by Mrs Oliver, Mr Welch or Mrs Aubrey.

At this juncture, Mr Gandhi referred to patient discharges at night. Mrs Woodhouse stated that she was currently in discussion with the Hospital At Night Team about patient discharges and that, if patients asked to be discharged during the night and the clinicians agreed, this was arranged. Mrs Oliver reiterated Mrs Woodhouse’s comments and confirmed that there were a number of assessment areas within the Trust from which it was appropriate for patients to be discharged during the night. The Chairman stated that the Trust policy was for patients not to be discharged from the wards after 10.00 pm and asked that any specific cases of non-compliance should be reported.

RESOLVED: That Mrs Woodhouse would provide feedback to the Governors regarding the outcome of her discussions with the Hospital At Night Team.

Mr Allcock suggested that the policy be discussed at the Governors' Patient Experience Committee in order that any ambiguities could be addressed.

RESOLVED: That the policy regarding discharge of patients from hospital would be included on the agenda for the next meeting of the Governors' Patient Experience Committee.

29. Chief Executive's Report

Mr Kehoe presented the Chief Executive's Report which included the following items:-

- Monitor Update
- QuIPP Update
- Finance Performance
- TOPPs
- Collaboration with University Hospital of Morecambe Bay Foundation Trust
- Talk by Sir Stephen Moss
- Opening of the Surgical Centre
- Opening of the Women's and Children's Unit
- Research and Development
- Spiral Health Social Enterprise
- Blackpool LINK
- "Altogether Now" – 20 Week to the 2012 Olympics

Collaboration with University Hospital of Morecambe Bay Foundation Trust

Mr Gandhi referred to the proposal for collaboration with Morecambe Bay and stated that consultants were concerned about this initiative and that there were disadvantages, for example, transport costs, delays in reports. Mr Kehoe responded that there had been two years of discussions with the clinical teams and that the original proposal involved discussions with Preston and Lancaster about reconfiguration of services and that the clinical teams had produced a proposed model between Blackpool and Morecambe Bay. Mr Kehoe indicated that the proposal would provide better patient services in terms of turnaround and would be more cost effective; it being noted that the Trust would not be proceeding with this proposal unless improved quality of care and better value for money could be demonstrated. The Chairman commented that collaboration was the way forward. Mr Welch commented that robust benchmarking had been undertaken. Mr Kehoe commented that the drive for centralisation was about improved outcomes and that the proposal for a partnership agreement involved working together and demonstrating benefits for patients in terms of outcomes.

Research and Development
Spiral Health Social Enterprise

Governors asked if they could visit the Clinical Research Centre and the Nurse Led Unit.

RESOLVED: That the Governors would be invited to the official opening of the Clinical Research Centre in July.

That arrangements would be made for the Governors to visit the Nurse Led Unit.

Mrs Macdonald referred to collaboration with departments and asked for brief details.

RESOLVED: That brief details would be provided to the Governors in relation to collaboration with departments.

5. Quarterly Complaints and PALS Report

Mr Jebb presented the Complaints and PALS Report for the period 1st January to 31st March 2012.

Mr Bamford referred to a complaint about patient notes being in a pink folder and the patient assuming that this was because of a legal issue. Mrs Oliver confirmed that a pink folder indicated that the notes were temporary. With regard to medical records, it was noted that additional capacity was being made available in three weeks' time.

Mr Butler commented that he had been advised by patients that there had been no bedside folder available during their stay in hospital.

RESOLVED: That Mr Butler would provide details to Mrs Oliver in order that she could make enquiries on the relevant ward.

Mrs Walthew referred to the recurring theme of staff attitude and asked about lesson learnt to avoid reoccurrences. The Chairman referred to the work on-going around the Patient Experience Revolution which would be reported on under agenda item 6. Mr Jebb assured the Governors that action plans were produced and monitored via the Ulysses system. Mr Kehoe referred to the pilot work being undertaken on Ward 18 to ascertain whether the work undertaken with the staff would generate different levels of satisfaction and, subject to improvements being made, the pilot would be rolled out the other wards.

Mr Holden asked about the number of stages in the complaints process and Mr Jebb explained that there were two stages in relation to formal complaints, firstly, local resolution and, secondly, referral to the Ombudsman; it being noted that there were three stages with the Ombudsman's process.

Mrs Smith referred to a complaint detailed on page 6 of the report and commented that there was no indication of the age of the child and asked whether the Trust employed only one Registered Sick Children's Nurse. Mrs Oliver explained that there was more than one Registered Sick Children's Nurse and that there were other staff with expertise in this area. Mr Allcock asked whether there was a case for employing specialists in taking blood across the whole of the hospital services. Mrs Oliver confirmed that the Trust employed phlebotomists to treat adult patients and that it was not uncommon for children to be treated in an out-patient setting. It was noted that the staff needed to be undertaking this role regularly in order to maintain competence.

Dr Kennedy explained that there was a patient safety programme which included reference to clinical skills, i.e. taking blood, and confirmed that the Trust could participate in this programme whereby the students have to be competent before becoming an F1. Mr Kehoe suggested to Mr Allcock about visiting the Clinical Skills Lab. Dr Kennedy also advised of a programme in which Blackpool and Whiston Trusts were participating whereby unqualified doctors were given a cardiac arrest bleep for one month and had to attend the scene as required.

6. Patient Experience Revolution Update

Mr Jebb advised the Governors that the next stage of the Patient Experience Revolution Project involved training on the pilot ward (Ward 18) which was due to commence on the 28th May 2012 and would involve three training sessions over a six week period covering the following issues:-

- How to engage with patients.
- How staff regard someone as an individual.
- How to ensure values are communicated to patients.
- How to communicate with patients.
- How staff can ensure they are interested in the patients.
- How staff can help patients.

It was noted that specific processes would be reviewed, i.e. hand-over, discharge arrangements and visiting times.

Mr Jebb advised that, following the pilot on Ward 18, the return on investment over two months would be reviewed and, hopefully, the project would be rolled-out to early implementer wards and subsequently rolled-out across the Trust.

The Chairman commented that this was an interesting exercise in addressing issues that had arisen from complaints.

RESOLVED: That Mr Jebb would provide a further update at the next meeting of the Council of Governors.

At this juncture, Mr Fisher referred to a sub-committee of the CCG (Quality Engagement), which included discussion about patient experience, and commented that it would be helpful for a Trust representative to attend future meetings of the sub-committee to address GPs' questions.

RESOLVED: That arrangements would be made for a representative from the Trust to attend meetings of the Quality Engagement Sub-Committee.

7. Apologies for Absence

Apologies for absence were received as follows:-

Mr Peter Askew – Elected Governor (Wyre)
Miss Nicole Burke – Appointed Governor (Blackpool Youth Council)
Mr John Boughton – Appointed Governor (Blackpool Council)
Mr Mark Chapman – Elected Governor (Blackpool)
Mr John Longstaff – Elected Governor (Fylde)
Mr Paul Rigby – Appointed Governor (Lancashire County Council)
Mr Denys Smith-Hart – Appointed Governor (North and Western Lancashire Chamber of Commerce)

8. Minutes of the Previous Council of Governors Meeting

RESOLVED: That the minutes of the previous Council of Governors Meeting held on 13th February 2012 be agreed as a correct record and signed by the Chairman.

Proposed by Mrs Smith and seconded by Mr Gandhi.

9. Matters Arising

- i) Action List from the Council of Governors Meeting held on 13th February 2012

It was noted that the actions had either been addressed, had been included on the agenda for discussion later in the meeting or had been included on the business calendar for discussion at a future meeting.

10. Minutes of the Extraordinary Council of Governors Meeting

RESOLVED: That the minutes of the Extraordinary Council of Governors Meeting held on 13th February 2012 be agreed as a correct record and signed by the Chairman.

Proposed by Mrs Smith and seconded by Mr Gandhi.

11. Matters Arising

There were no matters arising.

12. Council of Governors Meetings – Action Tracking Document

The Action Tracking document was noted by the Governors.

13. Minutes of the Nominations Committee Meeting held on 9th May 2012

The minutes of the Nominations Committee meeting held on 9th May 2012 were noted by the Council of Governors.

14. Newly Appointed Chairman's Draft Objectives 2012/13

It was noted that the Chairman's draft objectives for 2012/13 had been discussed at the Nominations Committee Meeting held on the 9th May 2012; it being noted that a number of the objectives had been carried forward from the previous Chairman's objectives.

15. Chairman's and Non-Executive Directors Annual Remuneration

It was noted that the Nominations Committee had agreed a zero uplift in respect of the Chairman's and Non-Executive Directors' annual remuneration; it being acknowledged that it was important to recognise that a zero uplift was appropriate due to the economic climate.

16. Policy for Payment of Expenses to the Chairman and Non-Executive Directors

It was noted that the policy for "Payment of Expenses to the Chairman and Non-Executive Directors" had been discussed by the Nominations Committee and the proposal to increase the business mileage from 40 pence to 45 pence had been approved.

It was further noted that the Nominations Committee had also discussed other travel expenses and agreed that reimbursement for rail travel would be at standard class rate unless first class rate was cheaper.

RESOLVED: That the policy for the “Payment of Expenses to Governors” would be amended in line with the amendments made to the policy for the “Payment of Expenses to the Chairman and Non-Executive Directors”.

17. Retired Chairman’s Appraisal 2011/12

The evidence relating to the retired Chairman’s objectives for 2011/12 were provided for information.

18. Non-Executive Directors’ Appraisal (2011/12) and Objectives (2012/13)

The Chairman advised the Governors that the Non-Executive Directors’ appraisals had been carried out by the previous Chairman prior to her retirement at the end of March and that their draft objectives for 2012/13 had also be prepared which he was currently reviewing.

19. Elections for the Foundation Trust Governors Association

The Chairman referred to the correspondence from the FTGA inviting Trusts to nominate a Governor to stand for election to the FTGA Board.

RESOLVED: That Mrs Smith would be nominated to stand for election to the FTGA Board.

That Mrs Smith would complete the nomination form and return to Miss Oates in advance of the closing date for nominations of the 27th June 2012.

Proposed by Mr Allcock and seconded by Mr Bamford.

20. Annual Plan 2012/13

Mrs Oliver reminded Governors about the Governors’ sub-group meeting held on 13th March in relation to the Annual Plan and confirmed that the comments received from the Governors had been incorporated into the document.

Mrs Oliver advised that the Trust was also required to complete the Annual Plan template from Monitor which was slightly different from the 2011/12 version.

It was noted that the document was currently being finalised with the relevant teams for submission to Monitor by the 31st May 2012.

Mrs Oliver assured the Governors that the Annual Plan would be linked to the corporate objectives which would be reviewed by the Board on quarterly basis.

21. Annual Report and Accounts/Quality Accounts 2011/12

Mrs Aubrey advised the Governors about progress in respect of the Annual Report & Accounts and the Quality Accounts and stated that she would endeavour to include Mr Bamford’s comments in the document prior to the deadline of 23rd May 2012.

Mr Olive commented on the audit process which had commenced earlier than in previous years and had been subject to more exposure and more input. It was anticipated that a “clean” opinion would be given by PWC.

Mrs Aubrey stated that a summary report would be available for members of the public and she would be liaising with Blackpool LINKs and Lancashire LINKs regarding the content.

RESOLVED: That Governors would contact Mrs Aubrey if they wished to be involved in the production of the summary report.

23. Fylde Coast Public Consultation Document

An update was provided in respect of progress with the Fylde Coast Public Consultation Document as follows:-

- The independent gateway assessment about the robustness of the consultation had been completed.
- It was a statutory responsibility for the Commissioners to consult regarding the proposed changes in services.
- Mr Fisher had been involved in the process and he highlighted some of the issues from the review.
- The advice received was to appoint an independent person to complete the document within the timescale of the end of June.
- The document would be more succinct than previously discussed.
- There would be a separate communication exercise about the strategy.
- There had been several reiterations of the document but the gateway assessment was extremely important.

It was noted that operational day to day delivery on the Victoria Hospital site was not an issue for consultation, however, there were certain issues around site closures that needed to be in the public domain.

Mrs Swift commented that it was important to have had an independent review and to draw the strands together; it being noted that the purpose of the consultation was to describe the services to be provided.

24. Deloitte's Formal Feedback Report from the Governors Workshop held on 6th February 2012

25. Deloitte's Board Effectiveness Review (Second Phase): Trust Action Plan

26. Health and Social Care Act 2012

27. Governors Objectives 2012/13

The Chairman referred to items 24–27, all of which were linked; it being noted that the theme was the governance of the Trust and the role of the Governors.

The Chairman stated that the Governors' meetings needed to be really effective, dealing with the important themes and issues experienced by the Trust and contributing the individual skills of individual Governors in order to add value to the Trust.

The Chairman stated that he had found the Deloitte report extremely helpful, with positive suggestions for changes and improvements.

The Chairman advised the Governors that he had already requested the Executive Directors to review the whole strategy of the Trust, part of which was ensuring, for example, the provision of high quality patient care.

With regard to the Governors' objectives, the Chairman stated that he had received some worthwhile comments but pointed out that the objectives should not be considered in isolation of the "big picture". The Chairman suggested establishing a Working Group comprising those Governors who were interested in taking forward this debate, perhaps without him in attendance at the first meeting, and to produce an agenda to include discussion about the best use of Governors' time (i.e. number of meetings, number of agenda items) following which he would become involved. Mrs Smith commented that Governors had different skills and that perhaps three or four sub-groups could be established, tasked with providing more detailed reports to the Council of Governors.

With regard to the role of the Link Governor, Mrs Smith's view was that it was to liaise with Monitor and the Council of Governors, however, the view of Mike Fowkes (Lead Governor at Mid Staffordshire NHS Foundation Trust) was that the Lead Governor should have a good grasp of the finances. The Chairman suggested regular meetings with Mrs Smith in her capacity as the Link Governor and also meetings with other Governors as necessary. Mr Allcock stated that the Lead Governor did not need to have specific qualifications and pointed out that the only criteria was the ability to communicate effectively with Governors. Mr Fisher agreed that Governors did not need to have expertise in all areas and suggested that the Governors needed to be more strategic. The Chairman stated that he was confident that Governors could suggest a succinct way forward with regard to shorter agendas and particular areas of focus.

Mr Bamford commented that the remit of the Governors should be to ask the following questions:-

- Are we doing the right things, i.e. corporate objectives and strategy for next few years.
- Are we doing things right, i.e. complaints.
- Are we achieving the right results, i.e. performance.

Mr Bamford suggested producing improvement plans and providing reports focusing on these three areas.

The Chairman stated that the Board was also reviewing strategic issues and emphasised the importance of focusing on themes; it being noted that a conclusion needed to be reached by the time of the Annual Members' and Public Meeting.

Mr Winter commented that communication between the Board and the Governors was paramount and that it was important to consider how this could be achieved.

Mr Olive stated that the Governors needed to be outward facing and that this was an important part of their role.

The Chairman stated that membership needed to be included in future discussions.

RESOLVED: That the Chairman would email the Governors within the next week suggesting an agenda and timetable for moving forwards.

28. Annual Members' and Public Meeting

It was noted that the Annual Members' and Public Meeting had been scheduled for Monday 24th September 2012 at 6.00 pm at a venue yet to be decided.

With regard to the catering requirements, Mrs Smith suggested involvement of the Nutrition Mission.

RESOLVED: That Mrs Gaynor would make reference to the Nutrition Mission when booking the catering for the Annual Members' and Public Meeting.

30. TOPPs Update

Mr Welch provided an update as follows:-

- Mr Kehoe had attended many welcome events with staff from Community Services to introduce the Executive Directors and Non-Executive Directors and to obtain feedback from the staff about the transfer and future ways of working.
- One of the key decisions made at this point was around supporting the infrastructure for community services in the short term.
- The management structure would be revised to include a Community and Family Division.

The Chairman reported that there had been positive feedback from the welcome events he had attended and referred to one issue raised regarding the name of the Trust. The Chairman confirmed that this issue would be discussed by the Board and that he would involve the Governors in subsequent discussions.

RESOLVED: That the name of the Trust would be discussed by the Board and the Governors would be involved in subsequent discussions.

Mr Winter stated that, if asked by a member of the public, he would not be able to explain TOPPs and queried whether the Council of Governors understood sufficient about the message that should be given. The Chairman suggested that a one page briefing about TOPPs would be useful.

RESOLVED: That Mrs Swift would be asked to prepare a one page briefing for the Governors in respect of TOPPs and to include examples of patient pathways.

Mrs Oliver reported that the Executive Directors regularly discussed performance and had agreed patient quality and safety as a priority and would be introducing a campaign relating to patient discharges, similar to that previously established for infection prevention.

The Chairman stated that initial communication had been with staff and that it was now appropriate to communicate with the public. Mr Faulkner commented on the need to now be more "forward looking".

Mrs Rigg commented that the real challenge was in relation to the portfolio of services being different in different geographical locations.

At this juncture, Mrs Swift joined the meeting.

The Chairman summarised the discussion that had taken place prior to Mrs Swift's attendance at the meeting, which was that not everyone understood TOPPs and patient pathways and that good examples of the benefits needed to be highlighted.

Mrs Swift reported that the biggest task had been to transfer 1800 staff and to communicate with the staff about the workings of the new organisation but that the focus now needed to change; it being noted that the next biggest task was the transformation agenda which included the establishment of a Community and Family Division under the remit of Mrs Swift. It was noted that the revised structure would be issued for consultation with staff within the next ten days.

Mrs Swift further reported that the other main task was the transformation strategy for the Trust and explained that she was meeting staff in groups across the patch to obtain their views about how they envisaged the service in five years' time, i.e. development of community services, 24/7 working.

Mrs Swift referred to the two Clinical Commissioning Groups, one for Blackpool and one for Fylde/Wyre and explained that she now had agreement that their focus would be on non-hospital care and that this would form the basis of each of the organisation's individual strategy.

RESOLVED: That consideration would be given to either arranging a Governors' Sub-Group or a presentation by Mrs Swift at the next Council of Governors Meeting.

31. Quarterly Finance Report

The quarterly finance report for the period 1st January to 31st March 2012 was provided for information.

32. Quarterly Performance Report

The quarterly performance report for the period 1st January to 31st March 2012 was provided for information.

34. Membership Report

35. Items Referred from the Membership Committee Meeting

Mrs Smith provided an update in respect of membership as follows:-

- The plastic holders for posters and membership forms had now been received and would be displayed on the hospital sites.
- There had been a slight decrease in membership and therefore new members needed to be recruited.

Mrs Smith requested all Governors, not just those Governors on the Membership Committee, to recruit members. Mrs Smith further requested suggestions from Governors about appropriate forums for recruiting members.

RESOLVED: That Governors would provide feedback to Mrs Smith regarding appropriate forums for recruiting members.

Mr Olive asked whether the Trust should have more members due to TOPPs. It was noted that this issue would be addressed as part of the imminent review of the Membership Strategy.

RESOLVED: That the issue about additional members as a result of TOPPs would be addressed as part of the review of the Membership Strategy.

36. FTGA Feedback

There was no feedback in relation to the FTGA.

37. Vision Programme Update

The Vision Programme Update was provided for information.

38. Clinical Audit Update

The Clinical Audit Update was provided for information.

39. Membership Strategy

It was noted that this item had been deferred to the next meeting of the Council of Governors in August 2012.

40. Feedback from Governors Attendance at Board Meetings in February/March/April 2012

Feedback from Governors' attendance at Board Meetings was noted as follows:-

- The meeting was interesting and there was significant challenge from the Non-Executive Directors, particularly in relation to finance.
- The pro-forma was completed summarising some of the issues but it was felt that all issues were worthy of highlighting, which was obviously not appropriate.
- The possibility of more Governors attending Board Meetings should be considered.

The Chairman thanked the Governors for their feedback and commented that the issue of Public Board Meetings was to be discussed by the Board at the end of the month.

41. Feedback from the Formal Patient Safety Walkabouts in February/March/April/May 2012

Feedback from the formal patient safety walkabouts was noted as follows:-

- The issue of discharge was discussed and information obtained from the staff.
- There had been conversation around the management of the ward and the care of the patients.
- There had been an opportunity to talk to some patients but discussion had taken place mainly with staff.
- The patients praised most of the staff on the ward and appreciated their efforts.
- It was evident that staff were overworked.
- It was disappointing that some of the ward staff were not available and were unaware about the focus of the patient safety walkabouts.
- The ward was measured against a set of indicators and there had been a positive outcome from patients and staff.

With regard to the point made about staff not being aware of the focus of the patient safety walkabouts, it was noted that Mrs Thompson was addressing this issue.

42. Feedback from FTGA National Development Day held on 14th March 2012

Feedback from the FTGA National Development Day was noted as follows:-

- Sir Stephen Moss and Mike Fowkes from Mid Staffordshire Trust had given a talk about their experiences at Mid Staffordshire and had made reference in particular to organisational change, the Health and Social Care Act and high mortality due to coding. Their comments in terms of moving forward related to Board meetings being open to the public, an excellent relationship between the Chairman and Lead Governor and Trusts not being complacent.

It was noted that Mr Bamford had subsequently initiated arrangements for Sir Stephen Moss and Mike Fowkes to visit the Trust to give a similar talk to staff and that this had taken place on the 17th May 2012.

At this juncture, Mr Bamford referred to the Nurses Day held on the 18th May and pointed out that the care and compassion that was evident from amongst the staff was astounding.

43. Items to be Reported to the Board of Directors

RESOLVED: That the following item would be reported to the Board:-

- **Payment of Expenses to Governors.**

44. Items to be Recommend for Decision or Discussion by Trust Committees

There were no items to be recommended for decision or discussion by Trust committees.

45. Chairman's Communications

The Chairman highlighted some of the events/meetings he had recently attended as follows:-

- TOPPs Welcome Events.
- Cumbria & Lancashire Research Network – Best Practice Event.
- Jackie Hayden – Dean at the North West Deanery.
- FTN Dinner.
- Talk by Sir Stephen Moss and Mike Fowkes.
- Nurses Day.

46. Annual Work Plan

The Annual Work Plan was provided for information. The Chairman commented that this document would be regularly reviewed.

47. Attendance Monitoring

The attendance monitoring form was provided for information.

48. Motions or Questions on Notice

i) Car Parking Scheme

At this juncture, Mrs Smith asked about progress with regard to the car parking scheme. Mr Welch responded that the criterion was that the scheme must not impact negatively on finances or recruitment. It was noted that the Trust was currently awaiting confirmation from the Foundation Trust Financing Facility that funding was available for this scheme; it being noted that the intention was for the scheme to be completed before the end of 2013. Mr Welch assured the Governors that funding would not be removed from patient care to fund this scheme.

ii) Winter Planning

The following question had been submitted by Mr Bamford, Elected Governor for Wyre:-

“We plan for increased patient flow in the winter. What planning do we do to allow for the variability in demand throughout the year?”

Mrs Oliver responded that a plan had been produced forecasting the bed capacity and demand until 31st March 2013 and including assumptions and that the plan would be submitted to the Executive Directors Meeting for approval and, subsequently, to the Commissioners.

It was noted that assurance was needed around the fact that any beds opened would need to be staffed and therefore recruitment processes would need to commence imminently. Mrs Oliver stated that the key challenge would be to ensure that the growth numbers were right. It was noted that it was planned to refresh the bed predictor tool which had been used for many years.

49. Urgent Motions or Questions

There were no urgent motions or questions.

50. Declaration of Confidentiality

RESOLVED: That item 33 be declared confidential under the Freedom of Information Act.

51. Date of Next Meeting

The next meeting will take place on Monday 13th August 2012 at 9.30 am in Room 4, Education Centre, Blackpool Victoria Hospital.

The Chairman commented that he appreciated the contribution the Governors made to the Trust and hoped that they would be willing to move forward as suggested earlier in the meeting.