


ANNUAL MEMBERS MEETING

Minutes of the Annual Members Meeting held on 24th September 2010 at 12pm

Postgraduate Centre, Warrington Hospital

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| | <p>Welcome Allan Massey, Chairman</p> <p>1 The Chairman, Allan Massey welcomed all Governors', Staff, Non-Executive Directors and members of the public to the Annual General / Members meeting of the Trust.</p> <p>2 The Chairman explained that the purpose of the Annual members meeting was to present a report to members on the progress made in the year, to present the annual accounts and to provide details on how the Trust would take steps to achieve a representative membership. The Chairman explained that there were a number of elements which he was required to report and explained;</p> <p style="text-align: center;">Changes during the year to the Non Executive Directors</p> <p>3 During 2009-2010; Maureen Banner came to the end of her tenure as Non Executive Director on the 30th of November 2009, we were pleased to welcome Lynne Lobley to the team on the 1st of December 2009 who replaced Maureen as Non Executive Director</p> <p style="text-align: center;">Changes during the year to the Governors Council</p> <p>4 The position for the Governor in Poplars and Hulme, Orford was filled by Donald Millar on 24th August 2009.</p> <p>5 David Trowbridge joined us in Public Area 3: North South, Halton Brook, Halton Lea, uncontested from 21st December 2009</p> <p>6 Public Area 13: Birchwood, Rixton and Woolston Constituency - Julia Ellis, was appointed on 3rd of February 2010</p> <p>7 Despite a number of attempts to fill the vacancy in Public Area 1: Daresbury, Windmill Hill, Norton North, Castlefields; this remains unfilled</p> <p>8 The Chairman explained that the Trust has a significant number of elections coming up in the coming months and these will be described by the Governors in their presentation.</p> <p>9 No changes to the constitution of the Governors Council or Non Executive Directors are proposed.</p> | <div style="text-align: center;">  Warrington AMM presentations final 2C </div> |
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| 10 | As Chairman of both the Governors Council Nomination and Remuneration Committee and the Trust Board Remuneration Committee I am under a duty to report on the activities of these Committees to the Annual Members meeting. |
| 11 | Board Remuneration Committee |
| 12 | The Board Remuneration Committee meets annually, or as required to make decisions regarding remuneration and conditions of service for executive directors including our Chief Executive. |
| 13 | Agreements for these staff reflect the provisions of national arrangements. Pay arrangements are also determined for senior managers and staff not covered by national pay review bodies. |
| 14 | The Remuneration Committee has general oversight of the Trust's pay policies, but only determines the reward package for directors and staff not covered by Agenda for Change. The vast majority of staff remuneration to include the first layer of management below board level is covered by the NHS Agenda for Change pay structure. Remuneration and conditions of service include provisions for other benefits as well as arrangements for termination of employment. It considers all in gratia payments and redundancy payments over £50k. There are no special termination arrangements for senior managers, and no such awards have been made to past senior managers this year. |
| 15 | The Trust does not apply performance conditions linked to remuneration. Executive directors participate in annual performance development reviews and appraisals. Individual objectives are linked to the corporate objectives. |
| 16 | There have been no changes to Executive Directors' pay in 2009-2010. |
| 17 | The Committee comprises the Trust's: <ul style="list-style-type: none"> • Chairman • Chief Executive (except for matters concerning their employment and conditions) • All non Executive directors. During the 2009-2010 the Committee met twice on 29th April 2009 (apologies received from Catherine Beardshaw, Chief Executive) and on 24th February 2010 (apologies received from Rory Adam, Non Executive Director). |
| 18 | The Trust Board Remuneration Committee will review its role in succession planning of Executive Directors in 2010-2011 in line with the NHS Foundation Trust Code of Governance. |
| 19 | The Governors' Council Nomination and Remuneration Committee |
| 20 | The Governors' Council Nomination and Remuneration Committee meets annually or as required to recommend to the Governors' Council the nomination of appropriate candidates to the posts of Non Executive Directors, including the Chair and Deputy Chair. The |

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| | committee also has responsibility for making recommendations to the Governor's Council as to the remuneration and allowances, and other terms and conditions, of office of Non Executive Directors. | |
| 21 | <p>The committee comprises the Trust's:</p> <ul style="list-style-type: none"> • Chair (or Deputy Chair when the appointment of the Chair or his or her remuneration and allowances/other terms and conditions of office are being discussed) • One Partner Governor (Colin Daniels) • One Staff Governor (Janice Fazackerley) • Two Public Governors (Doreen Shotton and David Knowles). <p>During 2009-2010, the committee met six times.</p> | |
| 22 | <p>During 2009-2010, the Committee worked significantly on the appointment of the Lynne Loble into the Non Executive Director position. The Governors' Council Nomination and Remuneration Committee was responsible for agreeing the basis on which candidates were assessed, initial assessment and shortlisting of candidates, conducting the interviews and providing a recommendation to the Governors Council for ratification of the preferred candidate.</p> | |
| 23 | <p>The committee also worked to develop an appraisal process for myself with the Senior Independent Director, Carol Withenshaw.</p> | |
| 24 | <p>The Chairman thanked all staff for their very hard work over the 2008/09 period and explained that through the dedication and commitment from staff which had resulted in better patient care and experience.</p> | |
| 25 | <p>The Chairman also thanked all volunteers at the Trust who assist in various activities to include fundraising, directing patient enquiries and walking around the wards. The Chairman explained that the work of volunteers was significant and appreciated.</p> | |
| 26 | <p>The Chairman explained that copies of all the presentations would be made available on the Trust website.</p> | |
| | <p>Chief Executives Report – Review of the Year Catherine Beardshaw, Chief Executive</p> | |
| 27 | <p>The Chief Executive provided a presentation to the meeting which highlighted the headlines of the year, the Trust vision and details of the information contained within the Trust Quality Accounts.</p> | |
| 28 | <p>The presentation also thanked staff for their assistance and commitment during the year and progress on the Foundation Trust 18 months since authorisation.</p> | |
| 29 | <p>The Chief Executive also provided details of how the Trust objectives are in line with the new NHS white paper 'liberating the NHS'.</p> | |
| 30 | <p>The Chief Executive explained that the presentation will be available on the Trust website.</p> | |
| | <p>Financial Review</p> | |

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| | <p>Jonathan Stephens, Director of Finance / Deputy Chief Executive</p> | |
| 31 | The Director of Finance explained that the accounts do not include the Trust Charitable Funds as these are reported to the Charity Commission. | |
| 32 | The Director of Finance presented the headlines from the accounts including the income and expenditure and surplus over the period. | |
| 33 | The Director of Finance also presented details of how the Trust had performed against plan and that the Trust had achieved a year end financial risk rating of 4. The Director of Finance explained how the Trust would use the surplus generated and the capital investment made during the 2009/10 period. | |
| 34 | The Director of Finance explained that the Trust had considered and developed financial plans for 2010/11 which included delivering a recurrent cost saving of £11million, creating an income and expenditure surplus of £0.6million, capital investment of £2million and achieving a risk rating of 3. | |
| 35 | The Director of Finance explained that the presentation will be available on the Trust website. | |
| | <p>Auditors Report Ged Small, Audit Commission</p> | |
| 36 | Ged Small, Audit Commission explained that the Audit Commission were the Trust Auditors during the period and that had audited the accounts for the period. | |
| 37 | Ged Small, Audit Commission explained that the Audit Commission had provided an update to the Board and Governors on the steps taken to audit the accounts and provided assurance on the process undertaken. The report explained the context of the audit and the findings of the audit. | |
| 38 | Ged Small, Audit Commission explained that as part of the audit, no material errors had been identified above the threshold of materiality and there were no indicators to suggest that the Trust was not providing value for money. | |
| 39 | Ged Small, Audit Commission explained that there had been a requirement during this period to provide quality accounts. The Audit Commission would be providing a dry run external assurance which would be reviewed by the Board and Governors in due course. | |
| 40 | Ged Small, Audit Commission explained that the presentation will be available on the Trust website. | |
| | <p>How Foundation Trusts work Chris Kenyon, Public Governor</p> | |
| 41 | Chris Kenyon, Public Governor provided a presentation which detailed how Foundation Trusts work and how public accountability is demonstrated through the structure. | |

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| 42 | The presentation also detailed the role and duties of the Governors and explained how the Trust is run. | |
| 43 | Chris Kenyon, Public Governor explained that the presentation will be available on the Trust website. | |
| | Active Community Engagement Peter Cotton, Public Governor | |
| 44 | Peter Cotton, Public Governor provided a presentation which detailed progress against the original Membership strategy, how the Governors had reviewed the Membership strategy and detailed some of the actions which would be taken to fulfil the new Membership strategy. | |
| 45 | The presentation also detailed the Governor elections which would be undertaken during Autumn 2010 and the Constituencies which would have elections. | |
| 46 | Peter Cotton, Public Governor explained that the presentation will be available on the Trust website. | |
| 47 | Peter Cotton, Public Governor also explained that the new Membership Strategy would be available on the Trust website. | |
| | Questions | |
| 48 | The Annual Members meetings gave the chance for questions from the floor, directed to the hospital executives and the Governors who were present. The main questions that were asked at the meeting and the responses were as follows; | |
| 49 | Q. How will the new NHS White Paper affect the hospitals, particularly working with GPs (who will be directly planning and buying services from the hospitals) in new ways? A. The changes to commissioning of NHS services are a major part of the new White Paper for the NHS under the new Government. With Primary Care Trusts being abolished it means that GPs are being asked to take an extended role in managing the local health budget and 'buying' the hospital services that local people need direct from us. We're not sure yet exactly how these changes will work in practice as the detail is being consulted on, but we are looking at much more direct communication with the GPs to establish good working arrangements. The GPs are likely to create commissioning consortia to work together as groups with us – with one consortium for Warrington GPs and likely at least two consortia for the Halton and St Helens' areas. | |
| 50 | Q. How can you ensure that food for patients remains hot and ready to eat following its journey from the kitchens to the wards? A. This is something that we monitor very closely. Our catering managers measure the temperature on arrival on the wards and the food is transported in temperature controlled containers, quickly moved to the wards with the help of our electric vehicles. | |

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| | <p>Temperature probes are used to make sure food is piping hot. Janet Walker, one of the public governors, added that she and some other Governors had taken part in a catering visit recently. They saw the food being made in the kitchens and followed it through to delivery on the wards. Janet tried the food herself and she can testify that it was piping hot when it got there.</p> | |
| 51 | <p>Q. On the subject of food, how do you ensure that patients with dietary requirements get the right meal? And how does the trust make sure patients get fed properly?</p> <p>A. As soon as a patient comes on to the ward with special dietary requirements, the staff alert the kitchens. This can be to ensure a meal meets their medical (diabetic for example) or cultural (Halal for example) needs. If there is any delay in receiving the notification the catering team are usually really good at making arrangements to get something to patients quickly. We have a colour coded tray system to help ensure that special dietary meals reach the right patient. We are also using a system called protected mealtimes on some of our wards which basically ensures that other tasks on the ward (ward rounds and routine observations for example) don't take place over mealtimes and that patients and staff can concentrate on food.</p> | |
| 52 | <p>Q. In the annual accounts, the figures on clinical negligence have risen from £2 million in 2008-2009 to £3.5 million for 2009-2010. Is it due to more out of court settlements?</p> <p>A. The figures in the report aren't costs paid out directly as a result of clinical negligence. Like all NHS trusts, we make an annual payment to the NHS Litigation Authority towards the clinical negligence schemes for trusts (CNST). This is like an insurance scheme to cover the NHS against costs of any cases. The figure we contribute has risen this year in line with national figures. The previous year's figure also included a rebate on previous payments of some £500,000 so looked smaller than it typically is.</p> | |
| 53 | <p>Q. In the annual report you say you've paid off the trust's historic debts. What about the debts of £20 million for the NHS that have been in the local press recently?</p> <p>A. The figures in the press relate to NHS Warrington, the primary care trust for Warrington rather than the hospitals. NHS Warrington is a separate organisation and manages its finances separately.</p> | |
| 54 | <p>Q. What happened to feedback from the governor constituencies meetings that have taken place?</p> <p>A. Four of our governors held constituency meetings in the Spring. The information and views at the meeting have directly fed in to the Governors committees. We are looking at establishing other Governor drop in surgeries and forums and events next year and a key part of that is to make sure we pass back any feedback that is received so it is an area we are working on.</p> | |
| 55 | <p>Q. The annual report shows the attendance of Governors at the main Governors' Council meeting, and some Governor's have not attended all or many of the meetings. Surely the meeting should be compulsory for all Governors?</p> <p>A. We do publish attendance at the Governors' Council in the annual report as it is one of the requirements of our annual reporting. In the</p> | |

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| | <p>last year we have extended the number of formal Governors' Council meeting to six a year (from four) to get more work done and better involve our Governors. Usually there are good reasons why a Governor can't attend and they let us know in advance. We do monitor attendance though. However, it's important to note that the Governors' Council is just one of many meetings that the Governors attend. There are also five committees in place that are led by Governors and they meet regularly. In addition to this there are regular strategy meetings and other work that the Governors carry out so just looking at the formal meetings doesn't give a full picture of their time commitment and work that the Governors' have given over the year. We're considering adding this info to next year's annual report.</p> | |
| 56 | <p>Q. What links does the trust have with local hospices to ensure good care for patients? A. We have very close relationships and work closely with St Rocco's, Halton Haven and other hospices to coordinate palliative care services. One of the doctors at St Rocco's presented to our doctors recently to ensure they are up to date with their services.</p> | |
| 57 | <p>Q. Do we have a mental health liaison team based in A&E? A. Yes. This is a really important service to make sure that people with mental health problems can get the support they need and we're working to ensure that this serviced is strengthened and maintained in the future.</p> | |
| 58 | <p>It was agreed that a summary of the questions asked and the responses provided would be printed in the</p> | |
| | <p>Any Other Business</p> | |
| 59 | <p>There being no further business, the meeting closed.</p> | |

Attendance List

Held within Membership Office

The agenda and minutes of this meeting may be made available to public and persons outside of Warrington and Halton Hospitals NHS Foundation Trust as part of the Trust's compliance with the Freedom of Information Act 2000.