

Annual General Meeting Annual Members' Meeting

Monday 31 July 2017

18:30 – 20:30

The Meridian Hall
East Court
College Lane
East Grinstead
West Sussex
RH19 3LT



Annual General Meeting and Annual Members' Meeting 2017

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Agenda		
Item	Time	Mode
Welcome and introductions		
Welcome, apologies, declarations of interest and introductory comments <i>Beryl Hobson, Chair</i>	18:30	-
Standing items		
Draft minutes of the meeting held on 25 July 2016 (for approval) <i>Beryl Hobson, Chair</i>	18:35	paper
Annual report and accounts		
Annual report and accounts 2016/17 <i>The Trust's 2016/17 annual report, quality accounts and financial accounts is published to our website</i> http://www.qvh.nhs.uk/wp-content/uploads/2017/06/Annual-Report-Quality-Report-and-Accounts-2016-17.pdf <i>Steven Jenkin, Chief Executive</i>	18:40	presentation
Summary of the 2016/17 audit findings <i>Neil Hewitson, Director, KPMG</i> <i>Charlotte Goodrich, Manager KPMG</i>	18:55	presentation
Clinical presentations		
Head and neck reconstruction <i>Brian Bisase, Consultant Oral and Maxillofacial surgeon</i>	19:10	presentation
Prosthetics <i>Mark Cutler, Consultant Maxillofacial Prosthetist</i>	19:50	presentation
Questions from the public		
<i>Beryl Hobson, Chair</i>	20.25	-

Document:	Minutes (draft & unconfirmed)	
Meeting:	Council of Governors (session in public) 25 July 2016, 15:00 – 17:00, The Meridian Hall, East Court, College Lane, East Grinstead RH19 3LT	
Present:	Beryl Hobson (BH)	Chair
	Brian Beesley (BB)	Public governor
	Wendy Burkhill-Prior (WB-P)	Public governor
	Jenny Cunnington (JC)	Public governor
	John Dabell (JD)	Public governor
	Robert Dudgeon (RD)	Public governor
	Angela Glynn (AG)	Public governor
	Brian Goode (BG)	Public governor
	Chris Halloway (CH)	Public governor
	John Harold (JH)	Public governor
	Anne Higgins (AH)	Public governor
	Gillian Santi (GS)	Public governor
	Michael Shaw (MS)	Public governor
	Peter Shore (PS)	Public governor
	Peter Wickenden (PW)	Public governor
	Norman Webster (NW)	Stakeholder governor
Mansoor Rashid (MR)	Staff governor	
In attendance	Ginny Colwell (GC)	Non-executive director
	Ian Playford (IP)	Non-executive director
	Lester Porter (LP)	Senior Independent director
	John Thornton (JT)	Non-executive director
	Steve Fenlon (SF)	Medical director
	Sharon Jones (SJ)	Operations director
	Jo Thomas (JMT)	Director of Nursing
	Richard Tyler (RT)	Chief Executive
	Clare Pirie (CP)	Head of Corporate Affairs
	Neil Hewitson (NH)	Director, KPMG
	Charlotte Goodrich (CG)	Manager, KPMG
	Apologies:	Hilary Saunders (HS)
Liz Bennett (LB)		Stakeholder governor
Chris Orman (CO)		Vice Chair and public governor
Glynn Roche (GR)		Public governor
Shona Smith (SS)		Staff governor
Julie Mockford (JM)		Staff governor
Andrew Robertson (AR)		Stakeholder governor
Tony Martin (TM)		Public governor

Welcome

The Chair opened the meeting and welcomed NH and CG from the Trust's external auditors KPMG, who were attending to provide a summary on 2015/16 audit findings.

Apologies were noted as above.

There were no new declarations of interest.

Standing items

Draft minutes of the meeting held on 8 October 2015

The draft minutes of the meeting held on 8 October 2015 were **APPROVED** as a correct record. There were no matters arising.

Annual report and accounts

Annual report and accounts 2015/16

RT presented the annual report and accounts for 2015/16, noting that the Trust had continued to deliver a strong operational and financial performance in the midst of a very challenging external environment. The Trust had achieved quality and financial targets, received excellent feedback from patients and staff and been awarded an overall rating of 'good' (highlighting areas of 'outstanding' care) by the Care Quality Commission, following its recent inspection.

RT explained that 2015/16 had been a transitional year as the Trust finalised new operational structures and completed appointments to the executive team. He expressed confidence that the Trust now had the right leadership team to meet future challenges.

JMT and SF had developed the Quality Account this year into a more informative, easy-read which emphasised the underlying principle that continually striving to deliver excellence was the most effective way of ensuring that QVH continued to thrive.

CS reported that the Trust had made a surplus of £1.45m despite the challenges of industrial action and unanticipated changes in income delivery and business rates. Although the capital programme had got off to a slow start the IIP project (IT infrastructure) had been delivered on time and within budget. The Cost Improvement Programme (CIP) had not been delivered as planned, but huge strides had been made over the last year to improve the planning and monitoring processes, and CS was confident of achieving success in 2017/18. She closed by warning that the year ahead would not be without its difficulties but promised the Trust would continue to respond to unforeseen challenges.

PS asked how much the recent junior doctor industrial action had cost the organisation. CS agreed to find out and report back. This response would be communicated to all governors via the Governor Log.

There were no further questions and Council **RECEIVED** the Trust's 2015/16 annual report and accounts.

Summary of 2015/16 audit findings

As part of its responsibilities, NH explained that KPMG was required to provide an external opinion on the 2015/16 annual report and accounts. The three key responsibilities in this respect were:

- Financial statements: Ensuring that monies the Trust claimed it had received, spent or was owed were correctly recorded. KPMG would also ascertain that management judgements were appropriate.
- Use of resources: Reviewing how the Board works and what the Trust's main regulators, NHS Improvement and the Care Quality Commission, had said about it.
- Quality report: Ensuring the Trust had included everything it should do within the report and presented both good performance and areas for development.

An unqualified (clean) opinion had been issued on the financial statements. CG highlighted in

particular that:

- The finance team had responded positively to queries from the audit team and produced a good first draft of accounts when due;
- The remuneration report was presented on time with all disclosures included in the first draft.
- The long form audit report, introduced last year, was designed to mitigate risks. It focused on four key areas, including recognition of NHS income, valuation of land and buildings, mandatory risks and mandatory override of controls.
- An unqualified (clean) Use of Resources conclusion had been issued for 2015/16.

Consideration had given to the following areas of the Quality Account:

- Content and consistency: a clean limited assurance opinion had been issued in respect of this;
- National indicators:
 - Qualified limited assurance opinions had been issued in respect of the 18-week referral to treatment indicator and the 62-day cancer waits. However, CG emphasised that concerns related to system design and data accuracy, not patient care. She went on to explain that audit has to provide an opinion over a full 12 month period, and whilst significant improvement had been made, the Trust was likely to experience a similar issue next year due to time lags.

No opinion had been issued in respect of the governor selected indicator (number of patients leaving MIU before treatment) as this was not mandatory. However, if it had been required, CG reported that KPMG would have issued a limited assurance opinion.

The Chair thanked NH and CG for providing such a comprehensive update, the contents of which were **NOTED** by Council.

Matters required by the Trust's constitution

Membership strategy

As required by the Constitution, a report had been prepared setting out progress of, and changes to, the membership strategy over the last year. The purpose of the report was to provide assurance that membership was representative of the Trust's constituency. Council was reminded that the three aims of the strategy were:

- To engage with existing members in ways which are meaningful and interactive;
- To promote the benefits of membership to all QVH patients and to recruit new members who were representative of the communities the Trust serves, and
To encourage as many existing and prospective members as possible to provide their email address and give permission for the Trust and the Council of governors to communicate with them electronically.

HS summarised the report and asked the meeting to note in particular the following:

- The Trust had made excellent progress this year in increasing the number of members with email addresses. This figure was now at 44%, an increase of around 14% over the last year;
- A recent amendment had been made to the Constitution which now included the electoral wards of specified south London boroughs allowing for the expansion of QVH's public constituency;
- That the figure of c.7600 public members was a good figure for a Trust the size of Queen Victoria Hospital.

MS asked about membership figures which were c.12,000 in 2004 when QVH became a Foundation Trust and are now c.7600. HS reported that most FTs had seen a reduction in numbers from point of becoming an FT and reiterated that QVH has a good number of members relative to size of Trust. She also explained that some of the recent reductions at QVH had resulted from proactive list cleaning as part of process of getting email addresses, and we now have a more engaged membership.

Michael Shaw commented that he was pleased to note the level of members' email addresses now held and the benefits for effective communication as well saving considerable print and mailing costs.

The Chair thanked HS for her update, the contents of which were **NOTED** by Council.

Changes to the QVH constitution during 2015/16

HS explained the QVH constitution requires that where an amendment is made in relation to the powers or duties of Council, at least one member of the Council must attend the next AMM to present the amendment to the members. In addition, the trust must allow members to vote on whether they approve the amendment.

Only one amendment had been made to the constitution in the last year, but did not relate to the powers or duties of Council. At its meeting on 21 April 2016, the Council of Governors agreed an amendment to the Constitution setting out the electoral wards of specified south London boroughs to allow for the expansion of QVH's public constituency.

HS confirmed that no other relevant amendments had been made to the constitution since the last AGM/AMM on 8 October 2015.

After due consideration, Council **AGREED** that these amendments did not require presentation to members or a membership vote for approval and, therefore, would continue to have effect.

Questions from the public

There were no further questions. However, thanks was expressed to the management team for the clear and concise reporting.

The Chair reminded the meeting that 2015/16 had been a busy year with many significant challenges, and was grateful to RT and the executive team for everything they had achieved for the Trust. She went on to assure members that QVH would continue to strive for excellence and would not rest on its laurels.

The meeting closed at 17.45pm

Chair:..... Date:.....