

Yeovil Hospital Engagement Event and Annual General Meeting (AGM)

Wednesday 27th September 2017 at 17.30 – 20.00
(light refreshments will be available)

Marsh Jackson Room, Academy, Level 4, Yeovil District Hospital, BA21 4AT

About the Event

This event is an opportunity to hear about the exciting developments at the hospital, as well as the changes taking place, and the work that is being done to improve patient care and experience. It will also be a forum for attendees to provide feedback to help us improve our services.

Talks and Stands

We have a range of talks and stands covering:

- new multi-storey car park and estates projects
- stroke services
- dementia services
- organ donation
- clinical research
- TrakCare (electronic health record system)
- Symphony Healthcare Services Limited
- health checks
- hospital chaplaincy
- patient experience and volunteering
- membership and governors
- YDH Charity
- League of Friends

Time of Talk	Topic
18.00 – 18:05	Welcome from the Chairman & Chief Executive
18.05 – 18:20	Patient Services
18.30 – 18:45	Symphony Healthcare Services
19:00 – 20:00	AGM

Annual General Meeting (AGM)

1	Welcome from the Chairman and to Approve the Minutes of the AGM held on 8 September 2016	Verbal and Appendix 1
2	Overview of the Year - Chief Executive (to include financial performance, key developments and Lead Governor Report)	Presentation
3	To Receive the Annual Report, Quality Report and Accounts 2016/17: http://www.yeovilhospital.co.uk/about-us/corporate-information/ (under “publications”)	
4	To Approve Changes to the Constitution	Appendix 2
5	Any Other Business and Questions from the Public	Verbal



ANNUAL GENERAL MEETING

Minutes of the AGM held on
Tuesday 8 September 2016 at Yeovil District Hospital

Attendance: The meeting was attended by members of the Board of Directors, the Council of Governors, hospital members, the public and Trust staff.

No	
1	<p>WELCOME FROM THE CHAIRMAN</p> <p>1.1 The Chairman, Paul von der Heyde, welcomed everyone to the Annual General Meeting (AGM). He made some introductory remarks and said that it had been a busy, yet productive and successful year for the Trust. He thanked staff, as well as volunteers, governors and members for their ongoing support.</p>
2	<p>MINUTES OF THE PREVIOUS MEETING</p> <p>2.1 The minutes of the meeting held on 30 September 2015 were approved as a true and correct record, copies of which are available on the Trust's website at: http://www.yeovilhospital.co.uk/about-us/corporate-information/</p>
3	<p>OVERVIEW OF THE YEAR</p> <p>3.1 Paul Mears, Chief Executive, presented an overview of 2015/16, highlighting progress with the Trust's strategic ambition to be in the UK leader in developing new models of integrated care. He spoke of key developments in-year, including:</p> <ul style="list-style-type: none"> • Building a new 24-bedded modular ward. • Commissioning rehabilitation beds at Cookson's Court Nursing Home. • Opening of the new dementia garden. • Ongoing development of the multi-storey car park. • Progress towards implementation of the TrakCare (phase 1 of the Trust's new electronic health record). <p>3.2 Paul Mears spoke of the in-year operational demand, exacerbated by pressures within social care and the community which impacted on the Trust's ability to discharge patients in a timely way. He explained that the challenges contributed not only to the Trust's ongoing financial deficit, but also difficulty in meeting key performance measures, namely the 18 weeks referral to treatment (RTT) time (in aggregate across incomplete pathways), some diagnostic standards and four hours to be seen in A&E, the targets for which were not met over the year. Paul Mears commented on the hard work of staff across the Trust who continued to deliver high quality, safe patient care despite such operational challenges. He added that YDH continues to receive good feedback from patients and perform well against standards of quality; there were no cases of MRSA in 2015/16 and HSMR and SHMI mortality rates have remained constant and within expected limits. He acknowledged that YDH did not meet a reduced tolerance in-year of no more than 8 cases of C.Diff, but said that only 4 were identified as being due to lapses in hospital care.</p> <p>3.3 In terms of financial performance, he said that at year-end, YDH met an £18.2m deficit, which was £0.2m favourable to plan (excluding impairments and revaluations). As at 31 March 2016, he said that YDH had £4.7m in the bank and had spent £10.4m on capital projects. The majority of the Trust's expenditure was on paying its staff. Paul Mears explained that YDH has a clear strategic plan for returning to financial sustainability through the development with local GPs of new models of integrated care (expenditure for which was £4.9m in 2015/16) and through ongoing dialogue with partners across health and social care as part of the sustainability and transformation plan (STP).</p>

3.4	<p>Paul Mears explained that a key area of focus last year was the Trust’s planned inspection by the CQC in March 2016, the report from which was published in the summer. He said that the report sets out the inspectors’ findings for each of the eight core services: urgent and emergency services, medical care, surgery, critical care, maternity and gynaecology, services for children and young people, end of life care and outpatient services and diagnostic imaging, against the criteria of safe, effective, caring, responsive, and well-led. He explained that YDH received 24 ratings of ‘good’ and 15 ratings of ‘requires improvement’ with an overall rating of ‘requires improvement’. He said that while we would have wished to secure a more favourable rating, it is important to note that, during this latest round of CQC inspections, the vast majority of NHS trusts received a rating of ‘requires improvement’, reflecting the difficulties being felt across the NHS. He added that in the important category of caring, the Trust received a rating of ‘good’.</p>
4	<p>RECEIPT OF THE ANNUAL REPORT, QUALITY REPORT, ANNUAL ACCOUNTS 2015/16 AND EXTERNAL AUDIT OPINION</p> <p>4.1 The Chairman presented the annual report, accounts and quality report 2015/16, points from which had been discussed at item 3 above. He advised that the documentation had been scrutinised by the Audit Committee, ratified by the Board of Directors and received by the Council of Governors following a rigorous audit process undertaken by KPMG. He commented on the efficiency of the audit and confirmed that KPMG had issued an unqualified opinion on the accounts. Copies of the summary report were made available to attendees and the full documentation is on the Trust’s website at: http://www.yeovilhospital.co.uk/about-us/corporate-information/ The annual report, quality report and annual accounts 2015/16 was received by the Trust’s members.</p>
5	<p>ANY OTHER BUSINESS AND OPPORTUNITY FOR PUBLIC QUESTIONS</p> <p>5.1 There was no further business to discuss. There was an opportunity for questions/comments from attendees, which were asked (Q) and answered (A) as follows:</p> <p>5.2 Q What is the relationship between YDH and the local community hospitals? A Paul Mears said that YDH works closely with Somerset Partnership NSH Foundation Trust which runs the local community hospitals. He said that they are an important resource providing support to patients transitioning from hospital until they return home or receive some other package of care, among the other services which they provide.</p> <p>5.3 Q Is the Trust moving towards using technology as the default mechanism for communicating with patients? A Paul Mears said that YDH understands the importance of meeting patients’ expectations to receive correspondence in electronic form, subject to putting in place robust information governance controls. He added that where patients would prefer to receive information in paper form, this will continue to be an option.</p> <p>5.4 Q How often is YDH subject to inspection from the CQC and what training is provided to inspectors? A Paul Mears responded that this was the first time YDH was subject to an inspection of this scale. He added that the process is resource intensive for trusts as well as for the CQC. Prior to the next round of inspections, he advised that the CQC is gathering feedback and evidence of learning with the aim of continuously improving the process. In terms of training, Paul Mears explained that the inspection teams are made up predominately of clinicians who are experienced in their field, alongside some other staff groups and lay input.</p>

<p>5.5</p>	<p>Q What will be the impact of Brexit on YDH being able to successfully recruit nurses and doctors from overseas?</p> <p>A Paul Mears expressed his appreciation for the Trust’s staff from overseas, saying that without them, YDH would have insufficient staff to deliver high quality services and care to patients. He said that the impact of the Brexit vote on overseas recruitment is as yet unknown, but that YDH would continue to promote its recruitment campaign locally, nationally and internationally to ensure the right balance of skills and capabilities of staff for patients.</p>
<p>5.6</p>	<p>Q Will YDH cope during the upcoming junior doctor strikes?</p> <p>A Paul Mears responded that YDH is developing plans to ensure that patients will continue to be cared for safely during the planned strike action. He acknowledged that some elective operations and clinics may need to be cancelled to enable the availability of consultant staff to focus on patients requiring urgent care. Paul Mears said that he and his colleagues maintain a good dialogue with the Trust’s junior doctors and recognise and value their hard work and commitment.</p>
<p>6</p>	<p>FINAL REMARKS</p>
<p>6.1</p>	<p>The Chairman explained the interface between the Board and the Council of Governors, explaining that the Council (which is made up of governors elected by the hospital’s public members) holds the Board to account. He said that the Board welcomed the valuable input of the governors and John Park, Lead Governor, concurred that there was good relationship between the governors and the executive and non-executive members of the Board, adding that they are responsive to feedback.</p>
<p>6.2</p>	<p>The Chairman closed the meeting by thanking the presenters, exhibitors, staff and attendees for contributing to an informative afternoon.</p>

REPORT TO:	Annual General Meeting
PRESENTED BY:	Chairman
TITLE:	Amendments to the Constitution and Standing Orders
DATE:	27 September 2017

Executive Summary

The Trust's Constitution and Standing Orders were last reviewed in autumn 2013 and have remained largely unchanged since the Trust's authorisation as a Foundation Trust in 2006. The Constitution requires review every three years, therefore a full review of the documents was undertaken in autumn 2016 with oversight by Bevan Brittan LLP.

The documents were considered and ratified by the Council of Governors (6 December 2016) and the Board of Directors (21 December 2016). Accordingly, the Constitution, Standing Orders, Standing Financial Instructions and Scheme of Delegation and Reservation have been revised and rationalised.

A summary (Annex 1) of the key changes to the Constitution are set out below for approval by members. Members should note that it is no longer necessary to receive NHS Improvement's approval for changes to the Constitution.

Note: The revised version of the Constitution is available at (under publications):
<http://www.yeovilhospital.co.uk/about-us/corporate-information/>

**YEOVIL DISTRICT HOSPITAL NHS FOUNDATION TRUST
EXPLANATION OF AMENDMENTS TO THE CONSTITUTION**

1 INTRODUCTION

- 1.1 Yeovil District Hospital NHS Foundation Trust is governed by the National Health Service Act 2006 ("2006 Act"), the Constitution and the Licence granted by Monitor.
- 1.2 The Health and Social Care Act 2012 ("2012 Act") came into force by five Commencement Orders. The 2012 Act amends the 2006 Act, and in turn, impacted upon the required drafting to be included in the Trust's Constitution.
- 1.3 The Trust proposed a number of amendments to its Constitution which are highlighted in a comparison document. The various substantive amendments are explained below.

2 EXPLANATION OF AMENDMENTS

Provision	Explanation of amendment
7.11.2.1	Where a governor is co-opted into their seat, the option is now available for the co-opted governor to fill the seat for the unexpired period of office, not just until the next annual election.
Annex 1	The list of electoral wards was updated to ensure full coverage of the area of the Trust.
Annex 3	The model rules for the elections to the Council of Governors have been amended to allow for electronic voting to be utilised.