

Annual Members' Meeting and Trust's Annual General Meeting

Minutes of the Meeting of Monday 2 September 2013
Lecture Theatre, Education Centre, Dorset County Hospital

AMM13/001 Welcome

The Chair, Dr J Ellwood, welcomed everyone present to the meeting.

AMM13/002 Declarations of Interest

The Chair reminded those present that they were free to raise declarations of interest at any point in the meeting should it be required.

AMM13/003 Minutes of the Previous Meeting held on 3 September 2012

The minutes of the previous meeting held on 3 September 2012 were accepted as a true and accurate record.

AMM13/004 Annual Report, Quality Report and Accounts 2012/13

Annual Report 2012/13

The Chief Executive presented a summary of the Annual Report for 2012/13. She stated that good progress had been made, with the Trust ending the year with a financial surplus, a financial risk rating of 4 and a 'green' governance scorecard. She confirmed that the Trust's priorities for 2013/14 were quality and safety, operational and financial performance, and improving workforce engagement. She stated that the biggest challenges in 2013/14 would be financial, with the Trust needing to find another £6 million in savings. She thanked those organisations who had given major donations to the Trust, including the Dorset Kidney Fund, Dorset Health Trust, Fortuneswell Cancer Trust and the Friends of Dorset County Hospital. She also thanked the Chair, Board and executive team for their hard work, and the Governors and Members for their support of the Trust. She also highlighted the fantastic work undertaken by the staff and the many volunteers at the hospital.

Quality Report 2012/13

The Director of Nursing and Quality presented a summary of the 2012/13 Quality Report, which forms part of the Annual Report. She confirmed that the report did not cover all aspects of the Trust's work on quality, but focused on the identified priority areas. She summarised the achievements made during the year in the key areas of zero tolerance to c-difficile cases, reducing falls, preventing pressure ulcers, 62-day cancer target, Transient Ischaemic Attacks (TIA) clinic targets, improved management of hypoglycaemia, improving the experience of carers of patients with dementia, development of nursing care indicators and the implementation of the clinical leadership programme. She confirmed that the number of quality priorities for 2013/14 had been reduced to 8, so that each priority could receive more focus.

Annual Accounts 2012/13

The Director of Finance and Resources presented a summary of the Accounts for 2012/13. She confirmed that the Trust had made £153 million in income, the majority of which had come from the commissioners, and had spent £149 million, predominantly on staffing costs. The Trust had ended the year with a surplus of £3.8 million, which was primarily due to non-recurring income including the sale of the fire station and donated assets. This meant that the underlying position was £1 million surplus, which was close to the planned surplus of £700,000. She confirmed that the Trust had ended the year with a financial risk rating of 4, which indicates strong financial performance.

AMM13/005 Update on Strategic Direction

The Chief Executive presented an update on the Trust's Strategic Direction for 2012-2015, including a roadmap of how the Trust will achieve its vision of "Delivering Compassionate and Safe Healthcare". The Strategic Direction was published in 2011 and is available on the Trust's website. In May 2013 there was a 2 day workshop to review the work from the previous year, to refine the Trust's strategic imperatives and to put in place a more detailed plan for 2013 onwards. She explained that the roadmap had 3 horizons; consolidating the Trust's reputation as a provider of choice, deepening and refining services, and being a leading healthcare campus, all of which build on the strong foundations already in place. Each aspiration in these key areas has goals and targets attached. The Chief Executive concluded that she is confident the Trust will continue to achieve and to deliver the healthcare our community requires.

A member asked if the 111 phone-line was reducing the number of attenders at Emergency Department (ED). The Chief Executive stated it was not the Trust's experience that the new phone-line was reducing attendances and, in line with the national trend, ED attendances are currently increasing.

AMM13/006 Lead Governor's Report

Wendy Nightingale, Governor for West Dorset, presented the Lead Governor's report from Duncan Farquhar-Thomson in his absence. The Lead Governor reported that the Governors were pleased that the Trust has had a successful year, and that the staff should be congratulated on delivering a high level of performance despite difficult economic circumstances. He reported that he saw the priorities for the Governors over the next year as increasing Trust Membership, improving scrutiny of the Board, continuing to develop a strategy to support the Trust's position and representing the views of the Membership. The Lead Governor thanked the Council of Governors who generously give their time unpaid to fulfil their role. The Lead Governor also provided a commentary on the Quality Report for 2012/13 and confirmed that the Governors were in full support of the 8 quality priorities that have been outlined for 2013/14.

AMM13/007 Questions from the Floor

A member asked about the reduction in agency nursing staff. The Director of Workforce and HR confirmed that the Trust has recently invested heavily in

substantive nursing posts, with a view to minimising agency use, and that this year supervisory Sister posts have been reintroduced at the request of the nursing staff.

A member asked if food at the hospital is still produced by the kitchens, and the Director of Workforce and HR confirmed that this is still the case, with an increasing amount of produce being sourced locally.

An ex-Governor requested an update on End of Life Care. The Director of Nursing and Quality reported that the Liverpool Care Pathway is no longer in use, and that an End of Life Care Plan has been developed to support patients requiring end of life care. The ex-Governor also asked about the Trust's role in educating the community, particularly young people, with the aim of reducing future health problems. The Chair confirmed that such education would fall into the remit of the Clinical Commissioning Group or County Council.

The Chair thanked the Trust's volunteers and staff for their huge contribution to the success of the Trust, and thanked everyone for their attendance.

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Chair

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Date