### Annual General Meeting

**9.00 am – 10.45 am, Friday 31 July 2015**

**Board Room, Derriford Hospital**

**9.00 – 9.30 am**

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<tbody>
<tr>
<td><strong>1</strong></td>
<td>Welcome, apologies, review of minutes of the AGM held on 25 July 2014 and Chairman's introductory remarks</td>
<td>Chairman</td>
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<tr>
<td><strong>2</strong></td>
<td>Annual Report for the year ended 31 March 2015</td>
<td>Chief Executive</td>
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<tr>
<td><strong>3</strong></td>
<td>Annual Audited Accounts for the year ended 31 March 2015</td>
<td>Director of Operational Finance</td>
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<tr>
<td><strong>4</strong></td>
<td>Questions from the public pertinent to the Annual Report and Audited Annual Accounts</td>
<td>Chairman</td>
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**9.30 – 9.35 am**

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<td><strong>5</strong></td>
<td>Overview of the Patient Experience</td>
<td>Patient Experience Manager</td>
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**9.35 – 9.45 am**

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<td><strong>6</strong></td>
<td>Tea with Matron</td>
<td>TBC</td>
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**9.45 – 10.00 am**

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<td><strong>7</strong></td>
<td>Our Patient Council: what’s it all about?</td>
<td>Patient Council Chair</td>
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**10.00 – 10.30 am**

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<tr>
<td><strong>8</strong></td>
<td>Group work on Patient Experience</td>
<td>All</td>
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**10.30 – 10.40 am**

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<tr>
<td><strong>9</strong></td>
<td>Feedback from group leads to Trust Chairman</td>
<td>Group leads</td>
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**10.40 – 10.45 am**

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<tr>
<td><strong>10</strong></td>
<td>Chairman’s summing up and close</td>
<td>Chairman</td>
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**10.45 am close and refreshments**

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Our Annual Report and our Annual Accounts are available on our website:

[http://www.plymouthhospitals.nhs.uk/ourorganisation/newsandpublications/annualreports/Pages/default.aspx](http://www.plymouthhospitals.nhs.uk/ourorganisation/newsandpublications/annualreports/Pages/default.aspx)
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Members of Plymouth Hospitals NHS Trust Board of Directors have declared the following interests:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Declared Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Richard Crompton</td>
<td>Chairman</td>
<td>Independent Chairman, Somerset Safeguarding Adults Board</td>
</tr>
<tr>
<td>Kevin Baber</td>
<td>Chief Operating Officer</td>
<td>Employer Member of the South West Sub-Committee of the Advisory Committee on Clinical Excellence Awards</td>
</tr>
<tr>
<td>Greg Dix</td>
<td>Director of Nursing</td>
<td>Specialist advisor with the Care Quality Commission</td>
</tr>
<tr>
<td>Philip Hughes</td>
<td>Medical Director</td>
<td>Director, Hughes Diagnostics</td>
</tr>
<tr>
<td>Ann James</td>
<td>Chief Executive</td>
<td>Health and Medical Champion, Chamber of Commerce Director, South West Peninsula Academic Health Science Network Member, One Plymouth Chair, Health Education South West Membership Council Acute Sector Representative, Health Education South West Board Chair, National Institute for Health Research Comprehensive Local Research Network Partnership Group Member, Plymouth Growth Board, Champion for People, Communities and Institutions Board Member representing Acute Sector, NHS Leadership South West</td>
</tr>
<tr>
<td>Mike Leece</td>
<td>Non-Executive Director</td>
<td>None</td>
</tr>
<tr>
<td>Terence Lewis</td>
<td>Non-Executive Director</td>
<td>Commissioned by Monitor to undertake an independent review of health service reconfiguration in an area not associated with Plymouth Hospitals NHS Trust or the clinical services the Trust provides Honorary Life President, Heartswell South West Chairman, Plymouth Marine Laboratory Governor, Plymouth University Chairman, Plymouth University Peninsula Schools of Medicine and Dentistry Medical School Board President, Plymouth Heartbeat House of Hope, Nepal – family orphanage Son-in-law and daughter are Chief Executive/Chairman of a number of companies providing home care across Devon, including Plymouth</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Details</td>
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<tr>
<td>Ray Playford</td>
<td>Non-Executive Director</td>
<td>Chair, University of Plymouth Enterprise Ltd Owner, Nutritional Bioscience Ltd, RPF Ltd, Cells United Ltd External consultant for Healthcare UK Honorary Contract with Plymouth Hospitals NHS Trust Board Member, SW Academic Health Science Network</td>
</tr>
<tr>
<td>Elizabeth Raikes</td>
<td>Non-Executive Director</td>
<td>Trustee, Fortescue Garden Trust Chairman, Torbay Museums Trust</td>
</tr>
<tr>
<td>Joe Teape</td>
<td>Director of Finance &amp; Strategy</td>
<td>Spouse is an employee of the Royal Devon &amp; Exeter NHS Foundation Trust Committee member of Masanga UK, registered charity number 1136339</td>
</tr>
<tr>
<td>Nick Thomas</td>
<td>Director of Planning &amp; Site Services</td>
<td>Chairman of Plymouth Access to Housing</td>
</tr>
<tr>
<td>Henry Warren</td>
<td>Associate Non-Executive Director</td>
<td>Governor and member of Finance Committee of Plymouth University Chairman and Director of Fluvial Innovations Ltd Member of Plymouth Science Park Advisory Board</td>
</tr>
<tr>
<td>Mike Williams</td>
<td>Non-Executive Director</td>
<td>My daughter-in-law works for NEW Devon CCG as a Communications Manager From 2nd March 2015 my son works for SeeData, a software and web site company that provides services to the NHS including PHNT Self-Supporting Priest in the Parishes of Topsham and Wear in the Diocese of Exeter I undertake occasional expenses only paid work for QFI; a consultancy company that provides services to the NHS</td>
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Plymouth Hospitals NHS Trust

Minutes of the Annual General Meeting
held at 9.00 am on Friday 25 July 2014
in the Board Room, Derriford Health & Leisure Centre

Present: Richard Crompton, Chairman
Kevin Baber, Chief Operating Officer
Greg Dix, Director of Nursing
Ian Douglas, Non-Executive Director
Phil Hughes, Medical Director
Ann James, Chief Executive
Elizabeth Raikes, Non-Executive Director
Margaret Schwarz, Vice-Chair
Joe Teape, Director of Finance & Strategy
Henry Warren, Associate Non-Executive Director
Denis Wilkins, Associate Non-Executive Director
Mike Williams, Non-Executive Director

Apologies: Terence Lewis, Non-Executive Director
Rob Sneyd, Dean, Plymouth University Peninsula Schools of Medicine & Dentistry

In attendance: Lee Budge, Director of Governance
Adrian Copplestone, Associate Dean, Student Affairs, Plymouth University Peninsula Schools of Medicine & Dentistry
Gill Hunt, Board Secretary
Tim Jones, Commanding Officer, Ministry of Defence Hospital Unit
Hein Scheffer, Director of Human Resources & Organisational Development
Nick Thomas, Director of Planning and Site Services

‘Governors’ in attendance Barry Lucas, Public ‘Governor’, Plymouth constituency
Vera Mitchell, Public ‘Governor’, Plymouth constituency
Marina Taylor, Public ‘Governor’, Plymouth constituency

1. Welcome and apologies

The Chairman welcomed shadow ‘governors’, Members Forum members, staff and members of the public present. The apologies listed above were noted.

2. Chairman’s Introduction and Remarks

In opening the AGM, the Chairman referred to key themes in the Trust’s Annual Report 2013/14, copies of which were available to attendees. These were the
Board’s commitment to:

- Conduct its business in an open and transparent manner.
- Strive to support a culture of continuous improvement.
- Support staff and recognise their commitment to patients.
- Respond to the financial and operational pressures of the broader NHS.

The Chairman stated that 2014/2015 would be a watershed year for the Board in respect of financial and operational performance and it was incumbent on Board members to adopt the mindset of ‘thinking like a patient’ when making the difficult decisions required of them. The format of the AGM was new for this Board. After the formalities of the presentation of the annual report and accounts, it was his intention to invite members of the public to give their perspective of the Trust and their experience of the services provided. To do this, Board members would join the public and staff present in facilitated group discussions. The groups would then reassemble and feed back their findings to the Board, so providing a welcome and timely snapshot of opinion.

The Chairman invited the Chief Executive to present the Annual Report.

3. **Annual Report 2013/14**

Ms James’ presentation celebrated highlights for the Trust in the financial year 2013/14. Of note were:

- Opening of the new Stem Cell Transplant Unit.
- Improved patient menus thanks to work of the Hospital Feeding Group.
- Celebration Awards to recognise staff achievements.
- Care Quality Commission warning notice for surgical procedures, applied in July 2013 and lifted in September 2013.
- Improved results in national maternity services survey report.
- Diabetes services for young people recognised as the ‘Best in the West’.

In a memorable year, Ms James singled out the Trust’s first ever Open Day, held in September, which several thousand members of the public had attended. The Communications Team had been shortlisted for a national award for their leadership of this event.

4. **Presentation of the Audited Annual Accounts**

Mr Teape presented a summary of the audited annual accounts for the financial year 2013/14. The Trust had achieved all its financial targets. External Audit opinion had been ‘unqualified’ on the financial statements but ‘qualified’ on the use of resources, as in 2012/13. In summary:

- The Trust remained in a very challenging financial position with a planned deficit in 2014/15 of £13m.
• The Board must approach HM Treasury again this year for cash funds to pay bills and staff.
• The wider NHS faced the biggest financial challenge of its history.
• Securing a sustainable future for the Trust and the services it provided, alongside keeping safety and quality at the heart of all services, remained the Board’s biggest challenge.

5. **Our Trust – Your Perspective – information sources**

Ms James gave a short presentation on the sources available to the Board which reflected the views of patients and the public on their care and treatment at the Trust. This Board felt that it had overseen good progress in improving the patient experience, an opinion it had determined based on the following sources of information:

- Informal feedback – ward and department based
- Friends and Family Test
- Patient Surveys – national, local and PROMS
- Compliments
- PALS
- Complaints
- External sources - Patient Opinion, NHS Choices, Healthwatch, CQC
- PLACE Assessment
- Patient engagement activities – workshops, patient interviews
- Staff surveys

Ms James stated that this feedback identified key themes, positive and negative but, she asked, were they the same themes that those present felt were important today?

The Chairman signalled the split into three facilitated groups for informal discussions.

6. **Our Trust – Your Perspective – your experience**

The groups reconvened and a representative from each reported his group’s responses to the first question:

*If you or a member of your family were coming for care with Plymouth Hospitals tomorrow, what three things would you be really confident in and proud of?*

The main theme which emerged from debate was:

**Confidence:**
- in the passion and commitment of staff
- in the quality of care
• in the skills and competencies of staff
• in the range of specialist services provided
• that staff would do the little things that mean so much to patients
• that patients would be treated as individuals
• that good pastoral care would be available

The process was repeated for the second question:

*If you or a member of your family were coming for care with Plymouth Hospitals tomorrow, what three things would worry you?*

The main themes which emerged from debate were:

**Quality of care**
- Delays in the discharge process, particularly waiting for take-home medications
- Being cancelled on the day of surgery and the associated worries and disruption to home life
- End of life care

**Patient experience**
- Self check-in for outpatient appointments: perceptions that it was impersonal but, most importantly, difficult and stressful for some patients
- Clinical administration: obtaining suitable appointment times, wanting more timely communication, fear of getting ‘lost in the system’
- Parking: insufficient disabled parking and insufficient guidance on the most convenient parking location for your appointment
- Wayfinding inside the hospital
- Access to hospital via public transport

**Safe care**
- Becoming an ‘outlier’ and the associated concerns for patients and families
- The apparent unrestricted public access to wards

The third and final question discussed in groups was:

*Thinking of yourself as a patient, what three things should our Board be focusing on?*

The themes upon which groups wanted the Board to focus were:

**Strategy and planning**
- Demographic change
- 7 day working
• Financial sustainability
• Improved access for patients and staff
• Hospice care
• Frail elderly care
• Workforce planning
• Reduce bank and agency staff

Culture
• Lead by example
• Staff engagement: listen to the silent majority
• Allow a culture of caring and compassion to flourish

Patient Experience
• Listen to patients
• Communicate in a language that patients understand
• Parity of waiting times
• Reduce six bedded bays
• Safe, supported discharge and aftercare

At the conclusion of the feedback the Chairman thanked everyone for their contributions; this feedback was invaluable and would provide a focus for the Board’s work in the months ahead.

7. Questions from the public

The Chairman invited questions from the public.

A member of the public spoke in favour of hospice wards in all district general hospitals. He expressed the view that the most appropriate place to care for the terminally ill was a designated specialist facility and a failure to provide this placed excessive pressure on nursing staff and general wards.

A member of the public voiced her concern on two issues; firstly, the amount of waste caused by the use of paper towels in hospital toilets, and, secondly, assurance that the Trust purchased medications at the most favourable prices. In its requirement to save money, she urged the Board not to lose sight of small savings that together amounted to significant cost reductions.

A member of the public asked why the Trust was fined for failing performance targets and what happened to the fines. Mr Teape explained how the process within the local health community had operated to date.

A member of the public stated that he had recently spent some five hours as a patient in the Emergency Department and had been horrified by the drunken
and abusive behaviour of some patients. He urged the Board to ensure that staff and other patients were adequately protected.

There were no further questions.

8. **Minutes of the previous Annual General Meeting**

The minutes of the previous Annual General Meeting held on 28 September 2013 were agreed as a true and accurate record. There were no matters arising.

9. **Chairman’s closing remarks**

The Chairman thanked Amanda Nash, Jayne Glynn and Gill Hunt for organising and facilitating the AGM.

The meeting closed at 10.35 am.

Signed

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Date

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