ANNUAL GENERAL MEETING

Held on Wednesday 17 September 2008 in the Sebastian Coe Suite, Holiday Inn, Rotherham

Present: Mrs M Oldfield, Chair
         Mr T Hercock, Vice Chair

Public Governors: Mrs S Bird
                  Mr P Brader
                  Mr J Bristow
                  Mrs A Chester
                  Miss J Dearden
                  Ms P Draycott
                  Ms J Frith
                  Ms M Marshall
                  Mr L Vizard
                  Ms S Waterfield
                  Mr A Wilkinson
                  Mr D Wray
                  Rev A Hayne

Partner Governors: Ms J Flanagan
                  Cllr T Sharman
                  Mrs J Wheatley

Staff Governors: Mrs J Ward
                 Mrs J D’Silva
                 Dr Al-Modaris

Non Executive Directors: Mr G Bloomer
                        Mrs J Hickton
                        Mr N MacDonald

Company Secretary: Mrs K Rogers

In attendance: Mr B James, Chief Executive
               Mrs J Bird, Chief of Quality & Standards/
               Mr G Briggs, Director of Human Resources
               Mr J Cartwright, Director of Facilities
               Mr M Pinkerton, Chief of Business Development
               Mrs J Wilson, Chief Operating Officer
               Mr A Lythgo, KPMG
               Mrs C Lilley, Secretary (Minutes)

Members of the Public: 11 members of the general public
1 **Apologies**

Matthew Lowry, Chief Financial Officer, had given his apologies due to the birth of his 2nd daughter on Monday.

2 **Minutes of the 2007 Annual General Meeting**

The minutes of the 2007 Annual General Meeting were accepted as a true record.

3 **Matters Arising**

There were no matters arising.

4 **Introduction and Overview**

Mrs Oldfield welcomed everyone to the 2008 Annual General Meeting and thanked them for attending. Mrs Oldfield stated that this was a special year, as it was the 3rd year as a Foundation Trust, 30th anniversary of the opening of the hospital and 60th anniversary of the NHS, it is also the best year the Trust had ever had and has exceeded all expectations. The Trust has won 3 BMA awards – the Patient Information Award (NHS Trust) for the personal diary used by patients with Dementia, the Patient Information Award (Young People) for Pain, Pain Go Away, and overall the BMA Patient Information Resource of the Year Award 2008 for the personal diary.

5 **Presentation – Annual Accounts and Auditor’s Report and The Way Ahead**

Mr James presented the Annual Report and accounts for 2007/8. Of the successful achievements, those worthy of note included – waiting times were amongst the shortest in the UK, the median wait for a routine outpatient appointment is 10 days and the median wait for routine elective admission is 16 days. The A&E 98% target had been met and the Cancer referral to treatment target had been achieved for 24 months in a row which was the best in England. The Trust had been awarded a gold standard for Laboratory disciplines for the first time in 10 years of accreditation. GP referrals in 2006 were 6000 and are now 12000 and infections such as MRSA and C Difficile have reduced dramatically.

External Assessment – The Healthcare Commission Annual Health Check had awarded a double excellent rating for Quality Services and Use of Resources which is the highest rating possible. Monitor, the Independent Regulator for Foundation Trusts, had rated the hospital at Green for Governance, Green for Mandatory Services and 4 (out of a possible 5) for Finance – the best in South Yorkshire.

David Nicholson, the Chief Executive of the NHS would be visiting Rotherham on 18.9.08 because the Trust was recognised as being one of the best Trusts in the country for controlling infection.
Mr James outlined a number of schemes:

Capital Investment – The Trust is to commence a £45m programme to refurbish wards particularly to improve privacy and dignity, with single sex wards a priority. Major refurbishment and modernisation of Pharmacy including the use of Robotics and the redevelopment of a full service front entrance. To commence a £15m programme to implement a world class, state of the art, IT system including Electronic Patient Records.

Service Improvement – The Trust aims to achieve a maximum 9 week wait from referral to treatment, reduce major HCA infections, update all plans to respond to a major emergency, ensure a maximum 48 hour working week for all staff in line with EWTD, commence a programme to reduce the risk of mortality and increase the contribution to Public Health across Rotherham. A review and improvement in car parking is to take place, development and piloting of Interqual Care Management which places patients in the right care setting, and a Research & Development strategy are all planned for the coming months.

Mr James concluded by saying that the Trust had ended the year much better than when it started with a surplus of £3.7m.

6 Presentation by KPMG

Mr Lythgo from PGME gave a short presentation and stated that KPMG’s role was two fold. They were appointed by the Trust Governors to give members and Monitor an independent view and to audit the yearly financial statements to give an overview of surpluses. Mr Lythgo assured the meeting that the Trust’s financial position is sound.

7 Members Questions from the floor

Could you please confirm what happens about health insurance if a member of the public needs treatment whilst on holiday. By way of example a lady from Australia offered her insurance details but they were refused by a doctor.

Mr James stated that there are National Standards which Medical Records Staff work to and Mr Lythgo confirmed that the Trust has a process that is reciprocal regarding health arrangements with Australia.

Is the Primary Care Centre a risk for the Trust and what has been done to mitigate this.

Mr James replied that the capacity that was released would help reduce diagnostic times. It is a loss but not an unmanageable loss.

Could you state how much revenue is being made from car parking.

Mr Cartwright replied that £1/2 million is being made but this is being re-invested to make the car park safe, for example on external lighting and the CCTV cameras to reduce car crime, and on increased Security. The Board would be looking at reducing car parking charges for patients in the future.

Spending £15m on IT does RFT get any compensation?
Mr James explained the urgency of programming plans which included the loss of some of its own systems through McKesson’s exit from the market place.

Will RFT be reducing bed occupancy?
Mr James replied that the hospital averaged 82% occupancy, although it is treating more patients, there are still empty beds. In the future 6 bedded bays will be converted into 4 bedded bays with ensuite facilities. There is also an expected reduction in length of stay and an increase in day surgery, all of which affect the number of beds required by the hospital.

Over a 10 year period with IT is RFT driving this forward or are the systems driving this?
Mr James replied that RFT is looking at 3 of the best systems and will be choosing a nationally compliant system which will be future proofed and will have a fully connected electronic spine.

If RFT is hoping to increase referrals from outside the region. How will the hospital grow over the next 10 years.
The next Service Development Strategy will not disadvantage Rotherham patients. The Trust has taken on 6 more Consultants and is likely to take on more in the future. There is a move to hold clinics outside the hospital and 40-50% will be held in the community. The Trust is keen to diversity in order to continue to deliver healthcare to the people of Rotherham in particular.

Do you test patients on admission for MRSA and how can you sustain MRSA and C.Diff infection rates staying low.
Mr James replied that relevant patients are tested on admission because this is of national concern to know where and when any infection was contracted. Success in reducing these infections is due to tremendous hard work by all staff concerned and it is possible that all elective admissions will be screened in the future.

8 Close of the Meeting

There being no further questions, the meeting ended with closing remarks from Mrs Oldfield who expressed her thanks to everyone for attending and to all staff, the Board and Non Executive Directors for their achievements across the year. Mrs Oldfield went on to highlight how the hospital would be undergoing a fantastic transformation over the next 3 years and urged anyone who was interested to attend the development programme for Governors. Mrs Oldfield offered to answer questions anytime and invited people to ring her if they would like to discuss anything after the AGM.