# SHERWOOD FOREST HOSPITALS NHS FOUNDATION TRUST

## UNCONFIRMED MINUTES OF THE ANNUAL GENERAL MEETING OF SHERWOOD FOREST HOSPITALS NHS FOUNDATION TRUST ("THE TRUST")

# THURSDAY 29<sup>TH</sup> SEPTEMBER 2022, AT 17:30 via VIDEO CONFERENCE

### **Present:**

Claire Ward	Chair	CW
Paul Robinson	Chief Executive	PR
Phil Bolton	Chief Nurse	PB
Richard Mills	Chief Financial Officer	RM
Rob Simcox	Director of People	RS
David Selwyn	Medical Director	DS
David Ainsworth	Director of Strategy and Partnerships	DA
Shirley Higginbotham	Director of Corporate Affairs	SH
Graham Ward	Non-Executive Director	GW
Barbara Brady	Non-Executive Director	BB
Aly Rashid	Non-Executive Director	AR
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## **Public Governors:**

Sue Holmes	Ashfield (Lead Governor)	SuH
Ruth Scott	Mansfield	
Ian Holden	Newark and Sherwood	

## Staff Governors:

None

# **Appointed Governors:**

Nadia Whitworth	Trust Volunteers
Craig Whitby	Mansfield District Council

#### In Attendance:

Sue Bradshaw Danny Hudson Rich Brown Richard Walton Carter Singh Alison Pearson Claire Page Leanne Monger Jim Millns Paula Longden Lucy Dadge Kerry Bosworth Nicola Armstrong Mick Holmes	Minutes Producer for MS Teams Public Broadcast Head of Communications KPMG
10 members of the public	

RW

Apologies:

Steve Banks	Non-Executive Director	SB
Andrew Rose-Britton	Non-Executive Director	ARB
Andy Haynes	Specialist Advisor to the Board	AH
Rachel Eddie	Chief Operating Officer	RE
Manjeet Gill	Non-Executive Director	MG

# The meeting was held via video conferencing and was streamed live.

Item No.	Item	Action	Date
22/01	WELCOME		
1 min	CW opened the Annual General Meeting, noting that due to the circumstances regarding Covid-19 and social distancing compliance, the meeting was held via video conferencing and was streamed live. This ensured the public were able to access the meeting. The agenda and reports were available on the Trust Website and the public had been asked to submit questions prior to the meeting and were able to submit questions during the meeting via the live Q&A function. All participants confirmed they were able to hear each other.		
22/02	MINUTES OF THE PREVIOUS MEETING HELD ON 28 <sup>th</sup> SEPTEMBER 2021		
1 min	Following a review of the minutes of the Annual General Meeting held on 28 <sup>th</sup> September 2021, Members APPROVED the minutes as a true and accurate record.		
22/03	PRESENTATION: ANNUAL REPORT 2021/2022		
8 mins	PR advised a copy of the Trust's Annual Report and Annual Summary Report are available on the Trust's website. PR reflected on a demanding year for the Trust and expressed thanks to colleagues, staff and volunteers for their continued commitment and flexibility. PR acknowledged the impact of the Covid pandemic on waiting times for patients and advised the Trust is working hard to treat patients as quickly as possible, while prioritising those in most need. While it has been a challenging year, PR advised there are things for the Trust to be proud of, including the Covid vaccination programme, work to reduce waiting times and continuing to develop services, for example the expansion of surgical procedures at Newark Hospital and the Staff Survey results. The Trust is rated as Good by the CQC, with King's Mill Hospital being rated as Outstanding. PR advised the Trust was named as Trust of the Year at the Health Service Journal (HSJ) awards in March 2021.		

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	PR outlined the key highlights of the year, including the unveiling of the Gamma Scanner, rollout of the Carers' Passport, opening of the Same Day Emergency Care Unit, opening of the new mobile diagnostics unit, declaration of a climate emergency, launch of anti-racism strategy, Council of Governor elections and the rollout of staff bodyworn cameras as part of the Trust's stance against violence and aggression. PR highlighted the changes to the Executive Team and Board of Directors over the past year and outlined the performance highlights for	
	2021/2022.	
22/04	PRESENTATION: ANNUAL ACCOUNTS 2021/2022	
4 mins	RM presented the Annual Accounts for 2021/2022, confirming the accounts were prepared in accordance with the Department of Health and Social Care (DHSC) Group Accounting Manual (GAM) and on a going concern basis.	
	RM advised the Trust is reporting a retained deficit of $\pounds$ 1.3m, which includes an $\pounds$ 11.7m increase in the value of assets (reversal of impairment). Excluding this, the underlying operating position is $\pounds$ 13.2m deficit.	
	The Board of Directors adopted the accounts on 17 <sup>th</sup> June 2022.	
	RM advised the accounts are made up of four main statements, these being the Statement of Comprehensive Income, Statement of Financial Position, Statement of Changes in Taxpayers Equity and Statement of Cash Flows, and provided an explanation regarding each of these.	
22/05	PRESENTATION: EXTERNAL AUDITOR'S OPINION – ISA 260	
6 mins	RW outlined the responsibilities of an external auditor and the audit process. In terms of Financial Statements, KPMG issued an unqualified opinion, meaning the accounts for 2021/2022 give a true and fair view of the Trust's performance during the year and of its year end financial position.	
	In terms of the Annual Report, KPMG confirmed that the Governance Statement had been prepared in line with the Annual Reporting Manual requirements and no material inconsistencies were identified.	
	In terms of Value for Money, KPMG did not identify any significant weakness with regards to the Trust's arrangements.	



20/06	PANEL DISCUSSION – QUESTIONS AND ANSWERS	
16 mins	CW advised one question had been received in advance of the meeting and invited further questions to the panel.	
	<b>Question 1 – Dr Carter Singh</b> Given the high demand which the NHS is facing, it has never been more important to ensure that there is collaborative working across the Integrated Care Board (ICB) / Integrated Care System (ICS) to achieve optimal efficiency and high standards of patient care. Challenges in one part of the system, for example, in secondary care, can have significant unintended consequences and knock on effects in primary care and vice versa. We are facing an unprecedented recruitment / retention, workload and workforce crisis in General Practice. 90% of the total activity of the NHS occurs in General Practice for only 8% of the total NHS budget.	
	How does the Trust propose to work with stakeholders, such as the Nottinghamshire Local Medical Committee (LMC) and local General Practice to ensure that inappropriate un-resourced workload shift does not occur to ensure joined up whole system working and avoidance of patient safety concerns?	
	Response DS advised during week commencing 26 <sup>th</sup> September 2022, both SFHFT and Nottingham University Hospitals (NUH) declared internal critical incidents, which reflects the pressure the hospitals are under. Over the last 12 months the Trust has seen a significant increase in attends at A&E and the impact of Covid is still being felt in terms of elective care pathways. However, all components of the healthcare system, including social care, are under pressure, not just the acute providers.	
	There is a need to work together to address the issues and the new arrangements with the ICS, ICB, Provider Collaborative and Place Based Partnership (PBP) provides an opportunity to improve things, which has not been available historically. There is a need to recognise there is a need to work differently and have a change in mindset when considering how services are provided, for example, thinking about pathways rather than specialties and thinking about a preparation list rather than waiting list.	
	Both primary and secondary care providers need to change the way they work. In addition, healthcare providers need to work in partnership with patients to help them recognise and take ownership of the role they have to play in their own health and the impact they have on their health. There is a need to invest in the prevention agenda, for example, reducing smoking, alcohol consumption, etc.	

	<b>Question 2 – Mick Holmes</b> Is there any specific action being taken to address violence and abuse against staff, especially in A&E, and are victims encouraged to report such incidents to the Police?		
	Response RS advised the Trust provides support to colleagues in terms of the difficult circumstances they may face when providing services, particularly in ED, highlighting the provision of bodyworn cameras to staff, which provides confidence that when colleagues are put in a difficult situation there is evidence which can be used as necessary. The Trust provides wraparound wellbeing support to staff and the organisation has been reactive and responsive to ensure this is available when colleagues have faced a challenging situation. The Trust is working collaboratively with partners, particularly at Place, in terms of recognising the Trust is taking a zero tolerance approach to unacceptable behaviours.		
	DA advised there are no circumstances, with the exception of certain circumstances where there is an underlying medical condition, where it is acceptable for Trust staff to face violence and aggression. Sadly, this is on the increase, but the Trust has an open culture and supports staff to report all incidents. The Trust is working with partners, including the Police and local district councils, to seek new ways to convey the message this is not acceptable and action will follow. The Trust will pursue prosecutions and will not accept violence and aggression against staff.		
	<b>Question 3 – Ian Holden (Public Governor)</b> How far on are we with the development of the Virtual Ward concept as a response to the pressure we are under?		
	Response PB advised Virtual Ward is a new but important concept which provides an opportunity to care for patients outside the hospital environment within safe parameters and with support from medical staff and multidisciplinary team (MDT) colleagues. As it is in its infancy, there will be a minimal impact this Winter on the Trust's bed base and inpatient bed days. However, it gives the opportunity to provide a patient focused pathway which allows patients to not be in hospital. This is important and is the right thing to do for patients. Virtual Ward will grow and there is a need to continue to focus on it as it will pay increasing dividends over time. DS advised there is a need to build Virtual Ward slowly to ensure it is done right and safely.		
20/07	CONSTITUTION – CHANGES FOR APPROVAL		
4 mins	SH advised the proposed changes to the Trust's Constitution have been approved by the Council of Governors and the Board of Directors. No questions or comments were received in advance of the AGM. However, members were invited to add any comments or questions to the live Q&A function.		
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	SuH advised a review of the Trust's constitution has taken place as a result of being unable to fill all the vacancies at the governor elections which took place in April 2022. The proposed changes are to maintain the Newark and Sherwood constituency with 4 governors and amalgamating Mansfield, Ashfield and Rest of the East Midlands into one constituency with 10 governors. There will be 3 staff governors but these will no longer be site specific. No comments were received from the Members. Therefore, the changes to the Trust's Constitution were APPROVED.	
20/08	CLOSING STATEMENTS	
2 mins	CW expressed thanks to the governors for their work on behalf of Trust members and invited members to contact the Trust for further information about becoming a governor.	
	CW expressed thanks to all Trust staff for their work during some very difficult times.	
	CW thanked the speakers and everyone watching the broadcast.	
20/09	DATE AND TIME OF NEXT MEETING	
	It was CONFIRMED that the next Annual General Meeting would be held on 26 <sup>th</sup> September 2023.	
	There being no further business the Chair declared the meeting closed at 18:15.	
	Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.	
	Claire Ward Chair Date	