University Hospitals Birmingham MHS

NHS Foundation Trust

JOINT MEETING OF THE COUNCIL OF GOVERNORS AND BOARD OF DIRECTORS

Minutes of the Meeting of Thursday 6 December 2018 3.00 pm – 4.30 pm Lecture Theatre 2, Education Centre, QEHB

Present:

Rt Hon Jacqui Smith Mrs Bernadette Aucott Mr Stan Baldwin Dr Sue Balmer Mrs Kath Bell Mr Anthony D Cannon Mr Keith Fielding Mrs Sandra Haynes MBE Dr Elizabeth Hensel Mr Derek Hoev Dr Elspeth Insch OBE Mr Adam Layland Mrs Anne McGeever Mr Patrick Moore Mr Gerry Moynihan Col. Deborah Porter Mr Thomas Webster Cllr Kate Wild Mr Kevin Bolger Mr Jonathan Brotherton Mr Mike Hallissey Mr Tim Jones Ms Karen Kneller Ms Mehrunnisa Lalani Dr Catriona McMahon Mr Harry Reilly

Mr Mike Sexton Mrs Lisa Stalley-Green Prof Michael Sheppard

Ms Cherry West

In attendance:

Ms Fiona Alexander Mr David Burbridge Mrs Margaret Garbett Mr Mark Garrick Mr Andrew McKirgan Mr Julian Miller Mr Andrew McKirgan Mr Lawrence Tallon

Mr Andy Walker Ms Phillipa Hentsch Ms Sarah Snowden

Chair Public Governor, Birmingham South Public Governor, Solihull & Meriden Public Governor, Solihull & Meriden Public Governor, Rest of England & Wales Public Governor, Sutton Coldfield North Public Governor, Birmingham East Public Governor, Birmingham South West Public Governor, Birmingham South East Public Governor, Tamworth Public Governor, Birmingham West Public Governor, Birmingham Reservoirs Public Governor, Solihull & Meriden Staff Governor, Corporate & Support Services Public Governor, Birmingham Heartlands Representing Stakeholder Governor RCDM Associate Governor, Public Constituency Stakeholder Governor, Solihull Metropolitan Borough Council Executive Director of Strategic Operations ("EDSO") Executive Chief Operating Officer (HGS) ("COO-HGS") Interim Medical Director ("IMD") Executive Director of Workforce & Innovation ("EDWI") Non-Executive Director & Chair of the Audit Committee Non-Executive Director Non-Executive Director & Senior Independent Director Non-Executive Director & Deputy Chair & Chair of Investment Committee Executive Chief Financial Officer ("ECFO") Executive Chief Nurse ("ECN") Non-Executive Director & Chair of the Organ Donation Committee Executive Chief Operating Officer (QEHB) ("COO-QEHB")

Director of Communications Director of Corporate Affairs Director of Nursing (HGS) Director of Quality Development Director of Partnerships Director of Finance Director of Partnerships Director of Corporate Strategy, Planning & Performance Head of Strategy & Planning Head of Strategy & Analysis Corporate Affairs & Governor Liaison Manager

("DComms") ("DCA") ("DQD") ("DoP") ("DoF") ("DoP") ("DCSPP")

G18/58	Welcome and Apologies for Absence
	The Chair welcomed everyone to the meeting and submitted apologies from the CEO who was attending a meeting of the Shelford Group with NHS England.
	Apologies for absence were received from the following Public Governors:
	Mr Mark Aspinall, Rest of England & Wales
	Dr John Cadle, Quinton, Halesowen & Southwest
	Mr Albert Fletcher, Birmingham North
	Mrs Phyl Higgins, Lichfield Northwest & Northeast
	Miss Beverley Martin, Rest of England & Wales
	Apologies for absence were received from the following Staff Governors:
	Dr Tom Gallacher, Medical & Dentistry
	Dr Kate Gee, Nursing
	Ms Sally Glover, Clinical Scientist & Allied Health Professionals
	Ms Yvonne Murphy, Nursing
	Mr Lee Williams, Corporate & Support Services
	Apologies for absence were received from the following Stakeholder Governors:
	Surgeon General Martin Bricknell, RCDM (represented by Col. Deborah Porter)
	Prof Carol Doyle, Birmingham City University
	Cllr Jayne Francis, Birmingham City Council
	Rabbi Yossi Jacobs , Birmingham Faith Leaders Group
	Prof Isabelle Szmigin, Birmingham University
	Apologies for absence were received from the following Associate Governors:
	Mrs Susan Hutchings (Public)
	Mr David Treadwell (Public)
	Apologies for absence were received from the following members of the Board of Directors:
	Dr David Rosser, Chief Executive
	Ms Lisa Stalley-Green, Chief Nurse
G18/59	Quorum
	The Chair noted that a quorum of both the Council of Governors and the Board of Directors was present and, accordingly, the meeting could proceed to business.
G18/60	DECLARATIONS OF CONFLICT OF INTERESTS
	No conflicts of interest were declared.

G18/61	Annual Plan & Strategy
	The Council of Governors considered the report presented by the Director of Corporate Strategy, Planning & Performance.
	The Trust has yet to receive the final report from the recent CQC inspection however initial feedback appears encouraging.
	UHB is now the second largest Trust in the UK following the merger by acquisition of Heart of England Foundation Trust. The Trust faces challenges both internally - meeting the challenge of increased demand and externally - with a changing environment including an ageing society, inequalities, chronic diseases and cost growth.
	In order to allow services to concentrate on caring for patients who are seriously unwell and in need of specialised care, there is a need to reorganise the supply of healthcare so that people with less acute needs can be cared for in appropriate settings outside hospital. To this end the Sustainability and Transformation Partnership (STP) was created as a vehicle for strategic change looking at how the Trust can work with other public services, system partners and the public ensuring the mental and physical health of the population in the most appropriate setting.
	Changes that are affecting the Trust include:
	 Population changes and prevalence of disease
	 Over the next generation the number of people in Birmingham over 85 will double – healthcare costs of someone over 85 are on average 8 times higher than someone of working age.
	 People are living longer with chronic, complex and expensive care needs such as cancer and dementia.
	 Sharp contrasts in equality and wealth give rise to inequality in outcomes of health and life expectancy.
	 Scientific and technological advances in the digital era
	 UHB is now one of the leading centres in Europe for organ transplants along with minimally invasive surgery and genomic medicine. These are positive developments but also drives cost and demand growth
	Financial constraints
	 Since 2010, budgets across the NHS have been constrained. A lack of investment in general practice and community and mental health services has increased attendance and admissions within hospitals
	 Although the Government has announced an increase in revenue spending this will not cover funding for everything – urgent capital investment is needed in buildings as well as training, education, public health etc.
	 Workforce challenges including the availability of clinical staff
	The new strategic objectives for the organisation to meet these challenges include:
	 Standardisation of high quality care - in our hospitals, community sites, virtually or at home
	 Clinical Service Planning across all sites for each speciality overseen by the Strategic Operations Steering Group with standards being levelled up, not to the average or below
	 Digital and technological transformation – rolling out PICS, Oceano PAS, and Clinical Portal across all sites and developing new and emerging technologies

	including video consultations and AI diagnostics and analytics – as well as being the national health test bed for 5G.
	 Making the best use of resources by efficiently managing the Trust's estates, assets and workforce across all sites
	 Planning and supporting the Trust's workforce to recruit and retain the workforce we need. This includes workforce planning across sites, which may mean rotation between sites in order that staff can broaden their skills and result in a "levelling up" of services without denuding existing high service standards.
	 Working with partners more effectively to reduce delayed transfers of care and better manage patients with multiple comorbidities.
	 The Birmingham Hospitals Alliance (BHA) will bring together the three acute and specialised providers in the Birmingham and Solihull STP (UHB, Birmingham Women's & Children's and the ROH) to work collaboratively on a range of clinical and non-clinical projects. This will involve the standardisation of care pathways and delivering economies of scale by consolidating services in areas such as back office services, procurement, communications and some HR and IT services.
	 Our three other strategic priorities are: research and development, non-clinical support services and emergency preparedness.
	This is a multi-year strategy that will be reviewed each year. The strategy will be translated into a plan and brought back to the Governors for review in the Spring of 2019.
	RESOLVED: to ACCEPT the report.
G18/62	Any other business
	No other business was raised.

Chair

Date