

ANNUAL PUBLIC MEETING

Thursday 10th September 2015
Shepherd Hall, South Wing, St Thomas' Hospital

MINUTES

1. Introduction

The Chairman of the Trust, Sir Hugh Taylor, welcomed around 275 members of the Trust to the 2015 Annual Public Meeting. The week of the APM marked the 75th anniversary of the first of many bombs to fall on both hospitals. Remarkably no patients had been killed in either hospital though ten members of staff and two fire fighters lost their lives and in respect the meeting held a period of silence and reflection at the beginning of its proceedings.

He also paid tribute to Sir Ron Kerr who would be standing down as Chief Executive on 1st October 2015 for his service to the Trust and to the NHS more widely. He introduced Amanda Pritchard who would be acting Chief Executive until a substantive appointment was made.

2. Review of 2014-15

The Chief Executive, Sir Ron Kerr, reviewed the work and achievements of the Trust over the past year during from which, despite feeling the stresses and strains common to the NHS, the Trust had emerged well.

Again, the Trust had treated well over 2 million people and the numbers continued to increase in both the hospitals and the local communities. Over 95% of 192,000 patients attending A&E were treated within four hours and demand for planned inpatient treatment went up by 8%. The Trust's Fit for the Future programme continues to work to improve quality, safety and efficiency; the Trust's hospital standardised mortality ratio remains one of the lowest in the NHS, there were only 4 MRSA cases last year and patient feedback about the quality of facilities – cleanliness and food – in the annual Patient Lead Assessments of the Care Environment was positive.

Financially the Trust delivered a surplus of £18.9mn before technical adjustments which will be used to invest in improvements to services and facilities whilst staff made over £64mn in efficiency savings during 2014-15.

The Trust's capital development plans are amongst the most ambitious in the NHS with work on both hospital sites and also within the community. Notably the Cancer Centre is due to open in 2016, the redevelopment of the emergency floor is under way and the amputee rehabilitation unit at Kennington has treated more than 200 patients since opening in 2013. Further afield the Trust has been taking its services to patients with the opening in 2014 of the new Lane Fox Remeo Centre at East Surrey Hospital in Redhill and the Cancer Centre and Kidney Treatment Centre in Sidcup will open next year.

King's Health Partners published a five year plan setting out how the partners are working towards excellence through the integration of world leading research, education and patient care and out of hospital care continues to be developed including through Southwark and Lambeth Integrated Care funded by the Guy's and St Thomas' Charity to work with social services, GPs and patients to deliver the right care for older people in the most appropriate care setting.

Plans for the future included integrating local services for adults and children, continuing to be a major emergency care centre at St Thomas' whilst co-locating specialist services alongside research and teaching and providing excellent care for patients.

3. Council of Governors' Report

The Lead Governor, John Porter, reminded the meeting that it was the responsibility of the governors to hold the non executive directors individually and collectively to account for the performance of the Board. He set out some of the actions taken to fill this remit which included attending the quarterly public board meetings, which were followed by the meetings of the Council of Governors. Twice a year the council discussed matters of concern with the Board in accountability sessions and members of the council attended the meetings of the main Board committees. Attendees at the Board committees then reported back to the working groups that the Council ran to contribute to the Trust's strategies, its patient experience and to develop the membership.

He acknowledged the work of the members of the Council both in the Trust and with stakeholder organisations and recognised the support offered by the Chairman, the Board and the Trust more widely to support the Governors to discharge their duties.

4. Change to the Trust Constitution

The Council of Governors had approved a change to the Trust Constitution earlier in the year to add electronic voting to the range of options open to members at council of governor elections. It was emphasised that this was in addition to other voting methods. The change had to be ratified by the Members in a general meeting and the Chairman put the following motion to the meeting:

"That the members of Guy's and St Thomas' NHS Foundation Trust approve the adoption of the election rules presented to the Annual Public Meeting held on 10 September 2015 such that they are incorporated at Annex 3 of the Trust's Constitution, replacing the rules previously included there."

The motion was carried.

5. Acute Older Person's Unit

The Clinical Lead for Ageing and Health, Dr Rebekah Schiff, set out the actions in place to improve emergency care for older people within an integrated care pathway across the community and hospitals. This acknowledged the need to provide care for elderly people either at home or closer to home and to try to avoid bringing them into hospital. Locality based geriatricians were working in partnership with GPs. The unit was designed to reduce the length of time spent in A&E by elderly patients and if possible remove the need for inpatient stays. A triage system with a community divert if possible had enabled about 90% of attendees to go home, some with enhanced support, which had freed up capacity in A&E and reduced pressure within the system.

The @Home service brought together multiple partners in the community to deliver care closer to home. It was actually available to anyone over the age of 18 and was a part of the Trust's admission avoidance policy. Access was through clinical referral which included the Trust and London Ambulance Service as the main sources. The service would be come 24/7 from December. The service included home visits from whatever team was necessary and was effectively a turnaround service to move patients to their next stage and interventions could last up to seven days. Many had more than one problem and an holistic service was offered. The turnaround times for tests were the same as those for A&E.

Again the main benefits related to freeing up resources in the hospitals and for the LAS as well as helping patients to maintain their independence in their own home.

6. #Hello my name is...

The Chief Nurse introduced a initiative inspired by a terminally ill cancer patient, Dr Kate Granger, who had been distressed that all through her treatment, clinicians had failed to introduce themselves and the care offered was more dispassionate than was appropriate or necessary.

The Ophthalmology Department in the Trust had worked with patients to design the badges now prevalent across the Trust with a yellow background and black block typeface.

Dr Granger maintained that "a friendly introduction is much more than common courtesy, it is about making a human connection, beginning a therapeutic relationship and building trust. " This campaign was about more than badges; it was an invitation to staff to introduce themselves to every patient they meet and to encourage others to do the same. Given the issues that have been raised in surveys and through the PALS contacts, and the need to address the perception held by patients, the Trust signed up to supporting the campaign as a very simple way of ensuring that all patients feel that they have a connection and trust staff to deliver the best possible care.

7. Questions

Questions from the floor covered a number of topics including the funding and equipping of the Cancer Centre, the training of dignity ambassadors as a part of the Trust's Showing we care programme, whether the services to elderly patients would be affected if the Bill on assisted dying passed into law, referrals in the community to the @Home service and two comments about the availability of historic health records and dignity in out patients.

Finally the Chairman thanked everybody for their involvement and participation and congratulated the Communications Team for the short film shown during the meeting "We're Listening" about response to patient comments.