

Council of Governors

**Public Minutes of the meeting held at 5.30pm on
Thursday 17 October 2013, in Public, at
Post Graduate Medical Centre, Leighton Hospital**

PRESENT

Mr John Moran	<i>in the chair</i>	
Mrs Barbara Beadle	Mr Donald Bone	Mrs Christine Cooper
Mrs Jenny Creed	Mr Kevin Dawson	Professor Neil Fowler
Mr Mike Hadfield	Mr Norman Harris	Dr Colin Hopkins
Mr John Lyons	Mr Jerry Park	Mrs Jane Smart

IN ATTENDANCE

Dame Pat Bacon	Non-Executive Director
Mr John Barnes	Non-Executive Director
Mrs Tracy Bullock	Chief Executive Officer
Mr Mike Davis	Non-Executive Director
Dr Paul Dodds	Medical Director & Deputy Chief Executive
Mr Dennis Dunn	Non-Executive Director
Mr David Hopewell	Non-Executive Director
Mr Mark Oldham	Director of Finance & Strategy
Mr David Pitt	Director of Service Transformation & Workforce
Mrs Julie Smith	Director of Nursing & Quality
Ms M Steele	Acting Trust Secretary

APOLOGIES FOR ABSENCE

Ms A Cunningham	Mr Paul Colman	Mr Nigel Dibben
Ms Gill Fairhurst	Cllr Dorothy Flude	Dr J Griffiths
Mr Harry Mawdsley	Cllr E Moore-Dutton	Mr Peter Nimmo
Mrs Gerry Phillips	Mr Andrew Ritchings	Mr Brian Walton
Mrs Heather Williams	Dr Andrew Wilson	

The Chairman opened the meeting and welcomed Professor Neil Fowler to the Council of Governors following his appointment, effective 1 September 2013. The Chairman advised Professor Fowler was an Appointed Governor representing Manchester Metropolitan University. The Chairman also welcomed Mr John Barnes, Non-Executive Director, to his first Council of Governors meeting following his appointment.

The Chairman noted there were no Members of the Trust or any public in attendance.

GOVERNORS' INTERESTS

No Governor declared, or has declared, any change to his/her interests since the previous meeting of the Council.

MINUTES OF THE LAST MEETING

After discussion, it was

Resolved to

- **To sign the minutes as an accurate record of the Meeting held on 25 July 2013 subject to noting**
 - Under Item *CoG13.85 Governor Visits to Wards* – Mrs Smart request the first sentence of the last paragraph be amended to read 'The Chairman noted his appreciation of the initiative shown by Mrs Williams and *Mrs Smart* to visit the wards and speak to the Volunteers' rather than Mrs Smith, as noted.

Amendment made to the public minutes of the July meeting

MATTERS ARISING FROM PREVIOUS MINUTES

None noted.

CHAIRMAN'S REPORT

COG13.86 Governor Nominations & Remuneration Committee Minutes – 3 October 2013

The Chairman presented the minutes noting the purpose of the meeting was to discuss the interim appraisals of the Chairman and Non-Executive Directors and the forthcoming expiry of tenures.

Mr Lyons advised the meeting had seen a very open and frank discussion regarding the appraisals with appropriate challenge put forward by those Governors attending.

Mr Lyons advised the interim appraisal of the Chair, completed by the Senior Independent Director, had been very comprehensive.

In the discussion that followed it was

Resolved

- **To note the minutes of 3 October 2013**

CoG13.87 Governor Appointments and Vacancies

The Chairman confirmed the appointment of Professor Neil Fowler as the Governor Representative from Manchester Metropolitan University.

The Chairman noted a vacancy in the Class of Qualified Nursing & Midwifery Staff within the Staff and Volunteers Constituency and noted the Trust were due to go to election in the coming weeks for this vacancy.

The Chairman noted the Governor vacancies in the Patient & Carers Constituency remained – Carer of a Patient aged 15 years or less and Carer of a Patient aged 16 years or more. The Chairman advised Ms Steele was working to increase the Membership in both these Classes which it was hoped would lead to additional interest in the vacant roles. The Chairman advised the Trust would not go to election for Governors within these Classes until early 2014. Mrs Smart advised she supported the proposal to delay going to election in an attempt to encourage interest in the vacancies, however, expressed concern that substantial effort would be required to increase the numbers significantly.

The Chairman noted the Trust continued with its review in relation to the appointment of a Governor for the voluntary sector.

CoG13.88 Committee Vacancies

The Chairman advised Mrs Smart had stood down from the Membership & Communications Committee and the Quality & Safety Improvement Strategy Committee leaving a Governor vacancy on each of these committees.

The Chairman advised that, following the last Council meeting, three Governors had expressed an interest in sitting on the Membership & Communications Committee.

The Chairman advised the Committee had agreed at the meeting of 14 October 2013 that all three Governors should be invited to sit on the Committee and the Terms of Reference amended to reflect this. The Chairman requested whether Council of Governors supported this approach wherein Governors agreed to the proposal.

The Chairman also noted the Governor vacancies on the Infrastructure Development Committee, the Workforce Assurance Committee and the Governor Nominations & Remuneration Committee.

The Chairman invited Governors to consider applying to sit on each Committee.

The Chairman advised Ms Steele would circulate details of the Quality & Safety Improvement Strategy Committee to include the Terms of Reference and date of future meetings and invite expressions of interest from Governors.

Professor Fowler noted his interest in becoming a Governor representative on one or more Committee and requested Ms Steele forward the appropriate information to him.

Resolved

- **To invite Mrs Barbara Beadle, Mr Paul Colman and Mrs Gerry Phillips to sit on the Membership & Communications Committee.**
- **To amend the Terms of Reference of the Committee to reflect the increased Committee Membership *MS***
- **To circulate the Terms of Reference for the Quality & Safety Improvement Committee and invite expressions of interest from Governors *MS***
- **To forward the details of Committees which require Governor representation to Professor Neil Fowler *MS***

CoG13.59 Stewardship Standard

The Chairman referred to the Stewardship Standard which had been presented to the Council of Governors at a previous Governor Development Session. The Chairman noted a group of Governors had subsequently met in July 2013 to consider the appropriateness of the Standard and the impact of this for the Trust's Council of Governors. The Chairman advised the group had agreed the Standards should be presented to the Council of Governors meeting of 17 October with the recommendation that it should be adopted subject to a number of minor amendments.

The Chairman referred to the paper circulated to Governors and noted that the Standard had been amended to include personalisation to Mid Cheshire Hospitals NHS Foundation Trust and to reflect current practice within the Trust. The Chairman noted the paper provided detail of how Council shall be able to evidence adherence to the Standard.

Mr Dawson requested clarification on the term 'comply or explain' wherein Mrs Bullock provided an explanation commenting that this follows the same principle in the Trust's dealings with Monitor.

Mrs Smart noted adoption of the Standard was on a voluntary basis and there was no legal requirement to adopt it. Mrs Smart noted the Standard provided Governors with a framework within which they could work.

In response to Mr Park's enquiry as to whether Governors individually had to comply with each piece of evidence detailed, the Chairman advised compliance was not on an individual basis but by Council as a whole. The Chairman noted the paper would be amended to reflect this. In the discussion that followed it was

Resolved

- **To adopt the Stewardship Standard**
- **To amend the paper to reflect the evidence is not Governor specific but representative of actions by Council as a whole MS**

CoG13.89 Mid Cheshire Hospitals NHS Foundation Trust Constitution

The Chairman referred to the email recently circulated by Ms Steele proposing the establishment of a Task & Finish Group comprising 6 Governors, a Non-Executive Director, Executive Director and Trust Secretary to review proposed amendments to the Trust's Constitution. The Chairman noted the proposed amendments reflected a review to incorporate legislative changes under the Health & Social Care Act 2012.

The Chairman noted four Governors had come forward to partake in the Task & Finish Group and in the absence of a further two Governors coming forward suggested the Group meet, with four Governors, as scheduled on 29 October 2013.

Resolved

- **To establish a Task and Finish Group on the above basis to review the proposed changes to Mid Cheshire Hospitals NHS foundation Trust Constitution**

CoG13.61 Annual Members Meeting – 1 October 2013

The Chairman referred to the recent Annual Members Meeting noting the varied format of same. The Chairman noted that feedback from the event had been positive but expressed his disappointment in the numbers attending the event. The Chairman asked Governors for their views on the meeting, which would be considered in the planning for next year's event.

Mr Park noted it is difficult to encourage people to attend Members' Meetings.

Both Mr Park and Mrs Cooper noted the venue had been appropriate particularly in relation to its location. Mrs Cooper suggested those attending had shown more interest in the displays and engaging with those staff present than attending the formal meeting.

Mr Lyons enquired as to whether timing was an issue and enquired as to whether an evening event might be more appropriate. Professor Fowler noted the difficulty in arranging an ideal time and suggested rotating the timing of the event (morning, afternoon and evening) over a number of years.

Professor Fowler noted he had found the content of the sessions very informative and valuable.

Mrs Smart suggested that the poor attendance may reflect that generally the local population were satisfied with the care provided by their local hospitals and did not have concerns therefore, did not feel it necessary to attend. Mrs Smart also thanked Mr Dawson for initiating the staff choir noting the performance had been great.

Mr Dawson noted the importance of information provided to Members and in particular Members being made aware of the benefit of membership. Mr Lyons suggested the majority of the public will only have an interest in the Trust should they have reason to utilise its services.

CoG13.62 Governor Planning ½ Day – 6 November 2013

The Chairman confirmed the Governor Planning ½ day was scheduled for the morning of 6 November 2013 at the Hunters Lodge in Crewe. The Chairman advised the event would start at 8.30am with a meeting of Governors and Non-Executive Directors.

Resolved

- **To note the Chairman's Report**

CoG13.90 LEAD GOVERNOR REPORT

Mr Lyons advised he had attended three Board of Director meetings since the last Council of Governors meeting and advised of no issues to be raised. Mr Lyons advised discussion at the Board meetings continued to reflect a balanced focus on both quality and financial performance. Mr Lyons provided detail of the Patient/Staff stories shown at the meetings.

Mr Lyons advised he had attended two Membership & Communications Committee meetings and a Governor Nominations & Remuneration Committee meeting.

Mr Lyons noted he had attended two Governor Strategy Committee meetings which had seen the Governors question the Chief Executive and other Directors present on various initiatives being taken forward.

Mr Lyons advised he shared the frustrations of the Chairman in relation to the Annual Members Meeting and in particular his disappointment in the number of persons attending the event.

The Chairman advised of the upcoming Public Engagement Event to be held at the Crewe Alexandra Stadium on Thursday, 24 October 2013. The Chairman noted a similar event had been held at Winsford Lifestyle Centre on 9 October 2013 and provided feedback from same. Mrs Bullock noted the event had been very positive with a number of positive comments received about the Trust.

Resolved

- **To note the Lead Governor's Report**

CoG13.60 Governor Development Session

Mrs Smart provided feedback from the Governor Development Session on Governor involvement with Members and the public. Mrs Smart noted Mrs Pickup, Patient Experience Manager, had attended the event detailing a number of methods as to how Governors could become involved. Mrs Smart advised generally uptake from Governors to get involved had been minimal. Mrs Smart advised Ms Steele had details of how Governors could become involved and asked Governors liaise with Ms Steele, after the meeting, in this regard.

Mrs Smart provided detail of the training programme including code of conduct. Mrs Smart noted that those Governors who had not yet completed the DBS (formerly CRB) process would

need to complete same prior to being permitted to liaise with patients, and go on the wards.

Mrs Smart noted the Governor Engagement Plan had been updated to reflect the Patient and Public Involvement opportunities.

Mr Dawson advised he had previously expressed an interest in attending the training and becoming involved in the programme, however, had received no response to date. Mrs Smart advised it was important there was momentum to the programme to ensure Governors become and remain involved. Ms Steele advised she would follow up with Mrs Pickup.

Mrs Smart noted Mrs Beadle had previously undergone the training and had attended on the wards asking survey questions of patients. Mrs Beadle provided feedback of her experience.

Resolved

- **To note the report**

CHIEF EXECUTIVE'S REPORT

CoG13.91 Confirmation of Quarter 1 Monitor Governance Rating

Mrs Bullock confirmed that the rating for quarter 1 was Amber Green.

CoG13.92 Quarter 2 Performance

Mrs Bullock referred to the performance targets and standards, circulated in the Briefing Pack, for Quarter 2 noting the Trust's provisional rating of Green.

Mrs Bullock noted Monitor, effective 1 October 2013, had replaced the Compliance Framework with the Risk Assurance Framework and advised the information provided to Governors at the next meeting would look slightly different. Mrs Bullock detailed a number of the differences in reporting between the Compliance Framework and the Risk Assurance Framework.

In relation to Mrs Smart's enquiry as to which specialities were the areas for concern in relation to the 18 week targets, Mrs Bullock provided detail of same.

Mrs Bullock advised of continuing pressures within the Emergency Department and noted the Trust was working with the Clinical Commissioning Groups to confirm winter plans. Mrs Bullock noted her concerns that the plans had not yet been finalised.

In response to Mr Park's enquiry as to what steps could be taken to escalate concerns regarding delays in finalising winter plans, Mrs Bullock advised that apart from when a major incident occurred there was no formal escalation process in place with the two Clinical Commissioning Groups. Dr Dodds advised he had recently attended a local health resilience meeting where it was noted that both South Cheshire and Vale Royal were outliers in terms of out of hours escalation and also, that the winter plan was still not finalised. In response to Mr Park's enquiry as to whether the Trust Board has accepted this position, Mrs Bullock advised the Board has had to accept the position although are disappointed with the position outlined. Mrs Bullock advised the Trust would continue to have discussions with North West Ambulance Service and other neighbouring Trusts in relation to serious operational pressures as they occur.

Mr Dunn confirmed the Board were aware of the situation and it remained a priority for the Board.

CoG13.93 Financial Position

Mrs Bullock advised of the Trust's current financial position noting that September had seen an improvement.

Mr Park enquired as to performance against the Cost Improvement Programme and enquired as to the effect of Vacancy Control on same. Mr Oldham provided a detailed explanation of same.

In response to Mr Hadfield's enquiry in relation to the Capital Programme and the potential for the Theatre & Critical Care Rebuild to overrun, Mrs Bullock advised it was not anticipated costs would over-run with the project currently on budget.

CoG13.94 Patient Experience, Quality & Safety Update - SHMI

Mrs Bullock referred to previous discussions in relation to the Trust's SHMI and also to the detail noted in her written report. Mrs Bullock noted it was important that Governors were provided with more detailed information and in this regard, Mrs Bullock advised Dr Dodds would provide a presentation under Agenda Item 12.

CoG13.95 Capital Projects Update

Mrs Bullock referred to the update in the briefing pack noting a number of the projects would be completed early next year.

CoG13.96 Housing Developments in Leighton

Mrs Bullock noted she had recently attended a meeting where Cllr. Flude had raised her concerns in relation to housing developments proposed/scheduled for Leighton and in particular her concerns regarding the impact of the developments on Leighton Hospital. Mrs Bullock advised the Trust do have regular discussions with the local planners and the Trust has raised concerns regarding the impact on activity levels at the Trust and the local infrastructure. However, Mrs Bullock noted the Trust have no direct control over the infrastructure and can only ask that any plans to not put additional pressures on the Trust.

Mrs Bullock advised Governors of the potential changes which included removal of the bus station from the site and to put the bus stops (with a pull in area) on Smithy Lane. Mrs Bullock suggested Governors may wish to make Members aware of the potential changes and advise they will be able to respond once the proposal goes to consultation. Mrs Bullock detailed the reason for the proposal. Mr Bone noted he was sympathetic to the initiative, however, expressed his concern that in a time when people were being encouraged to use public transport the bus station was being removed from site. Mrs Bullock reiterated the proposed change would go to Public Consultation and in this regard Members and public would be able to raise any concerns they had.

In response to Mr Hadfield's enquiry as to the impact of the developments on local NHS services, Mrs Bullock advised it was important that partners worked together to get the local health economy strategy right.

Mr Dunn noted that whilst the Trust empathised with the concerns raised, it was not the role of the Trust to consult on the changes. Mr Dunn suggested, however, it may be appropriate to model the implications of same.

In response to Mr Dawson's enquiry as to whether the Trust encouraged car sharing, Mrs Bullock advised the Trust had in place a Green Travel Policy which included car sharing.

CoG13.97 MCHFT Claims History

Mrs Bullock presented the report noting this had been requested by a Governor.

Mrs Smart noted that generally trends were improving, however, enquired as to the impact of bed pressures on the number of Clinical Negligence Claims received. Mrs Bullock advised it may have some impact and noted the importance of ensuring patients who are being discharged are given the appropriate advice and support.

Mrs Bullock noted that nationally the number of Clinical Negligence claims was increasing.

Mr Park referred to the information in relation to the number of claims settled in a specific year against one of the specialities, and enquired as to whether the pattern would be different if the year of incident rather than the year of settlement was shown. Mrs Bullock advised she did not perceive this would make a difference.

Mr Dunn noted the importance of organisation learning from claims made.

Mr Dunn also clarified that the Trust paid an annual premium to the NHS Litigation Authority and were subsequently indemnified against any claims costs. Mr Oldham provided detail of the NHS Litigation Authority scheme.

Mr Bone noted his concern at the increasing number of claims in a particular speciality wherein Mrs Bullock noted his concerns. Mrs Bullock advised the number of claims per speciality can change and can be dependent on the volume of activity.

In response to Mr Dawson's enquiry as to what would be a non-clinical claim, Mrs Bullock advised such claims were generally employment tribunals or public liability/employer claims.

Resolved

- **To note the Chief Executive's Report**

CoG13.98 QUALITY ACCOUNT 2013/14

Mrs Smith advised that last year Governors had chosen a local indicator for review by External Auditors, in line with previous guidance issued by Monitor. Mrs Smith advised that in subsequent guidance there was no requirement for a local indicator but the Board of Directors and Council of Governors had agreed to retain the local indicator.

Mrs Smith advised guidance had not yet been received for the 2013/14 Quality Account, however, following discussion at the Quality & Safety Improvement Strategy Committee it has been

agreed a local indicator should continue to be chosen and recommended the indicator should be 'Falls'.

In the discussion that followed it was

Resolved

- **To agree that 'Falls' is the local indicator is chosen.**

CoG13.99 SERVICE TRANSFORMATION

Mr Pitt provided a detailed presentation outlining aspects of his portfolio as Director of Service Transformation & Workforce and the importance of transformation within an organisation.

Mr Pitt also detailed the transformation priorities for the Trust.

In response to Mr Dawson's enquiry as to the subsequent effects on other departments following transformational change within another, Mr Pitt noted the transformational programme was also taking account of anticipated effects.

Mr Park enquired as to the planned position for the Trust at the end of 2014/15, in relation to transformation, wherein Mr Pitt advised he was to provide a scenario based position for January 2014 and advised he would be happy to share same with Governors at that time.

Mr Davis noted the existing Theatres & Critical Care rebuild project advising of the significant transformation proposed. Dr Hopkins expressed his concern regarding the expected efficiency gains wherein Mrs Bullock advised there were a substantial amount of opportunities in the new development and it was not about 'more for less' but more efficient ways of working, using the most up to date technology and utilising theatres most efficiently.

In response to Mr Hadfield's enquiry as to whether Mr Pitt's vision for transformation within the Trust conflicted with the existing Trust Strategy, Mr Pitt advised he was satisfied the transformation programme would work within the Trust's strategy.

CoG13.100 GOVERNOR DISCUSSION TOPIC

Keogh/Care Quality Commission Reviews

Mrs Smith advised she had been involved in the Keogh Reviews which had taken place in a number of Trusts in England. Mrs Smith noted the selection process for those Trusts which had

undergone a review and also provided a detailed explanation of the review process.

Mrs Smith also detailed the findings and the outcomes of the review. Mrs Smith advised of the actions taken by Mid Cheshire Hospitals NHS Foundation Trust in response to not only the Keogh Reviews but the Francis, Berwick and Cavendish Reports.

Mrs Smith advised she and Dr Dodds were to meet with a specific group of staff to ascertain what a Keogh style review would look like for Mid Cheshire Hospitals NHS Foundation Trust.

Mrs Smith also advised of the new inspection regime for the Care Quality Commission noting 18 Trusts were to be inspected in the first instance. Mrs Smith advised she had been invited to be part of the inspection team. Mrs Smith also advised that all Trusts would be subject to an inspection by the Care Quality Commission within the next 2 years.

SHMI

Dr Dodds provided a detailed presentation on Hospital Mortality Rates noting the difference in calculation between RAMI, HSMR and SHMI.

Dr Dodds noted the Trust's improvement in relation to RAMI whilst also detailing the Trust's current SHMI performance. Dr Dodds provided detail of actions the Trust proposed to take to improve mortality rates, noting same against the acronym REMEL:

- Reliable Clinical Care
- Effective Clinical Care
- Medical documentation, clinical coding and data quality
- End of Life Care
- Leadership.

Mr Bone enquired as to whether Governors could be assured there are sufficient staffing levels in place particularly at nights and on the weekends. Discussion followed wherein it was noted the importance of clinical engagement with mortality issues.

In response to Mr Hadfield's enquiry as to how coding affects mortality, Dr Dodds provided a detailed explanation noting the importance of accurately recording signs, symptoms and diagnosis when available. Dr Dodds noted, however, coding was secondary to 'R' (Reliable Clinical Care) and 'E' (Effective Clinical Care). Dr Dodds noted the links to the Keogh Report.

Dr Hopkins noted an inspection within the Trust by the Care Quality Commission in the previous week and enquired as to the reason for same. Mrs Smith advised this was a follow up visit following an initial visit in December 2012 and related to a minor concern raised in relation to Medicines Management. Mrs Smith advised a report from the Care Quality Commission was awaited in relation to the visit.

Professor Fowler noted the internal Keogh style review which was to be undertaken and enquired as to whether Governors would be engaged as part of the process. Mrs Smith agreed it was important Governors were involved in the process and this would be facilitated.

Dr Dodds also noted that information and discussion on mortality was discussed in detail at the QuEST Committee on which there is two Governor Representatives. Dr Dodds noted there were also Non-Executive Director and Clinical Commissioning Group representatives.

In response to Mr Dawson's enquiry as to whether local demographics affected mortality rates, Dr Dodds advised demographics were taken into consideration in the mathematical calculations.

Mr Lyons enquired as to what information could be given by Governors to queries or questions raised by Members, Dr Dodds advised it was important the Trust and Governors were open and advise the Trust does recognise the issues with mortality rates with actions being taken to improve.

Mrs Smith noted that the Keogh Reviews whilst triggered by mortality rates were a focus on quality generally.

In response to Mr Hadfield's enquiry as to whether there would be one system going forward, Dr Dodds advised this would not be the case.

REPORTS FROM COUNCIL OF GOVERNORS' COMMITTEES

CoG13.101 Membership & Communications Committee – 8 July, 12 August and 9 September

The minutes were presented.

The Chairman noted Mrs Smart had stood down from the Committee and thanked her for her commitment to the Committee particularly in her role as Chair.

Resolved

- **To note the minutes of 15 April and 13 May 2013**

CoG13.102 Governor Strategy Committee – 5 August 2013

The minutes were presented.

Dr Hopkins referred to the Clinical Services Strategy event which was being held the following day (18 October 2013) and enquired as to whether there were any Governor representatives attending. In the discussion that followed it appeared Governors had not been invited. The Chairman enquired as to whether any Governors would be available to attend, wherein Mrs Smart advised she would be able attend.

Resolved

- **To note the minutes of 5 August 2013**

REPORTS FROM COMMITTEES WITH GOVERNOR REPRESENTATIVES

CoG13.103 Infrastructure Development Committee – 8 July and 9 September 2013

The summary report was presented. No further comments or questions were raised.

- **To note the report of the meeting of 8 July and 9 September 2013**

CoG13.104 Strategic Integrated Governance Committee – 8 July, 12 August and 9 September 2013

The summary report was presented.

Mrs Smart enquired as to whether the Trust had in place a Self-Medication Policy. Mrs Smith advised there was a Self-Medication Policy in place however, it was in the initial stages and currently focused on the use of lotions and inhalers.

Resolved

- **To note the summary report of 8 July, 12 August and 9 September 2013**

CoG13.105 QuEst Committee – 11 July 2013

The summary report was presented.

Professor Fowler enquired as to the statement made under 'Safety' wherein it was noted the Trust was not meeting any of the patient safety indicators. Dr Dodds noted the reference was to stretch targets set under the Quality Improvement Strategy.

Resolved

- **To note the summary report of 11 July 2013**

CoG13.106 Patient Experience Committee – 18 July 2013

The summary report was presented and no further comments or questions were raised.

Resolved

- **To note the minutes of 18 July 2013**

CoG13.107 Workforce Assurance Committee – 22 August 2013

The summary report was presented and no further comments or questions were raised.

Resolved

- **To note the minutes of 22 August 2013**

ANY OTHER BUSINESS

CoG13.108 North West Governor Forum

Ms Steele advised a North West Governor Forum Event had been scheduled for Tuesday, 26 November 2013 at the Countess of Chester Foundation Trust Hospital. Ms Steele advised the Trust had been allocated two places at the event and she would circulate further information to Governors in relation to the agenda and timings as it became available.

CoG13.109 Parliamentary Review

Mrs Bullock referred to the Parliamentary Review publication which had been circulated to Governors noting Mid Cheshire Hospitals NHS Foundation Trust was featured in same.

CoG13.110 Cancelled Outpatient Appointments

Mrs Smart enquired as to what work was being undertaken to improve the situation in relation to cancelled outpatient appointments. Mr Oldham advised there was ongoing work in progress and it was noted a Project Initiation Document in relation to Outpatients was to be presented to at the Clinical Services Strategy event the following day (Friday, 18 October 2013). Dr Dodds noted one of the key areas of concern had been Ophthalmology and advised the backlog of appointments had now been cleared so going forward, this should not be an issue.

The Chairman closed the public meeting.

TIME, DATE AND PLACE OF NEXT MEETING

Thursday, 30 January 2014 @ 5.30pm, Lecture Theatre, Post Graduate
Medical Centre