

Board of Directors

Public Minutes of the Meeting held at 09:30 hours on Monday 7 March 2011 In the Boardroom, Leighton Hospital, Crewe

PRESENT

Mr J Moran		Chairman <i>in the Chair</i>
Mrs R Alcock		Director of Workforce and Organisational Development
Mrs T Bullock	*TB	Chief Executive
Mr M Chandler		Non-Executive Director
Mr W D Craig		Non-Executive Director
Dr P A Dodds		Deputy Chief Executive and Medical Director
Mrs D Frodsham	*DF	Director of Performance and Service Planning
Mrs V Godfrey		Non-Executive Director
Mr D Hopewell		Non-Executive Director
Mr M Oldham		Director of Finance & Strategic Planning
Dr A H Wood		Non-Executive Director

IN ATTENDANCE

Ms T Ames	Lead Governor
Mrs C Ralphs	PA to Director of Finance & Strategic Planning and Director of Nursing & Quality

APOLOGIES

Mr D Dunn	Non-Executive Director
Mrs J Smith	Director of Nursing & Quality
Ms M Steele	Acting Trust Secretary

*denotes action deriving from **resolutions** below.

DIRECTORS' INTERESTS

No Director declared, or had declared, any change to her / his interests since the Board of Directors' previous meeting.

MINUTES OF THE LAST MEETING

After discussion, it was

Resolved

- To sign the minutes as an accurate record of Part I of the Board meeting held on Monday 7 February 2011
- To sign the minutes as an accurate record of Part II of the Board meeting held on Monday 7 February 2011

ACTIONS ARISING FROM PREVIOUS MINUTES, NOT INCLUDED ELSEWHERE ON THE AGENDA

There were no actions arising.

CHAIRMAN'S ANNOUNCEMENTS

11.02.5.4

Meeting with Chair of Central & Eastern Cheshire PCT

The Chairman advised he had met with the Chair of the PCT, Mrs Kathy Cowell. Mrs Cowell conveyed through the Chairman the appreciation of the work the Trust provided regarding their financial negotiations, stating the Trust were instrumental in assisting the PCT in their final outcome situation.

Mrs Bullock confirmed there were to be five clusters; Cumbria, Greater Manchester, Pan Lancashire, Mersey and Cheshire. Mrs Bullock advised the positions of Chief Executives and Chairs were out to recruitment, noting the filled positions may be by agreement rather than by appointment. If the positions were confirmed by agreement rather than formal appointment, these positions would be known by the end of March.

11.02.5.2

Meeting with the Chair of CWAC Link

The Chairman advised he and Mrs Godfrey had met with Ms Nora Dolphin, Chair CWAC Link. The local community groups were exploring ways to open beds at VIN. The Chairman stated that to have fully established intermediate care beds at VIN would cost approximately £6M and the Trust do not have the capital to fund this. The groups acknowledged this was a health economy issue.

Mrs Godfrey noted that Link were hosting a public meeting regarding GP Commissioning and the issue of intermediate beds would be raised. Mrs Bullock advised she was to meet with Simon Whitehouse, Commissioning Manager and she would update him on discussions to date.

11.03.5.1

Publication Scheme

The Chairman advised the Publication Scheme was now available which includes redacted minutes. The Chairman noted a review of the content of the website was to be completed to ensure sufficient, up to date, public information is available.

11.03.5.2

FTNNW Meeting

The Chairman noted the FTNNW meetings were to continue. He advised the meetings were useful to obtain general views from other Trusts regarding schemes like MARS. The Chairman reported other Trusts had seen increases in medically fit for discharge patients.

Resolved

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

GOVERNORS' ITEMS

10.12.6.2

Governor Elections

The Chairman advised the voting packs had been issued and elections were due to conclude on 18 March 2011 with the results

announced on 21 March 2011. The Chairman noted a number of constituencies had been uncontested and the candidates advised of their successful nomination. The Chairman advised a full list of elected and appointed Governors would be known by the end of March 2011.

11.01.6.1 Governor Induction

It was noted an induction day for Governors had been arranged for Tuesday 5 April 2011. Ms Steele is also producing an Induction Handbook for distribution to Governors.

11.03.6.1 Governor Appraisal

The Chair advised the Governor Self Appraisal 2010/11 had been issued to Governors together with a Board Effectiveness questionnaire. Responses were awaited from Governors and responses would be collated and reported back to the Board of Directors and Council of Governors.

Mrs Bullock advised consideration was being given to the Board Effectiveness review being completed by staff and to how we would ensure sufficient returns are completed from wide cross section.

Mrs Bullock advised that the review to be completed by Board Members was to be issued in the coming days.

11.03.6.2 Council of Governors' Meeting – 14 April 2011

The Chairman advised the next Council of Governors' Meeting was to be held on 14 April 2011, with the agenda setting meeting scheduled for 8 March 2011. The Chairman noted it had been suggested to use a workshop setting to establish the progress and achievement of the previous 3 years and consider areas of future development.

Resolved

- **To note the Report**

CHIEF EXECUTIVE'S REPORT

11.03.7.1 Quarter 3 Teleconference Review with Monitor

Mrs Bullock advised of the teleconference she, Mr Oldham and Mrs Frodsham had with Monitor to discuss Quarter 3 Performance. Mrs Bullock advised Mr Steve Murray was introduced as the newly appointed Compliance Manager responsible for the Trust. The discussion covered a number of areas and highlighted that Monitor's biggest concern was in respect of pay costs, with a detailed discussion taking place around the PCT contract.

Mrs Bullock advised discussion also took place regarding the CQC Responsive Review, Thrombolysis performance and the introduction of Primary PCI and also in relation to the type and amount of Complaints information reviewed by the Board of Directors, also noting that Monitor were content with the response to this.

10.08.7.4

Healthcare Groups

Mrs Bullock advised a facilitated session had been held on 31 January 2011 to discuss progression with the Healthcare Group (HCG) model. Following that event Mrs Bullock advised she had sent a letter to Mr C Burke, *CEO Stockport* and Mr John Wilbraham, *CEO East Cheshire Hospital Trust* to which responses had been received noting that a HCG for clinical services may not be possible due to geography but that Clinical Support Services and Back Office functions would still be considered.

10.10.7.1

Vascular Service

Mrs Frodsham provided the background to a recent Public Consultation event of the Cheshire and Merseyside Vascular Services Review she had attended. Mrs Frodsham highlighted the majority of services will be provided at the Trust but approximately 90 procedures presently performed at the Trust would in future be performed at a specialist centre. Mrs Frodsham advised of the short and long term implications of proposed surgical centres within Cheshire and Merseyside and highlighted the opportunities, risks and concerns.

Mrs Bullock advised she and the Chairman will be attending a meeting with the Chairman and Chief Executive of UHNS this month to explore further collaborations.

11.03.7.2

GP Consortia

Mrs Bullock advised Dr Dodds had met with Consortia Chairs and the Terms of Reference had been revised. Going forward future meetings will include Dr Dodds, Mrs Bullock, Mr Simon Whitehouse, *Chief Officer for South & Vale Royal GP Commissioning Consortia* and Chairs of the Consortia.

11.03.7.3

Quarterly meeting with Care Quality Commission

Mrs Bullock advised of her recent meeting with the CQC noting the items raised, in particular after care and the impact of community provision and nursing home admissions.

Mrs Bullock provided an update on the action plans following the Responsive Review and noted the CQC were satisfied that progress was on track. Mrs Bullock also noted there was an extensive discussion around the Quality Risk Profile and was pleased to note that the information therein had raised no concerns for the CQC in respect of MCHFT.

Mrs Bullock advised future quarterly meetings would be with Mrs Smith and a member of the Integrated Governance team, whilst Mrs Bullock will meet the Lead of CQC every 6 months.

11.03.7.4

Feedback NHSNW CEO Forum

Mrs Bullock provided detail of the recent meeting she attended noting discussion took place regarding contract discussions and engagement of GP Consortia, the Mid Staffs inquiry noting a reminder was given to all to ensure quality of care was maintained during transition. An update was provided in respect of the new

cluster arrangements.

Mrs Bullock advised discussion also took place regarding those Trusts in the Foundation Trust Pipeline.

11.03.7.5 Acting Trust Secretary arrangements

Mrs Bullock advised Ms Nikki Phillips had been appointed Executive Assistant to cover Ms Steele's maternity leave. Ms Phillips is to commence three weeks prior to Ms Steele finishing to give an appropriate handover time.

In response to the enquiry regarding Ms Steele's progress to qualify as Trust Secretary, Mrs Alcock noted a probable 2 year timescale for Ms Steele to gain her qualification to become Trust Secretary.

11.03.7.6 Major Trauma Service

Mrs Bullock presented a briefing paper in relation to the provision of Major Trauma within the North West noting the NHS Northwest is unique in respect of its size and geography. Mrs Bullock noted that the "gold standard" of one Major Trauma Centre (MTC) per region, would not be possible. Therefore, 3 separate systems were formed, Cumbria & Lancashire, Greater Manchester and Cheshire & Merseyside. [Section removed under S43 of the Freedom of Information Act] The Chairman enquired as to the current pathway whereby Mrs Bullock advised it was dependent upon injury but the majority currently go to UHNS.

In response to Mr Chandler's enquiry, Mrs Frodsham advised the Trauma Service had been included in the Clinical Services Strategy.

Mrs Bullock advised the Trust has submitted its intention to be a nominated Trauma Unit (TU) and has completed the self assessment checklist. Also, noting that MCHFT major trauma outcomes and submissions to TARN compared very favourably within the region.

Resolved

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

MEDICAL DIRECTOR'S REPORT

11.03.8.1 Serious Untoward Incidents and RIDDOR Events

Dr Dodds advised there was one Serious Untoward Incident for the period and he provided brief detail of the incident.

Dr Dodds advised there were three RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences) reportable incidents.

11.02.14.1 Visits of Accreditation, Inspection or Investigation

Dr Dodds referred to the minutes of the last meeting whereby it was recorded that the routine visit by the Human Tissue Authority (HTA) had noted no major concerns in their verbal feedback. Dr Dodds advised there were two major concerns highlighted in the draft

written feedback that were inter-related. Dr Dodds advised the HTA felt some reporting mechanisms were not as robust as they could be. . The HTA recognised that because of Dr Dodds' senior position it was difficult for him to meet with the Pathology Department. Dr Dodds felt this should not be classed as a major concern and would correspond to the Human Tissue Authority stating this.

In response to the Chairman's query as to the action taken by the Trust, Dr Dodds advised in response to the issues raised action plans had now been put in place. Dr Dodds enquired as to whether it was appropriate that he was the designated person for the Trust.

11.03.8.2

Acute & Unspecified Renal Failure Mortality Alert

Dr Dodds advised he had received a letter from the Care Quality Commission who advised they are happy with the audit results and actions taken by the Trust as a result of the alert. Dr Dodds advised the CQC had requested the names of the nursing homes where patients had been admitted inappropriately. Dr Dodds confirmed the Alert had now been closed.

Resolved

- **To note the Medical Director's report**

QUALITY, SAFETY & PATIENT EXPERIENCE

11.03.9.1

DSSA Declaration of Compliance

Mrs Bullock advised Trust Boards are required to declare and publish their compliance on Delivering Same Sex Accommodation (DSSA). The briefing paper explains the new definitions and highlights to the Board the Trust "hotspots". It was noted the "hotspots" would be compliant by the end of March 2011 except Clinical Decisions Unit (CDU). Detailed discussion took place regarding the issues within CDU and the potential options were discussed.

Mrs Bullock re-iterated CDU would not be compliant by 1 April 2011. Mrs Bullock advised discussions have taken place with Estates & Facilities Department regarding the priority of the project.

In response to Mrs Bullock's request as to whether the Trust should declare itself compliant or not, particularly in light of CDU, discussion took place as regards the Trust's position. It was agreed to declare non-compliant however, at this time the date of compliance of CDU was not yet known.

Mr Chandler asked for it to be recorded that the Trust was compliant with DSSA guidance until it was changed in December 2010 and that it should be noted that Trusts had not been given sufficient time to do the necessary estates works to enable a declaration of compliance by March 2011.

Resolved

- **To make a declaration of non compliance in respect of DSSA TB**

- **To escalate estates works to enable CDU compliance TB**

11.03.9.2

DSSA Annual Report

Mrs Bullock presented the DSSA Annual Report and outlined to the Board what had been done in the past 12 months in relation to delivery same sex accommodation, covering four main areas :

- Patient Experience
- Estates
- Systems and Processes
- Staff Culture

The report gives a flavour of the work undertaken to achieve compliance and the action plans in place to ensure this progressed as planned.

In response to Dr Wood's enquiry as to whether breaches could be included in the Performance Report, Mrs Frodsham advised the same would be included going forward.

Resolved

- **To note the report**

11.03.9.3

Matrons Report

Mrs Bullock presented the 6th formal report from matrons in relation to cleanliness and infection control. It was noted that while credits for cleaning scores were good, an insufficient number of areas were being audited and that going forward more areas were to be included. Mrs Bullock noted a business case had previously been approved to support the recruitment of a rapid response cleaning team. It was noted the new Facilities Manager is working closely with Matrons to ensure the best use of cleaning staff.

In response to Dr Wood's enquiry re the Future Plans outlined in the report, Mrs Bullock advised the Board should support the recommendations noted and agreed to feed this back to the Matrons, along with the Board's thanks to those concerned for the information.

Mr Craig requested the next report gave a review of the recommendations and progress made.

Resolved

- **To approve the report**
- **To feedback Board support to the Matrons and request review of recommendations and progress made in their next report TB**

11.03.9.4

Section 1 of the Performance Report – Patient Quality Safety & Experience

The Chairman noted Section 1 of the Performance Report – Patient Quality Safety and Experience would be discussed under Quality, Safety & Patient Experience going forward.

Mrs Bullock noted the number of new complaints per division, although there was no increase in overall number there was a rise in the number associated with the Emergency Care Division. The risk rating of complaints was also noted, whilst Mrs Bullock advised no complaints had been referred to the PCT, Ombudsman or Monitor.

Although, information was presented up to the end of January, Mrs Bullock advised of a significant number of complaints for February and that many were in relation to cancelled appointments, however that the detail would be discussed at the April 2011 Board of Directors. Mrs Bullock also noted she would liaise with Mrs Smith and the Complaints Review Panel to consider specific trends regarding these complaints. It was suggested that should any reoccurring trends be identified that the same be reported to Monitor for transparency purposes.

Mrs Bullock advised of the complaints closed in January 2011 and discussion took place regarding a specific complaint noted. Mrs Bullock suggested that, in the future, the Ward Manager / Matron could attend the Complaints Review Panel to answer concerns raised on specific complaints.

Mrs Bullock provided a summary of legal service & PALS reports for January 2011. Mrs Bullock noted the Patient Experience report providing detail of the surveys carried out and posts on NHS Choices.

The Chairman requested a discussion take place at Board Awayday regarding Trust services and marketing of same.

Mrs Bullock provided detail on the care indicators advising Advancing Quality data will no longer be reported directly to the Board - same will be presented at QuEst and raised by exception. The Chairman raised concerns regarding February scores wherein Mrs Bullock advised of the reasons for same. Mrs Bullock noted Ms E Kanwar, *Quality & Clinical Outcomes Project Manager* had presented at a recent Executive meeting to highlight areas of concern and advised financial opportunities regarding compliance.

Mrs Bullock also referred to the Serious Incidents SPC chart and noted the inclusion of a SU1 as reported previously by Dr P Dodds. Mrs Bullock noted crude deaths had increased and when risk adjusted this had not materially affected the overall RAMI. Mrs Bullock noted the Trust were still on track to achieve a reduction in HSMR of 10 points by the end of March 2011. Noting particularly that this was achieved by October 2010 and now needed to be sustained to March 2011 and that the Trust was looking to continue to improve performance further.

Resolved

- **To note the report**
- **To discuss at future Board Away Day, Trust Services**

11.03.9.5 Liver Disease, Alcohol Related Mortality Outlier Alert Report

Dr Dodds presented the report, noting the reasons for the review. Dr Dodds advised of the results and conclusion of the review noting in particular the consideration of a care pathway and action plan. Dr Dodds advised a response had been submitted to the Care Quality Commission.

Resolved

- **To note the report**

11.03.9.6 Strategic Integrated Governance Committee – Minutes of 14 February 2011

Dr Dodds presented the minutes noting one item to be raised to the Board of Directors regarding Ligature Points. [Section removed under S40 of the Freedom of Information Act] Dr Dodds noted a risk assessment was to be completed and discussed at Executive Management Board. Dr Dodds advised further information would be reported to the Board through the Strategic Integrated Governance Committee.

Resolved

- **To note the minutes of 14 February 2011**

11.03.9.7 QuEst Committee – Minutes 20 January 2011

Mrs Bullock presented the minutes and advised there were no items for escalation to the Board of Directors. However, Mrs Bullock advised the pre-op indicator for non-elective length of stay as mentioned in the Better Care Better Value document was no longer reported by the NHS institute for Innovation and Improvement.

Resolved

- **To note the minutes of 20 January 2011**

OPERATIONAL DELIVERY

11.03.10.1 Short Stay Ward

Mrs Frodsham advised Mr Ennis had initially led on this project and noted the work completed by him. Mrs Frodsham noted a paper had been presented originally to Executive Management Board (EMB) wherein it was agreed further options should be considered. Mrs Frodsham noted considerations including the implications of Single Sex Accommodation on Emergency Admissions Unit (EAU), length of stay, staffing requirements and the Trust's current footprint will all influence / impact on the decision. Mrs Frodsham advised Dr Hammersley is working on a care pathway model of patients going through a short stay ward and advised the Division had been required to develop plans in terms of estate, a front of house acute medical unit and ambulance links with diagnostics.

Mrs Frodsham noted a paper was to be brought back to EMB and once a robust plan had been approved, it would be brought back to

Board of Directors for consideration.

Resolved:

- **To note the report**
- **To receive a further paper on Short Stay Ward once a robust plan in place DF**

11.03.10.2 Performance Report

Finance

Mrs Alcock advised of a financial surplus to the end of January noting very little movement on the December position. Mrs Alcock advised contract income had improved in month with an under performance on elective as a result of cancelled operations.

Mrs Alcock noted there had been an increase in referrals in January for GP / other and was back to previous year's level.

Mrs Alcock noted a worsening in pay costs in month. Mrs Alcock advised nursing costs continued to be high with extra activity on medical wards over January.

Mrs Alcock advised non pay costs had improved significantly over the December position, partly as a result of stocking up in December and also because less elective activity took place.

In relation to the Cost Improvement Programme, Mrs Alcock noted the overall forecast CIP is on track with slippage offset by income gains.

Mrs Alcock noted the cash balance at the end of January.

Mrs Alcock also advised the Capital Programme was on track.

System Delivery Focus

Mrs Alcock advised of the activity for the month making the Board aware of potential pressures relating to waiting times for the new performance year due to the cancellation of elective work earlier in the year. Mrs Alcock advised also of the financial pressure in respect of not doing waiting lists initiatives, noting discussion to take place with the Executive Directors and Executive Management Board on how to take forward in the new performance year.

Workforce Focus

Mrs Alcock noted the mandatory training rates, appraisal, retention and attendance rates for the month.

Resolved

- **To note the Performance Report**

11.03.10.3 New National Targets and Standards

Mrs Frodsham gave a presentation on Targets and Standards for 2011/12 noting Monitor's Compliance Framework and the Operating

Framework. Mrs Frodsham advised of the detail relating to Safety, A&E, Referral to Treatment, Cancer and Stroke.

Mrs Frodsham also noted a number of other changes including the removal of a number of standards in respect of the Care Quality Commission compliance.

Mrs Frodsham gave a summary of Governance indicators and noted the risks for the Trust.

Resolved

- **To note the report**

11.03.10.4

Performance & Finance Committee

Minutes of 4 February 2011

Mr Oldham presented the minutes of 4 February 2011 noting the issues to be escalated to Board had been raised at the Board of Directors meeting of 7 February 2011.

Verbal update – Meeting of 4 March 2011

Mr Oldham provided a verbal update of the meeting held on 4 March 2011 noting discussion had taken place on contract negotiations, bank and agency and cost improvement plans. Mr Oldham noted the operational workforce matrix measured against workforce target had been agreed.

Mr Oldham highlighted to the Board two possible permanent injury cases and advised a provision had been made for this.

Resolved

- **To note the minutes of 4 February 2011**

FINANCE REPORT

11.03.11.1

Interim Budget 2011/12

Mr Oldham gave a presentation on the financial position for 2011/12 noting same was an interim paper and would be subject to change. Mr Oldham noted a further paper would be brought to the Board of Directors in April.

Mr Oldham noted the PCT's current financial standing and the Trust's interim Income & Expenditure position for 2011/12.

Mr Oldham noted anticipated inflationary pressures and the assumptions made in the calculation of contract income. Mr Oldham noted the Divisional cost improvement plans and the pressures for 2010/11. Mr Oldham advised of potential investment bids.

Mr Oldham provided an update on the current contract discussions and noted the SHA had requested the contract to be signed by 31 March 2011.

Discussion took place regarding the Trust Strategy.

Resolved

- **To note the paper**

11.03.11.2 Audit Committee – Minutes of 14 February 2011

Mr Oldham presented the minutes of 14 February 2011 noting in particular the item to be raised to the Board of Directors regarding Segmental Reporting. It was confirmed the Trust is to produce one set of Accounts as it operates in one segment – Healthcare.

Mr Oldham noted a presentation on the Bribery Act had also been received and discussion had taken place regarding the appropriateness of other senior staff to complete Declaration of Interests forms.

Resolved

- **To note the minutes of the 14 February 2011**

11.03.12 LEGAL ADVICE

Mrs Bullock advised no new requests for legal advice had been made within the period.

Resolved

- **To approve the report**

11.03.13 VISITS OF ACCREDITATION, INSPECTION OR INVESTIGATION

NHS North West Cervical Screening Quality Assurance Visit

Mrs Bullock advised of the NHS North West Cervical Screening Quality Assurance visit, noting the recommendations of the previous visit in 2008 had been implemented. Mrs Bullock noted one area of concern raised regarding the use of the Trust's IT system.

Human Tissue Authority Visit to ECT

Mrs Bullock noted concerns were raised regarding the Designated Individual (DI). Mrs Bullock advised correspondence may be received from Mr John Wilbraham, *CEO East Cheshire Hospitals Trust* in relation to the DI on that site, to which the Trust will respond.

NHS North West Business Continuity Review

Dr Dodds advised all Trust business continuity plans are now in place and the Trust was assessed against the NHS standard, scoring 92%. Dr Dodds advised West Cheshire PCT would be reporting the Trust as "green" expressing their confidence that the Trust would be able to manage a business continuity disruption.

MHRA

Mrs Frodsham advised the MHRA had visited the Blood Transfusion Service at East Cheshire Trust and raised no major concerns..

Resolved

- **To note the report**

11.03.14

BOARD ACTIONS

After discussion, it was

Resolved

- **To approve the revised schedule of Board of Directors' actions, subject to including amendments to the schedule to be presented to the Board meeting on Monday 4 April 2011** *MS*

ANY OTHER BUSINESS

11.03.15.1

Launch of Charitable Fund

Mrs Frodsham advised the first scoping meeting for the launch of the charitable fund had been held on Friday with Mrs Godfrey, Mr Hopewell and Mrs Smith in attendance. The first part of the meeting discussed governance arrangements and it was agreed a draft proposal be provided to Mrs Bullock and the Chairman for consideration. It was proposed to reconfigure the Trustees and a paper to be written to share at the next meeting of the Trustees of the Mid Cheshire Hospitals NHS Foundation Trust Charitable Fund.

Regarding the Neonatal bid, Mrs Frodsham informed the Board that the primary objective was to get the Fund Co-ordinator in post and the job description was being banded and sent to advert as soon as possible. This was a positive first meeting and another meeting had been scheduled for mid April.

Resolved

- **To draft a proposal regarding the governance arrangements for consideration to include the reconfiguration of Trustees, to share at the next Trustees meeting** *DF*

11.03.15.2

Celebration of Achievement

Mrs Alcock reminded the Board of the Celebration of Achievement evening to be held on Thursday 17 March 2011 at Nantwich Civic Hall and all Board members were invited to attend.

11.03.15.3

Lead Governor

The Chairman informed the Board that this was Ms Tracey Ames last Board meeting as Lead Governor and, on behalf of the Board, gave thanks to Ms Ames for her support and co-operation as Lead

Governor. Mrs Bullock echoed this appreciation and thanked Ms Ames for her invaluable contribution.

Mrs Ames stated if she was unable to attend the April Council of Governor's meeting, she would submit a written report.

TIME, DATE AND PLACE OF FORTHCOMING MEETINGS

09:30 hours Monday 4 April 2011 in the Board Room at Leighton Hospital, Crewe

Signed

Chairman

Date