**Minutes  
Community Engagement Event**

**Solent NHS Trust Annual General Meeting**

**Monday 16th September 2019**

**Eagle Suites, Solent NHS Trust Headquarters, Highpoint Venue, Bursledon Rd, Southampton, SO19 8BR**

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| **Chair: Catherine Mason,** Chairperson (CM) | | |
| **Board members**  **Sue Harriman,** Chief Executive (SH)  **Andrew Strevens,** Director of Finance (AS)  **Jackie Ardley,** Chief Nurse (JA)  **David Noyes**, Chief Operating Officer- Southampton & County Wide Services (DN)  **Sarah Austin**, Chief Operating Officer- Portsmouth (SA)  **Dan Meron**, Chief Medical Officer (DM)  **Mick Tutt**, Non-Executive Director (MT)  **Mike Watts**, Non-Executive Director (MW)  **Stephanie Elsy**, Non-Executive Director (SE)  **Jon Pittam**, Non-Executive Director (JPi)  **Apologies:**  **Helen Ives**, Chief People Officer (HI) | | **Attendees / table hosts**  **Rachel Cheal**, Associate Director Corporate Affairs & Company Secretary (RC)  **Stephanie Clark**, Head of Quality Professions- Children & Family Services (SC)  **Suzannah Rosenberg**, Deputy Chief Operating Officer- Portsmouth (SR)  **Jo Pinhorne**, Head of Quality Professions- Adults Southampton (JP)  **Gordon Fowler**, Associate Director Finance (GF)  **Cathy Price**, Clinical Director Primary Care (CP)  **Sharon McCann**, Head of Quality Professions Adults Portsmouth  **Sarah Balchin,** Associate Director Patient Experience (SB)  **Roger Batterbury**, Health watch (RB)  **Jayne Jenney**, Corporate Support Manager and Assistant Company Secretary  **Emma Palmer**, Corporate Support Administrator  **Sam Stirling**, Corporate Affairs Administrator |
| **1** | **Chairman’s Welcome and introduction to the Annual General Meeting** | |
| 1.1 | The Chair person, Catherine Mason (CM) welcomed members of the Trust, public, partner organisations and staff to Solent NHS Trust’s 8th Annual General Meeting.  CM explained the format of the meeting and explained support available on each table. CM thanked the choir for their performance. | |
| 1.2 | CM informed the AGM that Social Media channels were to be used and also asked that anyone who had objections to having their photo taken let the Head of Communications know. | |
| **2** | **Draft minutes of the meeting of Solent NHS Trust Annual General Meeting held on 10th September 2018 and matters arising** | |
| 2.1 | It was confirmed that all Board Declarations of Interest had been updated and are available on request from the Company Secretary. | |
| 2.2 | The minutes of the 2018 meeting were agreed as an accurate record of the discussions held. | |
| 2.3 | CM credited Dr Alistair Stokes for his efforts over the years and shared her pride at Solent’s performance. No matters arising were raised. CM informed the AGM that copies of the annual report are available on the website however highlighted that a small number of printed copies were also available at the meeting on request. | |
| **3** | **Review of the Year 2018/19 – A presentation of the annual report and accounts** | |
| 3.1 | SH presented a review of 2018/19.   * SH welcomed all attendees to the meeting and commented on being proud to be part of the Trust as well as being proud of the staff, service users and partnership organisations. * SH reflected on the positivity and challenges from the previous year and highlighted the suitability of the Trust’s strategy for the year ahead. * The importance of the Trust’s ‘HEART’ values were emphasised and SH commented on how these are embedded within the organisation. * SH shared achievements of the year and reviewed the priorities for 18/19. * The AGM were briefed on the ‘3 greats- Great Care, Great Place to Work and Great Value for Money’. * An overview of CQC visits were shared and SH commented on strong engagement from staff. Positive CQC results were confirmed and SH highlighted the on-going improvement journey and learning. * Significant improvements to results of the ‘Great Place to Work- Staff Survey’ were reported. * SH explained focus on wellbeing and introduction of sessions, such as the ‘CuriousiTea’ events. * The AGM were provided an overview of the value of partnership and system working. * SH highlighted the Trusts continuing dedication to innovation. | |
| 3.2 | Quality Account  JA briefed the AGM on the quality account for 2018/19.   * JA provided an overview of quality priorities for the year ahead and plans to deliver ‘good to great’ care. * JA explained work to build on Duty of Candour requirements and Freedom to Speak Up. * The AGM were briefed on the Trust’s focus on improvement and JA shared the service line priorities for the year ahead to ensure improved outcomes for service users. * JA shared pride of representing nursing and Allied Health Professionals (AHPs) across the Trust. | |
| 3.3 | Ella Riley from Young Shapers provided a presentation explaining their work to get young people involved in giving their view on services.  Ella shared changes made as a result of the Young Shapers and explained further work required to interact with younger service users. | |
| 3.4 | Financial Overview   * AS shared positivity of relationships with other organisations and how these relationships are instrumental to the effectiveness of the Trust. * The AGM were informed of recent award for innovative partnering between Solent and Portsmouth Clinical Commissioning Group (CCG). * AS explained achievement of financial performance for 18/19.It was confirmed that the Trust was in a break even position for the first time in three years and that all statutory requirements had been delivered. * The AGM were briefed on savings achieved and investments made. * AS informed of capital money spent, with a focus on patient environments. | |
| 3.4 | SH explained the opportunities for the year ahead and aspirations for further partnership working to become an Integrated Care System (ICS).  SH commented on challenges and highlighted the importance of staying true to the Trust values whilst maintaining a safe, sustainable workforce and focusing on transforming and adapting services. SH highlighted commitment to improvement and recognition of excellent work within the Trust. | |
| **4** | **Facilitated open discussion session – including question and answers with the Board** | |
| 4.1 | Meeting attendees were given the opportunity for a group discussion to raise any points of clarity and questions for the panel. | |
| **5** | **Questions and answers to the panel** | |
| 5.1 | RC summarised feedback from the table, including excelled presentation from Ella Riley (Young Shapers) and easy to follow information provided.  It was confirmed that a full summary of all feedback would be provided on the website following the meeting. | |
| 5.2 | JP shared reflections on the powerful patient video provided.  **What are the timescales for Southampton integration work?**  SH confirmed that this would be service led and the Trust would only bring services together where it made sense to do so. | |
| 5.3 | MT shared feedback on the excellent presentation from Young Shapers.  **What does the HMFA acronym stand for?**  AS confirmed that this was the Healthcare Financial Management Association.  **What are the Trust’s finance plans for the year ahead?**  AS confirmed delivery of the breakeven plan. | |
| 5.4 | SA provided reflections on well advanced integration work in Southampton and the importance of focus on elderly care and carers and ensuring that services are talking to each other more.  SA also shared the need to review letters sent out to the public to ensure that they are understandable and in plain English.  Eleanor Van Der Hoest (NHS Volunteer) provided positive feedback of the AGM and commented on strong, heartfelt presentations. | |
| 5.5 | GF reported on positive discussions held regarding the presentations provided and informed of praise from a service user at this table.  The importance of providing a Hearing Loop system for these events was emphasised. | |
| 5.6 | AA shared discussions held regarding the clarity of information and well organised and enjoyable wellbeing sessions. AA also commented on strong sense of team work and support throughout the organisation.  AA explained discussions regarding potential opportunities for self-referral as part of the ICP and ensuring the correct balance and realism for the next year. | |
| 5.7 | SR also reiterated positive comments from the other tables and queried opportunities for ‘older and middle aged shapers’. | |
| 5.8 | **Can more information on work with veterans, both planned and current, be shared?**  SH explained that there was a great deal of work happening in this area and agreed to provide a comprehensive update to those in attendance outside of the meeting. | |
| 5.9 | CM thanked all attendees for participating in the event and the meeting was closed. | |
| **6** | **Close** | |

**Appendix 1**

* With STP & ICP is any opportunity for self-referral to some services- will benefit patients and providers e.g. GP

In line with the NHS Long Term Plan, there will be many developments in the way primary care (GP services) are provided and the services that will be offered to local populations via the establishment of Primary Care Networks (PCNs) – this may include offering different referral routes to that which have traditionally been provided.

* How are the contracts ‘measured’ including non-hands on contracts?

All clinical contacts are captured on one of our clinical records systems as defined by national and commissioner requirements. These systems allow us to identify if a contact was face-to-face or not. We are then able to report against contacts using these groupings.

* Reflection on our elders & how they get help if they are on their own

The Academy provide a range of opportunities for people to be involved in research and improvement projects from all age ranges, abilities and disabilities.

We have people from a range of ages involved in a number of key groups (Community Engagement Committee and Complaints Panel with recruitment to more in train)

We have developing links with a number of community networks for adults – Portsmouth City Carers Forum, Southampton Voluntary Action Group and MH Network, and plans for much more (see below)

We have recently changed the specification of our experience of care feedback system to encourage a much wider range of people to tell us more about our services, to be implemented In April.

In the future:

Between Jan 2020 and March will be coordinating a big programme of outreach to local community members and groups, to inform the development of the next engagement strategy. We will be looking for input from people from all areas that we serve and the range of people we serve. We aim to take their advice on how we can provide opportunities for people to be heard.

We will also be launching “Community Partners Programme”, where people from the locality can offer up their skills and expertise to help us improve our services and understand what matter most to our local community

* How to people find out about what services are out there

Solent NHS Trust’s website at [www.solent.nhs.uk](http://www.solent.nhs.uk) hosts a service directly. Each service is listed within here and includes key information.

* Do we make sure our letters to patients are in plain English?

We provide support, including guidance and providing workshops to our services in relation to accessible information. Our services should also be screening for communication and information needs and tailoring information to meet individual needs. To date, over 15,000 conversations have been recorded relating to communication and information needs.