

CHUHSE Annual Members Meeting (AMM) Minutes

Meeting held on 3rd December 2014 from 6.30 pm to 8.00 pm

Education Centre, Homerton Hospital

PRESENT:

Executive and Non-Executive Directors

Deborah Colvin, Chair
Julia Brown, Interim Chief Executive
Dr Victoria Holt, Medical Director
John Fairclough, Interim Finance Consultant

Interim Governors

Richard Barron
Nicholas Brewer
Guy Hunt

Public Members

Tricia George
Jack Griffin
Sally Haywill
Derek Humphrey
Elisa Johnson
Pat Turnbull
Kathleen Walsh

GP Members

Rhodri Jones
Alexandra Kelly
Tessa Katz

Staff Members

Nancy Augustt
Carmen D'Cruz
Paulette Earle
Marlene Earle
Brian Golloghy
Leonie Hylton
Juliet Rodney
Mark Wallis

Apologies

Ben Saw
Penny Taylor

Minutes:

Carmen D'Cruz, Interim Project Manager
Nancy Augustt, Interim Governance Manager

1. Welcome and introduction by the Chair

The Chair welcomed everyone to the meeting. She went on to outline the good progress that had been made with CHUHSE over the year, in particular the quality of the clinical service that is now being offered to the public. She acknowledged that there is still more to do in terms of embedding

non-clinical policies and setting up robust governance. She announced that regrettably due to her other commitments she can no longer give the time to CHUHSE that is needed and will be standing down as Chair of CHUHSE. She thanked all the staff members for their hard work through the year.

2. To receive a progress report on CHUHSE during its first 12 months of operation

Dr Victoria Holt presented the progress report. A copy is attached.

Questions and discussion followed:

- **How many people are on call in CHUHSE?**

CHUHSE have a workforce that includes between 40-50 GPs. Some GPs cover many shifts and some are more selective due to other commitments. The number of call handlers, receptionists and drivers is growing in response to service requirements; the organisation currently employs about 32 staff including drivers, receptionists and call handlers working a few shifts a week each and supported by a core administration team.

- **What provision is there for those whose first language is not English?**

CHUHSE has access to “The Big Word” telephone translation service at Homerton University Hospital. Most service users call the service with a relative who can help to make the phone call with them and accompany them to their appointment.

- **Where are CHUHSE doctors from?**

Most are predominantly based in City & Hackney or North London, some are from Hertfordshire, but CHUHSE have no doctors flying in from abroad. For some of the doctors this is their main job flexibly working around childcare needs and for others this supplements their main job. A few have worked previously at other Out of Hours providers such as Camidoc and Harmoni. CHUHSE has a rigorous recruitment selection process and not everyone is successful through the recruitment process.

- **How much patient feedback has been received?**

CHUHSE is still in its infancy, but has received and is monitoring patient feedback comprising both complaints and very positive comments and feedback which inform our learning and subsequent service improvements. Some local GPs have given feedback that their patients have appreciated the service CHUHSE provides, and have been very supportive. The mechanisms for getting feedback are being embedded, commencing with a pilot whereby patient questionnaires have been sent to base patient visitors who live a distance away. There have been no negative responses, which has been reassuring. CHUHSE recognises the importance of patients’ experiences and will continue to monitor feedback moving forward.

- **How seasonal is activity and what is being done for winter?**

CHUHSE activity is very seasonal and sees increased surges in the winter period, which is also true of primary care and A&E. The CCG provides additional funding for winter pressures (operational resilience). CHUHSE has excellent doctors and staff who are able to respond to covering shifts quickly based on feedback received which helps us to be able to successfully adjust rotas as required.

3. To receive a report on the progress of the Membership Strategy from the Council of Governors

Julia Brown introduced herself as the Interim CEO, explained and emphasised that CHUHSE is presently going through a transitional stage in its development, and then provided a brief overview of the membership strategy and an update on the current status.

She confirmed that notices of resignation have been received from the following who have not offered themselves for re-election: Jenny Waller and Noemi Fabry.

Resolution to propose:

That the following presently elected interim Governors be and are hereby appointed re-elected as Interim Governors of the Council of Governors for a further interim period: Richard Barron, Ben Saw, Nick Brewer and Guy Hunt

On behalf of CHUHSE she expressed thanks and appreciation to the interim governors for their hard work. Further to the resignation of Community and Staff interim governors, Noemi and Jenny, the remaining interim governors have indicated a willingness to continue to stand. It was therefore proposed that Richard Barron, Ben Saw, Nick Brewer, and Guy Hunt be appointed for a further interim period of up to 6 months.

A vote was held, and the interim governors were approved for the next 6 months. CHUHSE will be working through the logistics of reviewing and refining the Constitutional RULES over the coming weeks and will share, discuss and agree with Members over these next six months. Richard will continue to represent community members, Nick and Ben will continue to represent GP members, and Guy will continue to represent staff members.

With an increase in CHUHSE membership from 400-454 over the last 8 months across all groups, CHUHSE is keen to develop a robust Membership and engagement Strategy; work with the wider membership group in a better way through regular communication (e.g. newsletters) and more frequent meetings and workshops; and ensure that the Board adopts a wider engagement programme.

Questions and discussion followed:

- **How is the management hierarchy structured?**

CHUHSE members are key to helping shape CHUHSE services going forward. The membership is what enables CHUHSE to be owned by the local community, and gives the community a voice in how it operates the clinical service and how business is governed. Members are entitled to receive information about CHUHSE and its business. Members can be involved in meetings, vote on key issues, elect representatives to the council of governors, and any members can stand for election to the CHUHSE council of governors.

Julia Brown reiterated that CHUHSE had been set up very quickly as a new organisation in December 2013 and had overseen significant development changes that it seemed to be the appropriate time to review 'The Rules of CHUHSE' (the organisation's constitution) with full membership involvement.

- **How often are meetings?**

The formal Annual Members meetings will be held annually. However, CHUHSE recognises the importance of holding regular engagement meetings with its members to help shape and develop the organisations strategy. Julia Brown then encouraged members to feedback and to share any ideas as a catalyst for continued service improvements.

- **Are community members able to meet separately around supporting with further engagement with the service?**

CHUHSE is very keen to set up patient engagement groups where key issues can be discussed to make sure the patient voice and local community are at the heart of everything CHUHSE is doing.

4. To receive the Board of Directors' Report and Annual Accounts for the period ended 31st March 2014

John Fairclough introduced himself as the Interim Finance Consultant. He provided a brief background around his experience having previously worked as a Director of Finance and CEO in the Out of Hours and NHS organisations. The annual accounts report was then presented with John highlighting that CHUHSE is currently having to account for PARADOC and GP Federation expenditure although this does not form part of the accounts that are being presented.

John provided an overview of CHUHSE finances and the financial status of the organisation, briefly explaining the following:

- CHUHSE as an organisation stands slightly outside of the NHS but provides NHS services;
- CHUHSE started providing services in December 2013;
- There was a period of 10 months prior to that of setting up;
- The auditors have verified the Accounts which are from set up to 31st March 2014;
- CHUHSE is a Social Enterprise and as such the Accounts have to be submitted to and approved by its members;
- The Turnover (expenditure) for the period was £907,000 approximately
- CHUHSE also had approximately £840,000 in the bank at 31st March 2014
- CHUHSE had £52k (profit) in the bank after provision for tax;
- The annual contract with City & Hackney CCG for Out of Hours Services is £1.6 million and CHUHSE turnover will be approximately £2 million for 2014/15 (the current financial year);
- The 26th November 2014 Finance Report to the Board shows that CHUHSE has spent approximately £900k to the end of September (half year) with the winter period yet to come, which means that just over half of the budget is left to manage through the rest of the

year. This is to be expected and Out of Hours organisations budget in this way and organise more doctors for the winter period to cope with the increased demand.

He then asked members to raise any questions prior to approval.

A copy of the Annual Accounts is attached.

Questions and discussion followed:

- **Does extra funding include provisions for an extra car if visits are high?**
No we only have the cost of a single car built into the contract and that is certainly sufficient for the number of visits we are carrying out at present. We have made arrangements so that overnight nurses will go out with either a driver or a taxi that CHUHSE has an account with. Using taxi drivers for this new additional pilot service is more cost effective than all the costs associated with an additional car, however if demand increases, then there may be a need to review this..
- **What happens to any profit?**
Any profit generated acts as a reserve buffer to cover unforeseen circumstances or to invest back into the service, for example if we needed another car or more doctors, or if we have an unexpected flu pandemic. If CHUHSE is unable to pay its debts then it will have to close. It is appropriate for organisations such as CHUHSE to have a reserve for these reasons. Further discussion is needed about how much the reserve should be. However CHUHSE is a Social Enterprise and members have a voice about how that money is spent.
- **What is Urgent Health UK?**
Urgent Health UK is a network of about 24 other not-for-profit Out of Hours providers. They are a supportive and collaborative organisation, sharing ideas and best practice. There is a membership fee, and they carry out an audit of CHUHSE, as well as organising annual conferences.
- **What does CCG stand for?**
CCG stands for Clinical Commissioning Group. They are the holders of government monies, allocated to all bodies within the NHS. CHUHSE had to go through a procurement process through the CCG and was awarded a 4 year contract, of which one year has been completed with three remaining. CHUHSE has quarterly meetings and monthly contract meetings with the CCG, who hold CHUHSE to account on how the service is being run.
- **What does “Related parties” (item number 10 in the accounts) mean?**
This refers to the role of acting Chief Executive but effectively an external consultant, this is paying for their services.

The accounts were approved by members.

5. Appointment of Auditors

John Fairclough advised that it is a requirement of the Financial Conduct Authority (FCA) to re-appoint the auditors at the Annual Members Meeting. He asked that the meeting would endorse the reappointment of the current auditors HBD Accountancy emphasising that CHUHSE will continue to make sure that it gets good value for money from them. He also pointed out that they have been very helpful in ensuring the accounts were presented properly and he believed they were also financially cost effective.

Resolution to propose:

“That the Board is hereby authorised to appoint HBD Accountancy Services LLP as auditors of CHUHSE for the coming year following discussions to determine their remuneration.”

A vote was held to approve auditors. The vote was in favour.

6. The Rules of CHUHSE (Constitution)

A discussion was held about the required amendments and approval process.

The Chair introduced the rules explaining that these enable the directors to deliver a better service. She advised that there would be a review of the rules over the coming weeks and looked forward to sharing the outcome of the review with members. It was confirmed that CHUHSE would be getting some expert assistance with this.

The Chair welcomed feedback from the members of CHUHSE around any aspects of the work CHUHSE is doing. Julia Brown took the opportunity to add that CHUHSE would welcome small groups of members working on various activities and urged any members who would be interested in becoming more involved in any specific areas of work such as membership and accounts should contact her. She stressed the importance of being inclusive and ensuring that members were involved in all relevant engagement and strategy areas of the business.

Questions and discussion followed:

- **Does anyone want to get involved in discussions around rules?**
A discussion on CHUHSE Rules is open to CHUHSE members. It was agreed that it would be helpful to have a breakdown of what issues the members could address. CHUHSE management team will write an initial plan of how we should shape, including a summary of what we think the key issues are, and then get interest back from members.
- **Is there a website?**
CHUHSE website is very basic at the moment, and work is in progress to get it updated with an intranet site for staff and members, which will include downloadable copies of policies, a feedback section for soliciting complaints and compliments and a section for presentations from meetings. Please visit www.CHUHSE.com with basic information and contact details.
- **Does CHUHSE have plans to grow and take on other services?**

This would need to be thought through carefully so as not to destabilise the current OOH service. If however, there are new potential projects that fit well with CHUHSE and other key providers /commissioners successfully working collaboratively together, CHUHSE's position on this may change as integrated service pathways and organisations develop.

- **What happens with sharing information e.g. frequent callers?**

Currently, if CHUHSE has frequent callers, their GPs send CHUHSE SPNs (Special Patient Notes), which are attached to the patient ADAstra files. Further work is being developed on this. In the meantime, CHUHSE has a very good close working relationship with Homerton A&E and the hospital has been a fantastic partner organisation.

7. AOB

The Chair brought the meeting to a close. The Chair thanked members for attending and for their contribution and ongoing support of CHUHSE.