

## Minutes of Annual Members' Meeting 27 September 2023 The Curve Lecture Theatre, St George's Hospital

Presenter	Title
Gillian Norton	Chairman
Jacqueline Totterdell	Group Chief Executive Officer (GCEO)
Andrew Grimshaw	Group Chief Finance Officer (GCFO)
Nasir Akhtar	Public Governor, Merton

### OPENING ADMINISTRATION

#### 1.1 Welcome

The Chairman welcomed everyone to the Annual Members' Meeting. She thanked members and the public for their continued support over the past year which was hugely appreciated by the Trust and its staff and volunteers.

The minutes of the previous Annual Members' Meeting, held on 26 September 2022, were agreed as a true and accurate record.

### TRUST OVERVIEW OF THE YEAR

#### 2.1 Patient Story

The Chairman introduced Emma Van Klaveren, whose five year old daughter, Floriana, had been diagnosed with cancer in March 2020 and had been treated at St George's and at the Royal Marsden. Emma talked about her family's experience of the Trust's children's cancer services. Emma explained that Floriana had been diagnosed with kidney cancer and had received "fantastic" care at St George's. Floriana had regularly travelled to the Trust for chemotherapy treatment. Emma agreed that children's cancer services should be based at a single site and collocated with a paediatric ITU. She maintained that the service should be based at St George's rather than relocated to the Evalina Hospital. Although Floriana was now in remission and was doing well, Emma expressed anxiety that, should Floriana need further treatment from child cancer specialists in the future, local care may not be available. Travelling to central London was highlighted by Emma as a key concern as it was difficult to drive to the Evalina and it was not possible to take an immune-compromised child on public transport. She added that had the services for Floriana been delivered from the Evalina, it would have added to the stress and expense and would not have been in Floriana's interests. Emma expressed gratitude to local council leaders and to her local Member of Parliament, Rosena Allin Khan, who had written to the Secretary of State for Health requesting that children's cancer services be retained at St George's.

The Chairman thanked Emma for talking about the care Floriana had received, and asked what she thought was good about her experience of the service at St George's. Emma explained that the two key factors were that St George's was close to home and travel was straightforward, and that the staff on Pinkney Ward had been so expert and caring for Floriana.

In response to a question from Ann Beasley, Vice Chair of the Trust, Emma explained that prior to Floriana becoming ill she had not known about the children's cancer services at St George's and the Royal Marsden but, having experienced the service firsthand, was now speaking to MPs, local

	<p>schools and telling as many people as possible about the quality of the service and the staff and she was doing all she could to support retaining the service at St George's.</p> <p>The Chairman thanked Emma for coming to the meeting and talking about Floriana's experience and for expressing her support for the Trust retaining children's cancer services. The Chairman then introduced a short film which highlighted the work of the service.</p>
<b>2.1</b>	<b>A review of the Year 2022/203</b>
	<p>Jacqueline Totterdell, Group Chief Executive Officer (GCEO), gave an overview of the highlights of the previous year:</p> <ul style="list-style-type: none"> <li>• The past year had been rewarding but challenging. Jacqueline thanked staff for everything they had done to care for patients. She also thanked local communities and partners across the health and care sector for their continued support for the Trust. The key challenges over the past year had been restoring elective care following the pandemic, the unrelenting pressures on emergency care, the industrial action by staff, and particularly junior doctors, and the increasingly challenging financial pressures.</li> <li>• The Trust cared for a population of over 1.3 million across South West London and 3.5 million across South West London, Surrey, Sussex and beyond. In the past year, 141,400 people had been treated in the Trust's Emergency Department (ED), 193,804 X-Rays had been conducted, 126 renal transplants had been performed, and 5,100 babies had been delivered. Jacqueline highlighted some key moments of the year. These included: Baby Connie, who had been born with a dead bowel but had received pioneering surgery at St George's to address this ultra-rare condition; celebrating Childhood Cancer Awareness Month with many of the children cared for by the team at St George's; the Homelessness Inclusion service going from strength to strength and winning a Parliamentary award; and partnering with three other London trusts and the London Ambulance Service to launch a Critical Care Support Service to enable the sickest patients to be safely moved between local hospitals and specialist centres.</li> <li>• St George's and Epsom and St Helier University Hospitals NHS Trust had been working as a hospital group for the past 18 months, creating opportunities for improved patient care and access to a wider range of services for the patients of both organisations. While the hospitals remained two separate legal entities, the Executive team were leading the two organisations, supported by the sites teams and departments, to improve outcomes for patients. The Board approved a new Group Strategy, published in May 2023, which set out the vision for the Group for the next five years. The Group Strategy was the product of extensive engagement with patients, staff and partners, including members of the Trust's People's Panel, about how the Trust could provide the best possible services, the role it should play in its local communities and across the wider NHS, and how it remained ready to respond to rising demand and ever more stretched resources. The Group was also in the process of integrating many of its corporate services, which would deliver improved back office functions and would release savings which would ultimately help deliver better care to patients.</li> </ul>
<b>2.2</b>	<b>Trust Finance Review and Auditors Year-End Report</b>
	<p>Andrew Grimshaw, the Group Chief Finance Officer (GCFO), gave an overview of the audit of the Trust's annual accounts for 2022/23 which had been undertaken by Grant Thornton. He highlighted the following:</p> <ul style="list-style-type: none"> <li>• The Trust had received an unqualified audit opinion on its 2022/23 accounts with no significant matters arising from the audit and an 'unqualified' conclusion in relation to the</li> </ul>

	<p>arrangements for securing economy, efficiency and effectiveness in the use of resources. The auditors had also undertaken an extensive value for money audit with no key recommendations made as part of that review.</p> <ul style="list-style-type: none"> <li>• The Trust had delivered a £30m deficit position in 2022/23. This was largely the result of a shortfall in the delivery of Cost Improvement Plans as forecast together with the impact of operational pressures.</li> <li>• The Trust continued to spend on capital resources on improving the IT infrastructure, the estate and medical equipment. This investment had amounted to £60.3m in 2022/23.</li> <li>• In terms of the current year, the Trust had submitted a plan for 2023/24 of £15.7m deficit. The current year was extremely challenging financially with a very significant Cost Improvement Plan target. Despite this, the Trust would be investing a further £60.1m of capital in 2023/24, including £20.1m of Public Dividend Capital from NHS England.</li> </ul>
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<b>2.5</b>	<b>Lead Governor Update</b>
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	<p>In the absence of Richard Mycroft, Lead Governor, Nasir Akhtar, Public Governor in Merton, gave an overview of the main responsibilities of the Council of Governors and highlighted the following:</p> <ul style="list-style-type: none"> <li>• There were a total of 26 governors on the Council of Governors with the largest group being public governors, who were elected by the Trust's public members. Four staff governors represented medical and dental staff, nursing and midwifery staff, allied health professionals, and non-clinical staff. A number of stakeholder governors were appointed by local bodies such as councils, universities, and Healthwatch.</li> <li>• Governors are volunteers with a wide range of skills and professional and lived experience who look carefully at the performance of the Trust and hold the Chairman and Non-Executives to account for the performance of the Board of Directors and seek to represent the interests of members and the public.</li> <li>• The Council of Governors typically meets five times a year and is chaired by the Trust Chairman. It discusses the work of the Trust with members of the Board as well as raising questions on behalf of members.</li> <li>• Members were encouraged to consider becoming Governors when an election is announced, and further elections were scheduled to take place later in the year.</li> <li>• If people wanted to contact a Governor, they could email <a href="mailto:governors@stgeorges.nhs.uk">governors@stgeorges.nhs.uk</a>.</li> </ul>
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<b>QUESTIONS FROM MEMBERS AND THE PUBLIC</b>	
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<b>3.</b>	<p>The Chairman opened the meeting to questions from members and the public, starting with those submitted in advance of the meeting before moving on to take questions from those present:</p> <ul style="list-style-type: none"> <li>• <u>Has the Trust undertaken an assessment of the potential impact of St George's losing paediatric cancer services to the Evalina Hospital?</u></li> </ul> <p>The Group Director of Strategy, Ralph Michell, explained that the paediatric cancer services was intertwined with a range of wider children's services at the Trust. Paediatric staff across the Trust were involved in caring for children with cancer. Staff involved in delivering cancer care for children were also involved in delivering other pioneering children's surgery, as the earlier example of Baby Connie had demonstrated. There were two big potential consequences should the Trust lose its paediatric cancer service: it would be more difficult to attract and retain the best clinical staff to care for children more generally; and there would be financial consequences as many of the costs were fixed and would be incurred regardless, meaning there would be a knock-on impact on other services.</p> <ul style="list-style-type: none"> <li>• <u>What impact had the industrial action had on the Trust?</u></li> </ul>
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The Managing Director for St George's, Kate Slemeck, explained that the industrial action had had a significant impact on the Trust particularly the industrial action involving consultants and junior doctors. A lot of patient appointments and procedures had needed to be cancelled and rescheduled. There were particular pressures on the booking teams which were constantly booking and rebooking patients. The situation was very wearing for all concerned and there was a cumulative impact on staff. The Group Chief Medical Officer, Richard Jennings, added that the Trust was doing everything it could to ensure patients were safe during periods of industrial action, but there was undoubtedly a risk created by the sheer scale of postponed appointments. The Chairman added that there was also a financial cost to the Trust and it was not clear whether additional funding would be forthcoming to offset this.

- How is the Trust responding to the CQC inspection report on its maternity services

The Group Chief Executive Officer, Jacqueline Totterdell, acknowledged that receiving the CQC report had been very difficult. The Trust was very proud of its maternity service which had received very positive feedback from mothers and clinical outcomes in the service were good. The Trust had taken the CQC report very seriously and was taking action to address the issues identified. The Group Chief Nursing Officer, Arlene Wellman, added that an action plan had been developed. All immediate actions required had been taken. The next area to address was around culture and leadership within the service, and ensuring that the right issues were escalated. An external review had been commissioned and would look at the issues and make further recommendations for strengthening the service and for improving quality governance at the Trust and across the Group.

- Why are staff turnover rates so high and what are the key reasons given by staff for leaving?

The Group Chief People Officer, Paul da Gama, explained that the turnover rate for the Trust was currently around 14%. This was around 2% lower than it had been a couple of years before, but it was important to acknowledge that the rate fluctuated. The Trust's location in London was a factor in the level of turnover as staff had a number of other large Trusts nearby they could move to without having to relocate. Wider cost of living pressures also had an effect. Some staff were moving away from London due to the cost of living, and the cost of accommodation for nursing staff had been cited as an example of this. The Trust, like others, had seen turnover rates increase immediately after the pandemic but the rate was now coming down.

- Councillor McCabe, Cabinet Member for Health and Social Care at the London Borough of Merton, expressed his support for St George's retaining children's cancer services. He explained that he had close family connections with the Trust and had seen firsthand the outstanding care that was delivered. He added that he had written to NHS London to express his disagreement with their proposals to move the service to the Evalina Hospital. He maintained that the arguments for retaining the services at St George's stacked up, but the arguments for moving the service elsewhere did not. He also commented that Merton Council would continue raise the issue and do all it could to maintain the service at St George's.

## CLOSE

The Chairman formally closed the meeting and thanked the Board, Governors, staff and the community for their continued support. She also thanked everyone for their contribution in making the meeting a success.