

MINUTES OF THE MEETING OF ACTION AGAINST MEDICAL ACCIDENTS

Held on 27th September 2018 at Freedman House

Present: Suzanne Shale (SS) Chair, Angela Brown (AB) Treasurer,
Caroline Browne (CB), Jonathan Hazan (JH), Nigel Holland (NH), Linda
Kenward (LK), Moi Ali (MAli)

Apologies: Hilary Scott (HS), Mike Andersson (MA), Rachael Vasmer (RV),

In attendance: Peter Walsh (PW) Chief Executive & Company Secretary
Hugh Williams (HW) Deputy Chief Executive
Nicky Rushden (NR) Finance Manager

1. Introductory remarks:

Moi Ali was welcomed to her first meeting of the Council since appointment as a trustee. All present introduced themselves.

SS explained that HS would be resigning as a trustee at the December meeting, She expressed appreciation to HS for her contribution as a trustee over the past eight years, for acting as the 'inaugural' chair of the Quality and Outcomes Committee, for her work as a Vice-Chair, and for giving notice of her resignation in a timely manner so that a smooth transition has been enabled.

The Quality & Outcomes Committee has elected CB as their chair. The appointment of a Vice-Chair is subject to Council agreement at the forthcoming AGM together with the positions of Chair and Treasurer. SS had had a discussion with CB as to whether she would be interested in standing as Vice-Chair of the Council and she had indicated she would be. Notwithstanding, it is open to any trustee to put their name forward and all were welcome to do so. All trustees were invited to indicate whether they would like to stand for one of these positions by Friday 5th October. If more than one person wishes to stand, an election will be arranged. There would either be drinks or a meal following the December meeting to mark Hilary's retirement.

All present were invited to feedback something about AvMA's work since the last meeting which was notable progress. These included: meeting with staff about the helpline and the enthusiasm and openness shown by staff; the draw-down of investments being well timed; work of the quality committee and the last meeting; the high standard of financial controls; AvMA's work on the HSSI Bill and safe space having influenced the recommendation of the select committee; the timely agreement to bring forward expenditure on IT and its implementation; identification of required income/savings for the financial plan; the auditor appointment process; PW's receptiveness to new ideas at trustee induction; the collaboration with Patient Safety Learning.

It was AGREED to invite JH to tell trustees more about Patient Safety Learning's work at the next Council meeting.

2. Minutes of the Council Meeting held 21st June 2018:

The minutes were AGREED as an accurate record.

3. Minutes of the Executive Committee held 7th July 2018:

The minutes were noted.

There was a discussion about how trustees could help with corporate sponsorship. It was noted that trustees need to know more about the principles underpinning it (what were we asking for and offering) in order to identify and potentially mobilise appropriate contacts. PW said that contacts within companies to approach would be very valuable, and help with 'pitching' to companies if we got the opportunity. It was AGREED that PW circulate further information to the trustees on the corporate sponsorship scheme.

Action: PW

4. Strategic Plan 2019-2024:

Trustees had an initial informal discussion about the strategy without staff being present to identify initial impressions and key areas for further questions and consideration. After this, it was confirmed that the draft strategy document was well received by trustees. It was thought that it effectively reflected the discussions at the review days, reads well, and gave the right direction of travel.

Feedback and comments from trustees fell into the following areas:

1. how we express our purpose and values (and who would see them outside the charity)
2. the value and importance of understanding and responding to the 'journey' our beneficiaries face, and of engaging further with them
3. the balance to be sought between service delivery and campaigning and influencing
4. underlying themes that would 'run through' or underpin the strategy
5. expectations regarding the next iteration of the strategy to be brought forward in December

1) There was further discussion of the wording of our purpose. The current draft reads "Our purpose is to support people affected by avoidable harm and failures in patient safety; to help them achieve justice; and to promote safer healthcare for all." The focus of discussion was the first clause and whether it should refer to avoidable harm and failures in patient safety or refer to harm, which is what patients experience. It was clarified that everyone is content with the last clause 'promoting safer healthcare for all'. The consensus among trustees was that the first clause needs to be inflected towards our beneficiaries' needs, how they understand what has happened to them, and what we do.

It was AGREED that PW reflect further on the wording in the Purpose Statement in light of the consensus of views among trustees and whether it should continue to include the term 'failures in patient safety' or not.

Action: PW

2) It was noted that the new strategy had a stronger focus on understanding the beneficiary journey and shaping our services around it, along with improving engagement with beneficiaries. Trustees were seeking further understanding of, broadly speaking, what this might entail. It was AGREED that the input of one or two trustees to work with PW and Liz Thomas on developing a plan for this objective would be helpful. Trustees were asked to consider if they would like to help with this.

Action: All to consider volunteering to assist with this, and contact PW as soon as possible if willing

3) Trustees commented on wanting to understand how our strategy would balance service delivery alongside campaigning and influencing, recognising that we wished to maintain both whilst also accepting that the strategy day identified we needed to be clear about our priorities.

4) In discussion it was recognised that there were underpinning elements to the strategy, including IT development and continued work on impact, and it would be helpful to see how these run through in the next iteration.

Action: PW

5) The next iteration of the strategy is to be produced for approval at the December AGM, Trustees were asked to identify their expectations around what, if anything, they wished to see different. There was agreement that some objectives would benefit from additional clarification. Trustees did not want to be presented with the level of detail that would be included in the operational plans to flow out of the strategy, which are to be brought forward in March. However, further clarity about how some objectives (such as understanding the beneficiary journey) might be met, in broad terms, and when / at what stage in the five year strategy, would enable trustees to have a clearer sense of the strategy's implications.

It was AGREED that PW produce a second draft for the December meeting taking account comments received, and also indicate the nature of the annual operational plan(s) which would be produced for the March 2019 meeting.

Action: PW

Trustees made a number of specific comments (for instance on how to describe those who were associated with patients). It was AGREED that specific suggestions that individual trustees had for improving the strategy should be sent to PW by 15th October 2018.

Action: All

5. Quality & Outcomes Committee:

CB presented the report on the committee's work, which was noted. Work was ongoing on identifying impact and quality measures for client services and would be complete by the end of the year.

As we were now eliciting feedback in new ways the last meeting of the QOC had looked at feedback received, and how the organisation responded to the small number of 'negative' feedback responses. It was noted with that some cases had been followed up through a telephone discussion in response, and also that in some cases this would not be appropriate. It was noted that staff should exercise professional judgement in how to respond, taking into account the interests of the beneficiary. Trustees were pleased that negative feedback received a personal response when appropriate. It was also noted that the overwhelming amount of feedback was positive and that trustees valued the occasional reports on feedback circulated by the communications officer.

6. Finance:

AB summarised key points from the last meeting of the committee. The finance report and the management accounts were noted.

With regard to the two floors which AvMA rents out at Freedman House, NR reported that PW had negotiated good lease surrender deals with the tenants who have now left. This year's budget will be £8,000 better even if neither floor is leased out before the end of March 2019. PW explained that two agents were now being used and £1,000 had been spent on an online virtual tour to boost the marketing of the building. If there has been no success by the end of 2018 other options would be explored such as lowering the rent and/or splitting one of the floors up into smaller units.

It was noted that overall AvMA was predicted to perform £61,000 better than budget in 2018-19 thanks largely to successful fundraising and lawyers' subscriptions holding up better than expected.

It was AGREED to accept the committee's recommendation of Sayer Vincent as the preferred auditor for 2018-19, to be appointed at the AGM, and that the unsuccessful tenderers could be informed.

Action: NR

The updated 10 year financial plan was AGREED. It was noted that it had been agreed at previous meetings that the way the projected 'surplus' reserves at year 10 would be dealt with would be decided after the strategic plan had been agreed.

7. Approval of Policies:

The draft Investment Policy was AGREED subject to the term 'medical accidents' being replaced once there was an agreed alternative.

The revised draft Safeguarding Policy following online consultation was AGREED subject to the word 'deliberately' being deleted in the first sentence of clause 6.

The draft Complaints Procedure was discussed. It was agreed that it was not necessary to set out criteria to be used to decide on the options described at stage 2. The procedure was AGREED without changes.

The draft Governance, Decision Making and Monitoring Framework was AGREED subject to correcting the numbering.

There was a consensus of opinion that the approach adopted for bringing new policies to Council had worked relatively smoothly and enabled advice and views to be incorporated prior to final versions being presented for approval.

8. CEO/DCEO Report:

The report was noted. It was noted that the work with the Department of Health referred to on duty of candour was in Northern Ireland, and was being paid for.

9. Departmental Reports:

The reports were noted. The following points were made:

- JH commended the conference & events team for the excellent job they had done event managing the Patient Safety Learning conference
- Jane Smythson was congratulated on the job she was doing on fundraising as well as marketing/communications. It was thought to be a good idea to have brought in a social media volunteer. It was noted that JS's position as fundraising lead was being made permanent.
- With regard to Inquests the successful challenge of a decision not to go ahead with a prevention of future deaths report was commended. It was felt such reports are of systemic importance and not just for individual trusts. The Ministry of Justice's consultation being run for 6 weeks over July/August was felt to be inappropriate
- Nathan Bacon was congratulated on his work on the IT project

- It was noted that AvMA were being paid [REDACTED] for up to 10 days for the advocacy work commissioned by a CCG. It was felt this may be an area of work which AvMA could develop

10. Date of next meeting:

13th December at 1pm (includes the AGM).

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Chair