

**UNCONFIRMED**  
**Minutes of the Kent Community Health NHS Foundation Trust's**  
**Annual Members' Meeting and Annual General Meeting**  
**held on Thursday, 23 September 2021**  
**via MS Teams Live Event**  
**with the presenters at the Boardroom, The Oast, Hermitage Court, Hermitage**  
**Lane, Barming, Maidstone ME16 9NT**

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**Present:** John Goulston, Chair (chair)

**Board Directors** Sola Afuape, Non-Executive Director  
Pippa Barber, Non-Executive Director  
Paul Bentley, Chief Executive  
Paul Butler, Non-Executive Director  
Pauline Butterworth, Chief Operating Officer  
Peter Conway, Non-Executive Director  
Prof. Francis Drobniowski, Non-Executive Director  
Gordon Flack, Director of Finance/Deputy Chief Executive  
Louise Norris, Director of Workforce, Organisational Development  
and Communications  
Dr Sarah Phillips, Medical Director  
Gerard Sammon, Director of Strategy and Partnerships  
Bridget Skelton, Non-Executive Director  
Dr Mercia Spare, Chief Nurse  
Nigel Turner, Non-Executive Director.

**Governors** David Price, Public Governor, Maidstone, Lead Governor  
Janet Allen, Staff Governor, Corporate Services  
William Anderson, Staff Governor, Adult Services  
Elaine Ashford, Public Governor, Dartford  
Dr Loretta Bellman, Public Governor, Tunbridge Wells  
Maria-Loukia Bratsou, Staff Governor for Children and Young  
People Services  
Alison Carter, Appointed Governor, Kent Dementia Alliance  
Carol Coleman, Public Governor, Dover and Deal  
Ruth Davies, Public Governor, Tonbridge and Malling  
Gill Harris, Public Governor, Sevenoaks  
Miles Lemon, Public Governor, Swale  
Kimberley Lloyd, Staff Governor, Health and Wellbeing Services  
Daniel Mott, Public Governor, Folkestone and Hythe  
John Norley, Appointed Governor for Age UK  
Lynne Spencer, Public Governor, Canterbury  
Dr Sue Plummer, Appointed Governor, Universities  
Kathy Walters, Public Governor, Ashford  
John Woolgrove, Public Governor, Rest of England.

**In Attendance:** Ali Carruth, Director of Participation, Experience and Patient Engagement  
Natalie Davies, Director of Corporate Services

**23/09/01 Welcome and introduction**

Mr Goulston, Chair, welcomed the Council of Governors, Board of Directors and members of the public to the Annual Members' Meeting and Annual General Meeting of Kent Community Health NHS Foundation Trust (KCHFT).

**23/09/02 Our year 2020/21**

A film presentation was given which provided examples from different Trust services about their work during the year and the positive impacts these activities had had on both patients and services.

**23/09/03 Chair's reflection on the year**

Mr Goulston reflected that despite the restrictions imposed because of Covid-19, members of the Board had worked across the Kent and Medway system and with partners throughout the year meeting staff and patients.

Mr Goulston had visited a number of services including the Rapid Treatment Service in Ashford, a ward round at the William Harvey Hospital, the Folkestone Rapid Treatment Service, the community nursing team in Folkestone, a We Care visit at Hawkhurst Community Hospital, and services in Faversham, Deal, Maidstone and Thanet. On some of these visits he had been accompanied by non-executive directors, executive directors and/or governors. Three themes had struck him from the visits – traumatic, resilience and innovation. Community nurses had described the personal trauma they had experienced in providing end of life care to a much higher number of patients at home than previously. Mr Goulston had been struck by the resilience of staff in continuing to provide services alongside delivering a mass vaccination programme since March 2020. Alongside these challenges, staff had continued to be innovative in adapting to Covid-19 and adapting their services to be sustainable. He believed that innovation was the way forward to continue to improve services and build on the impact of Covid-19.

Mr Goulston thanked the Board and the Council of Governors for the work that they had done over the last twelve months.

**23/09/04 Report from our lead governor, Mr David Price**

On behalf of the Council of Governors, Mr Price thanked all the staff and volunteers who had been involved in delivering the mass vaccination programme and making it such a success. The council had been impressed by how staff and support services had adapted to working in a different way and how organisations had worked together. The council had asked the chief executive to thank staff for their efforts.

Because of the restrictions imposed as a result of Covid-19, governors had not been able to visit services but they had continued to meet virtually. Mr Price had also met with the chair and the chief executive regularly and received updates from them, as well as from the non-executive directors and service managers. Through these various channels, the council had been able to continue to receive assurance and hold the non-executive directors to account.

A number of governors had left the council during the year. They were: Jane Hetherington, Public Governor, Thanet; John Harris, Public Governor, Sevenoaks; Dr Amy Heskett, Staff Governor, Adult Services and Claire Buckingham, Staff Governor, Health and Well-being, all of whom had completed their term of service and were not seeking re-election. Andrew Scott-Clark, Appointed Governor, Public Health and Nigel Stratton, appointed governor, Age UK also stepped down as Council members and were not seeking re-election.

The council welcomed the following new governors: Kathy Walters, Public Governor Ashford; Loretta Bellman, Public Governor, Tunbridge Wells; Elaine Ashford, Public Governor, Dartford; Gillian Harris, Public Governor Sevenoaks; William Anderson and Dawn Gaiger, Staff Governors, Adult Services; and Kimberley Lloyd, Staff Governor, Health and Wellbeing.

Two changes to the constitution had been made that affected the governors. The first change allowed public governors to stay for a third term subject to being elected. The second change removed the maximum term for appointed governors, allowing them to continue on the council as long as they continued to be employed by their appointing body and that the Trust wished them to continue to serve on the council.

There were other changes being considered to the constitution, the details of which could be found on KCHFT's website. Mr Price invited members of the public to review the changes and feedback their comments.

Elections to the Council of Governors would take place at the beginning of 2022. Details would be published nearer the time.

#### **23/09/05    Annual Report 2020/21 - snapshot of the year animation**

A film presentation was given on the Annual Report 2020/21 celebrating the work that KCHFT services had undertaken during the year and as part of the response to Covid-19. The public was thanked for its generous donations to the trust's charitable fund, iCare.

#### **23/09/06    Chief Executive's review of the year**

During the year, Mr Paul Bentley, Chief Executive, had visited the community hospitals, the mass vaccination sites and front-line staff in a variety of services. He summarised the changes that had taken place in the trust to respond to Covid-19 and to continue to deliver services. He

highlighted how Covid-19 had disproportionately affected people of colour and how the Trust had publicly supported its black, Asian and minority ethnic staff and put in place steps to make sure they felt more supported. More widely, a range of resources had been introduced to provide support for staff's health and wellbeing and to recognise the impact on staff families as well. Some i care funds had been spent on colouring and fun packs for the children of staff as a thank you to them. The Trust used donations to i care to fund Team Treats for all staff to allow them to enjoy some time back with their colleagues outside of their working day. Mr Bentley was incredibly proud of what every team had done. Staff had gone above and beyond their duty.

The trust continued to provide services across its communities but for some in a different way, many using video and digital consultations for the first time. The Sexual Health Service had been able to remain open by embracing this technology. Mr Bentley had been moved by the response from the community hospitals where technology had been harnessed to help patients and family keep in touch during Covid-19 when social mixing was restricted. The Trust had led on the mass vaccination programme in Kent and Medway and was currently gearing up for the booster programme and delivering the vaccine to children over 12 years.

Mr Bentley also honoured the friends, family and colleagues that had been lost as a result of Covid. He closed by thanking every member of staff who had risen to the challenges over the last 18 months. He also thanked the volunteers who had been key and central in supporting the services. He thanked the governors for carrying out their duties over the last 12 months and the trust's partners in the wider health care system for their support and collaboration in continuing to deliver healthcare to Kent and Medway and the wider area that the trust served.

#### **23/09/07     Annual Accounts 2020/21, Finance animation**

A film presentation was given on the Annual Accounts 2020/21. It also set out the key headlines from the I care charitable funds annual accounts. A brief explanation was provided about how monies from the NHS Charities Together had also been spent.

#### **23/09/08     Questions from members of the public**

The chair informed the meeting that several questions had been submitted in advance and Natalie Davies, Director of Corporate Services, would coordinate and invite relevant executive directors to respond.

People who had joined the meeting online, were reminded that if they wanted to ask any questions, they could do so by using the chat function and their question would be read out and responded to.

**Q1. I would like to know more about the trust's role in care homes?**

A1. Dr Mercia Spare, Chief Nurse, answered that while the trust does not directly run any care homes, it does provide support to the care home sector in a number of ways. Our district nurses visit local care homes to do assessments on patients and deliver care and treatment to residents. During the pandemic, our acute response team in Thanet developed a Covid active treatment so that patients could stay at home while having hospital level treatment. Our specialist nurses deliver support on Falls Prevention, on Tissue Viability and on End of Life care. In addition, we are currently working as a system to look at how we can provide easier access to care home staff for education and training.

**Q2. How fast can online video consultations that have been used during the pandemic be rolled out to help reduce both waiting times and the significant rural travel experienced by some of our patients? What are the trust's forward plans for these?**

A2. Pauline Butterworth, Chief Operating Officer, replied that during the peak of the pandemic we did roll out virtual contacts, which were a mixture of digital and telephone contacts. Moving forward, we started to reduce the number because it was important in some instances to see people face to face. At the moment, we are working to identify a level of virtual contacts that would work for each service. We have gone from approximately 40 per cent virtual contacts to around 20 per cent and this is still a mixture of telephone and digital. Each patient group is being thought through to find the most appropriate solution for them. Pauline also added that the majority of the virtual contacts remained via telephone and the trust aimed to increase the digital for online contacts.

The chair reflected on a hand-written letter he had received from a 95 years' old Trust member who lives in the north of the county who had written in explaining how important the NHS is for her. In her letter she mentioned that in more recent times, she has been trying to contact her GP practice, but all she gets is the answerphone. She doesn't have a laptop or a computer and therefore is not able access any online services. Although she understood the need for modernisation, she asked us to be mindful and to not forget that we are not all the same, and to remember this when we are looking at improvements. Mr Goulston believed the message that she was trying to get across was to be thoughtful for those that are digitally excluded and to make sure there is still something available for them. He had found the letter poignant and reiterated the significance of improvements and innovation whilst still keeping in mind that the population the trust serves has different needs.

**Q3. I would like to know more about the charity i care, it is more important than ever that we are supporting the local healthcare, but I would like to know where my money is going?**

A3. Louise Norris, Director of Workforce, Organisational Development and Communications, responded saying how overwhelmed we were by the response to our i care charity, particularly during the pandemic, which featured in the earlier film. We have had over £27,000 donated though i

care and also fortunate enough to have £120,000 donated through NHS Charities together. These donations had been used in a variety of ways in the first wave of the pandemic drawing to the end of that challenging period, including sending everyone together rainbow badges and cards.

We also recognised it was particularly challenging for children often being home schooled with their parents working from home at the same time. So, we developed thank you cards, colouring books and other activities that they could undertake.

We also invested in outdoor furniture in community hospitals and other buildings where the trust occupies space.

More recently we have enabled teams to submit applications for wellbeing treats with a variety having been received and all approved, ranging of team events, to exercise equipment and also a freezer as well. This was left entirely up to the teams to decide how they spent their treat money.

Louise thanked everyone who has donated through either the i care charity or the NHS Charities for their generosity.

Gordon Flack, Deputy Chief Executive and Director of Finance, added to the response that in terms of governance arrangements, there is a very clear arrangement that charity monies go to additional benefits to staff and patients, and this is overseen by our Non-Executive Directors and Governors to make sure we are adding extra value over and above what the NHS can pay for as a routine.

**Q4. How is KCHFT proposing to deal with continuing professional development of staff with a change management perspective to deliver services in a more holistic manner?**

A4. Louise Norris, Director of Workforce, Organisational Development and Communications, said that the trust is very proud it invests significant sums of money in continuing professional development (CPD) of our staff. This is one of the key things that is thought to be important for our strategic aim to being the best employer. The workforce department works with directorates who provide a training needs analysis each year, as it is the directorates and staff that are best placed to tell us what their training needs are. So, we are continuing to work with directorates as they adapt and change their services to ensure that the CPD that is invested in is the right development and we will continue to adapt and flex this as we move forward and our services change.

**Q5. In the slides it mentioned there was a financial deficit, can you explain what this was?**

A5. Gordon Flack, Deputy Chief Executive and Director of Finance, explained that the deficit was due to a technical issue relating to the trust's

periodic revaluation of its properties. We had a valuation which meant that on our book value of these properties, the value went down and some of this had to be charged to our income expenditure account; this was the sole reason for the technical deficit. If that was excluded, there was a small surplus of £102,000 and this was the number taken into account with regard to the trust's performance by our regulators. The trust, therefore, maintained its track record of break even with small surpluses.

**Q6. I have seen some information this week about recruiting nurses from Africa, what roles will these nurses be carrying out and can you tell us some more?**

A6. Dr Mercia Spare, Chief Nurse, explained that we are running international recruitment campaigns like many other organisations alongside our normal UK recruitment, but we are delighted to have 20 highly-qualified and experienced nurses joining us from Nigeria and Ghana. They will work predominately in our community hospitals and they will be arriving before Christmas and we are delighted to have them joining our teams to deliver care to our population.

The next question is around commissioning services between East and West Kent and therefore is being directed to Pauline Butterworth to answer.

**Q7. What is being done about the variation in commissioning of services between East and West Kent, as it stands there are some services available in West Kent that are not available in the East?**

A7. Pauline Butterworth, Chief Operating Officer, acknowledged the importance of the question and said that this was being discussed for the last couple of years. Recently, as an organisation the decision had been taken to bring East and West Kent services into one division to ensure we eliminated any unwarranted variation within our own services. In parallel, the Trust was working closely with commissioners to look at what the variations were and where they were unwarranted, making sure we start to work towards services being equitable across East and West Kent. Alongside this the CCG were looking at community services and asking these same questions; what and where the gaps were and where are the unwarranted variations. This is being looked at system-wide, as well as internally, and the Trust was looking forward to reducing that variation in the coming year.

**Q8. Could an update be given on the proposed new health centre in Edenbridge?**

A8. Natalie Davies, Director of Corporate Services, provided an update regarding the proposed new health centre in Edenbridge. The trust was working for sometime with the CCG and the GP practice in Edenbridge to develop a new facility in the area. The trust and its partners were going through the tender process and were hopeful to appoint a developer by the

end of the year. So, this was a really exciting time for the joint project between the GP practice in the area, the CCG and the trust.

**Q9. Is there a date when the One You service, a face to face patient wellbeing service, is likely to recommence in the Dover / Deal area?**

A9. Pauline Butterworth, Chief Operating Officer, referred to her previous response about each service looking into the virtual contacts used during the pandemic and reconsidering whether they could remain as virtual or needed to go back to face to face. Pauline added that we have had some very clear messages from certain services, service users and patients about when they feel face to face is going to work better for them, and so we are reviewing all of our services through a reset process.

**Q10. Has the trust had any thoughts about how they can support our GPs locally as we have heard many patients are unable to get appointments?**

A10. Paul Bentley, Chief Executive, explained that community services and primary care work hand in glove and will continue to do so. In the last couple of years, the Trust has worked increasingly closely with the primary care networks in collaboration and have also been main stays in four place-based partnerships which include colleagues from primary care where there is a much more cohesive response. There clearly remains great pressure on primary care and the trust has been as supportive and collaborative as possible for the benefit of our patients and local population. Also, the trust has worked closely with primary care to deliver the Covid-19 vaccination programme and will continue to work closely through the winter months and thereafter.

**Q11. Are Minor Injury Units (MIUs) and Urgent Treatment Centres (UTCs) still operating via 111?**

A11. Pauline Butterworth, Chief Operating Officer, confirmed that MIUs and UTCs were still operating via 111 and this is the method for patients to get an appointment to attend these services.

**23/09/09 Closing remarks**

The Chair thanked the executive directors for their presentations and responses and invited members of the public to send in any further questions after the meeting.

Mr Goulston further thanked all KCHFT services and staff across Kent and Medway, East Sussex and inner and outer North East London for all their work over the last year.

He announced that the following non-executive directors would be stepping down from the Board over the coming months as their term was ending: Professor Francis Drobniowski and Ms Bridget Skelton. Ms Louise Norris, Director of Workforce, Organisational Development and Communications would also be retiring from the Board at the beginning of 2022. On behalf of the Council and the Board, he thanked them for their contribution to the work of the Trust and wished them for the future.

The following year's annual public meeting would be held on 28 September 2022.