

Annual members meeting Thursday 19th July 2018

Christine Mathewson Chris Outram Chairman Public Governor Roger Spencer Chief Executive Louise Westcott Company Secretary (Minutes) Action 1 Welcome & introduction CO welcomed our members, governors, staff and volunteers to the Annual Members meeting of The Christie 2018 where we will be looking at the work and achievements of the trust in 2017/18. CO thanked everyone for attending and commented that it is fantastic to see so many people here. It has been another great year with many new developments and steps taken towards our mission of providing world beating care, research and education. CO stressed that it is the people and especially our patients, who are at the centre of all this. She thanked everyone for their continued support. The formal part of the meeting will be followed by a presentation from Karen Kirkby. Chair in Proton Therapy Physics who will talk about developments with Proton Therapy. CO pointed everyone to the pack of information that contains the agenda and minutes and a feedback form. A summary of the annual report & accounts is also available to pick up in the fover. CO asked that attendees fill in the feedback form and post it into one of the silver boxes outside the auditorium. CO also invited everyone to stay for an afternoon tea following the meeting. 2 Report from the Chairman 2.1 **Minutes** CO noted that the minutes for the previous annual members meeting from 20th July 2017 are in your pack. These have been available on the website prior to today's meeting. CO asked that these are approved. Approved Governor elections & thanks 2.2 CO announced the results of the recent governor elections; Jackie Collins has been re-elected as public governor for Stockport (uncontested). Nick Coghlan has been re-elected as public governor for Wigan (uncontested). We also have 2 new governors; Maurice Gubbins has been elected as public governor for Cheshire and Craig Wellens has been elected as public governor for Rochdale. CO welcomed our new governors and added that she is looking forward to working with them. She also congratulated the existing governors on their re-election to the council. CO also noted that we have 2 outgoing governors both of whom have completed the maximum term allowed under our constitution of 9 years. Christine Mathewson completed 9 years as public governor for Rochdale and has also been a valued member of the Quality Committee and a very active supporter and advocate of the Trust in her community. CO added that the meeting would hear a bit from Christine on the work of the council in 2017/18. Alex Davidson has also completed 9 years as public governor for Cheshire. He has



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	been a valued member of the Quality Committee and has been our Lead Governor for the past 2 years. Alex has done lots of work in his area to promote the Christie as well as fundraising for The Christie Charity.	
2.3	Appointment of Directors	
	CO outlined the changes to the board in 2017/18;	
	There have been no changes to the non-executive members of the board.	
	CO noted that Eve Lightfoot was appointed as Director of Workforce, a non-voting member of the board in May 2017.	
2.4	Amendments to trust constitution	
	CO outlined that there have been no changes to the constitution in 2017/18.	
3	Report of the Chief Executive	
3.1	Annual report & accounts & future plans	
	RS welcomed everyone.	
	RS introduced the annual report & accounts and noted that at The Christie we are passionately committed to improving the outcomes and experiences for cancer patients.	
	In 2017/18 our team has delivered an outstanding set of results. RS described how the meeting would see a short film that describes some of the highlights of the last year. He first outlined some of the details.	

Quality Standards

RS noted that we met all the required quality standards across the year including our safety measures such as waiting list targets and extremely low infection rates. But most importantly we have received excellent feedback from our patients giving us excellent outcome and experience results. You will hear more about this shortly.

Financial Performance – our results were better than plan

We have made a consolidated surplus of £71.0m (charity & NHS). A contributing factor to the Trust's surplus is the proceeds from the insurance claim (£17.0m) made following the Paterson research building fire, and additional resource from the NHS Sustainability and Transformation Fund (£31.7m) which was made available to Trusts who exceeded their financial control total.

The charity has received £15.4m donations and funded £3.0m of projects NHS commissioners have invested in £17.4m more in patient treatments than in previous years

We have invested £56.7m on new assets including:

- Maintenance of patient areas to ensure they are of the highest standard –
 including the creation of a new Oak Road main entrance & associated enhanced
 patient facilities
- Replacement of linear accelerators for radiotherapy treatment
- Continued work on the Proton Beam Therapy development you'll hear more about this from Professor Kirkby later on.

Auditors Opinion

RS noted that we have been given a clean bill of health by our auditors – who set out in their report that our accounts are a true representation and we pass the required efficient, effective and economic tests.

Regulators Assessment

NHSI and CQC are monitoring our activities. We have complied with the required standards as well as achieving the best possible rating (1) in the NHSI Single



Oversight Framework which assesses performance across;

- quality of care
- finance and use of resources
- operational performance
- strategic change
- leadership and improvement capability

We are in the process of being reviewed again by the CQC and hope to maintain our Outstanding CQC rating.

RS noted that more information is available on the website and a full set of accounts can be requested if anyone would like to see them.

The video of the highlights of the year was shown.

RS asked that people help themselves to the summary review of the annual report and accounts that is available in the foyer.

CO thanked RS and introduced Christine Mathewson.

4 Report from the council of governors

Christine Mathewson (CM) introduced herself as the public governor for Rochdale and a member of the Quality Committee of the Council of Governors. She noted that she has been a governor for 9 years and is leaving the role this year.

CM informed the meeting that the governors work in the community and promote engagement and also work in the hospital.

CM gave a brief summary of the work of the council and its committees in 2017/18.

First off, the Membership & Community Engagement Committee continues to work to the Membership Strategy 2016 – 2019. The main focus of the 3 year strategy is on membership levels. This includes a focus on a representative and engaged membership and a retirement programme for members who wish to opt-out. Our current membership is around 19,400 members (including staff and volunteers), this has been reduced from around 30,000 members. The target membership is now 10,000 engaged members. As an example, members have engaged in the development of the Christie app.

The Quality Committee reviewed issues relating to patient safety, clinical effectiveness and patient experience. Staff present to the committee and update on issues like support for diabetic patients treated here. The committee are involved in the 'talking to patients' initiative that gives them direct engagement with patients, carers and front line staff. The feedback is overwhelmingly positive with any issues raised are dealt with by staff very promptly. They also received the quality accounts for the year.

The Development & Sustainability Committee has been involved with the Annual planning process and has worked on reviewing progress against the refresh of the Trust Strategy & the Operational Plan. This committee has also provided governor input to major capital programme developments including the Integrated Procedures Unit and Proton Beam Therapy as well as receiving updates on the financial planning process.

The Nominations committee meet where appointments need to be made, none were appointed this year.

The council of governors as a whole have had a good and busy year. Amongst other things they have reviewed the appraisals of the non-executive directors including the chairman and worked on the development of the refreshed strategy of the Trust.

CM concluded that it has been a pleasure to be part of the council for 9 years and thanks were given to the executive team for their support.



Action 5 Questions Q – What happened to the Equality & Diversity governor committee? RS responded that we have a lot of activities going on in the Trust in this area and we measure ourselves against the national workforce race equality standards (WRES). There is a committee that looks at these standards. We also publish data on the website. CO added that the board reviews the progress against the WRES and we are also inspected on this. Q - Have there been any developments in the Teenage & Young Adult Unit. RS responded that we have recently upgraded the Palatine Unit which houses the TYA and enhanced not only the environment but we are also increasing access to trials for this group of patients. Q – Do we work closely with MRI, particularly with lymphoma? RS responded that colleagues at Manchester Foundation Trust have lots of expertise and we work closely with them. Colleagues work between the 2 sites. CO added that the most important thing is that we work with our partners to do what's best for patients and this is what we do. Q – What is the schedule for the radiotherapy centre in Macclesfield? RS responded that we are at the stage where we are working hard to ensure that the feasibility and detail is worked out to ensure we can do this. We are looking at an 18 to 24 month timeframe. We are committed to doing this to reduce travel time for patients and this will be the main benefit for the patients from this part of Cheshire. CO welcomed KK to the meeting to speak about Proton Therapy. 6 Prof Karen Kirkby, Chair in Proton Therapy Physics KK presented on the proton therapy technology that is coming to Manchester. We have the most up to date technology; and we do research in order to ensure that we stay at the forefront of protons treatment. KK described what proton therapy is. She outlined that Rutherford discovered protons in Manchester in 1909. Protons have less of an entrance and exit dose, this is particularly good for treating paediatrics as there is a risk to secondary malignancies from standard radiotherapy. Protons have been around for a long time but we haven't had good enough imaging technology to enable protons to be used safely. Computing technology has improved that means we can now deliver protons effectively to patients. KK showed the meeting an animation of the cyclotron that delivers the protons. Our cyclotron at The Christie has been named Emmeline after Emmeline Pankhurst. KK showed a video of the beam being delivered to a tumour and explained how the gantries work and that the beam can be delivered from any angle as the gantry moves. KK outlined the research focus that connects basic science to the treatment of the patient to ensure we are at the forefront of technology and can translate research into improvements in treatment. KK outlined that there are now 30 people in the team and outlined some of the work that the research team are leading and progressing. Manchester are leading on proton research and working with colleagues across centres all over the world. For every £1 that The Christie Charity have donated to proton research the team have generated nearly £3 to use for further research. Questions were invited. Q – Will the scanning be done in the gantry? KK responded that there will be scanning before the delivery of the beam but



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imaging can also be done from the gantry. The ultimate aim is to use the beam to scan.	
Q – Are we prepared for the demands on the service?	
KK responded that there is an NHS list of indications that can be treated with proton therapy and that a national panel will look at each individual case.	
Q – How does the beam damage the cell?	
KK responded that it breaks DNA and produces free radical damage. We are starting to understand the way DNA is damaged and repaired.	
Q – What happens to the protons?	
KK responded that there are actually a very small number of protons delivered but their effect is very great.	
Q – Will BREXIT affect funding?	
KK responded that this is still uncertain and there may be an impact. We have contacts all over the world and are still working closely with Europe.	
Q – What will the patient see and hear whilst being treated?	
KK responded that the patient experience looks very similar to the standard radiotherapy experience, there will be some noise. This is how it has been designed.	
A patient in the audience who has experienced the treatment added that it is easier than having an MRI scan.	
KK concluded that it is really important to learn from the patient and hear about the patient experience so that the treatment can be improved. We are collecting information and learning from it.	
CO thanked everyone for attending and for the support given.	
Meeting closed.	

