

Trust Board Meeting in Public

Held on Thursday 27 November 2014 at 10:00am
Lecture Theatre
Queen Alexandra Hospital

MINUTES

Present:	Sir Ian Carruthers	Chairman
	Alan Cole	Non Executive Director
	Mark Nellthorp	Non Executive Director
	Steve Erskine	Non Executive Director
	Liz Conway	Non Executive Director
	Ursula Ward	Chief Executive
	Ben Lloyd	Director of Finance / Deputy Chief Executive
	Tim Powell	Director of Workforce & Organisational Development
	Simon Holmes	Medical Director
	Simon Jupp	Chief Operating Officer
	Nicky Lucey	Acting Director of Nursing
In Attendance:	Peter Mellor	Director of Corporate Affairs & Business Development
	Tamsin Enticknap-Green	Head of Nursing, Emergency Medicine CSC
	Cathy Stone	Director of Nursing (from 1 January 2015) (Observing)
	Michelle Andrews	(Minutes)

Item No **Minute**

197/14 Apologies:

There were no apologies.

Declaration of Interests:

There were no declarations of interest.

198/14 Patient Story

Tamsin Enticknap- Green, Head of Nursing, Emergency Medicine CSC, was in attendance for this item and delivered the following presentation:



Tamsin

Enticknap-Green No

The Acting Director of Nursing felt that this particular story shows how the department has acted upon patient feedback in order to make positive changes within the department. They had gathered the views of patients and relatives and worked as a team to make the improvements happen.

Liz Conway asked about the availability of security in the Emergency Department. Tamsin Enticknap- Green explained that security staff are available on call 24 hours a day, 7 days a week and are much more visible at weekends.

Steve Erskine asked what the small works were that hadn't yet been completed and asked whether there was any progress made with the business case for changing the layout within the department. Tamsin Enticknap- Green explained that the small works involved the hanging of curtains but this had now been completed. The Chief Executive explained that

once it was understood what the footprint of the department needed to look like, the department would be redesigned. Some areas needed more of a focus than others for example, minors.

The Chief Executive was pleased to report that the relative who had raised this particular complaint was now interested in taking a more proactive role in the future of the hospital.

The Chairman was pleased to see that the department had fully engaged this patient and his family in making improvements to the department, particularly in the pressured environment the staff are working in.

199/14 Minutes of the Last Meeting – 30 October

The minutes of the last meeting were approved as a true and accurate record.

200/14 Matters Arising/Summary of Agreed Actions

185/14: Integrated Performance Report – The Medical Director explained that the difference between true readmissions and planned readmissions had not been reflected in the report as it is difficult to capture without undertaking an audit, so an audit would be undertaken and the results would be reflected in a future report.

189/14: Assurance Framework – Liz Conway explained that the membership for the Risk Assurance Committee was due for review at its next meeting.

All of the actions on the grid had been completed.

201/14 Notification of Any Other Business

There were no items of any other business.

202/14 Chairman's Opening Remarks

The Chairman reflected on the position of the Trust during the last month. Demand for unscheduled care continued with pressure on flow throughout the organisation. Unscheduled care was the number one priority for the Trust and the progress with the improvement action plan needed to be faster and sustainable. He extended his thanks to all of the staff for their hard work and dedication.

He was very pleased to have attended the Trust's annual Best People Awards, where a number of staff had been awarded for their dedication and commitment during the last year. The event showed the pride of the workforce in the organisation and highlighted some of the excellent people who work here. He congratulated all of the winners and thanked the team of people who organised such an excellent event.

The Chairman welcomed Cathy Stone to the meeting who would be joining the Trust as the substantive Director of Nursing from 1 January 2015. He thanked Nicky Lucey for her exemplary contribution whilst acting as the Director of Nursing.

203/14 Chief Executive's Report

This report was noted by the Board. The Chief Executive drew attention to particular areas of her report:

- Best People Awards – held on the 14 November and took place at the Marriott hotel, thanks to the sponsorship of the Trust's Joint Consulting Negotiation Committee (JCNC).
- Best of Health Awards – saw a number of staff/teams win awards or recognition for their services to the NHS.
- HSJ Awards – The Diabetes Team were highly commended and the Research &

Development Team won an award in the category for Innovation. She praised the hard work of the individuals involved.

- NHS England 5 Year Forward View – the Trust Board is currently in the process of refreshing the Trust's 5 year strategy.
- CQC Inspection - the Trust has an announced CQC Inspection the week commencing 9 February 2015. This will be followed by an unannounced inspection within 2 weeks of that date. Detailed preparations are underway for the inspection. The inspection will give the public an opportunity to share their views about the Trust and we encourage the public to take part in these events.
- Recent Publications:
 - King Funds document about Leadership
 - PwC document about a Safer NHS
 - Document about complaints within the NHS
- Alcoholism is a major problem in the local area which causes overwhelming consequences for the Trust. A lot of innovative work has taken place around alcohol induced liver disease. She was pleased to report that an article about this work had recently been published in the Lancett and would also be covered by the local media throughout the day. She recognised all of the staff involved in this work, particularly Dr Richard Aspinall.
- Publication of outcomes – outcomes by individual Surgeon were now being published, with 5 specialties chosen so far. The Trust welcomed the publication of such data.
- Team Brief is a tool used internally to highlights the areas of excellence across the Trust. She advised that from now on, the Team Brief presentation would be included with the Board papers.

The Medical Director drew attention to a patient who had recently been admitted with possible Ebola. He was pleased to advise that the planned process was enacted immediately and everything went according to plan. Whilst this particular case turned out not to be Ebola, it showed that the necessary processes were in place should a real case arise.

204/14 Integrated Performance Report

Quality

The Acting Director of Nursing advised that overall there were 16 indicators on track, she however, drew attention to particular areas of the report, where performance was off track:

- Pressure Ulcers – Year to date position is 20 patients with avoidable pressure ulcers against an annual trajectory of 28.
- Falls – Year to date position is 19 patient harm events as a result of a fall against a trajectory of 32.
- Single Sex Accommodation – there had= been no further breaches since the incident in May. The year to date position is 1 breach (affecting 8 patients) against a trajectory of 0.
- C.Difficile – The year to date position is 30 patients with hospital acquired C.Difficile against an annual trajectory of 31. The Medical Director advised that a root cause analysis is undertaken for every case of C.Difficile and no themes had been identified. Hand hygiene peer audits have shown an improvement in performance and there is year on year improvement with anti-biotic prescribing.

Mark Nellthorp asked whether increasing the number of door handles which automatically dispense cleaning gel when touched, would help with infection control hand hygiene. The Medical Director was not confident in the impact those particular door handles would have. He felt that the issue was more around the cleaning around the bed space and the use of antibiotics.

The Chairman was pleased at the effort being made with many of the performance metrics; he was confident that some of them were so close to being achieved. He felt that some thought needed to be given to what could be done differently next year.

There was some discussion about how the Trust might think differently about loneliness and boredom for some of the elderly patients.

Operations

The Chief Operating Officer drew attention to particular areas of the report:

- Unscheduled care – performance against the 4 hour target during October was 82.3% compared to the agreed improvement trajectory of 93%. Performance so far for November was at 84% and was rising. The Urgent Care Board, led by the Chief Executive, had representation from all organisations in the local health economy and was responsible for driving the improvement plan. The actions within the improvement plan need to be embedded much more quickly ensuring sustainable performance going forward.
- RTT – Performance of the admitted 90% target during October was 88.9%. This was a planned and agreed fail of this standard so that the Trust could address the number of patients waiting more than 15 weeks. This planned fail would continue during November and would enable the Trust to achieve all 3 standards and a maximum of 35 weeks from December onwards.
- Diagnostic wait times had improved and the 99% standard was achieved for the month of October.
- Cancer – The Trust had only achieved 7 of the 9 standards during October due to capacity, particularly in Urology. 2 new Consultants had recently joined the Trust and the impact of this should be seen imminently.
- Stroke – The Trust achieved 2 of the 4 performance standards during October with emergency pressure throughout the hospital impacting on the ability to achieve the standards.

Finance

The Director of Finance reminded that the financial report had been scrutinised in detail at the Finance Committee earlier this week. He highlighted key areas of the report:

- Month 7 has seen an adverse variance against plan of £5.4m, this reflects:
 - £2.6m shortfall on the savings programme
 - £1.7m shortfall on SLA income
 - £0.6m escalation beds opened
- A detailed recovery plan has been developed by the Executive Team and is being implemented to improve the financial position. The Executive Team is working closely with the CSC's to identify any further opportunities.
- The forecast for year end is a surplus of £0.5m against the originally planned surplus of £1.2m.

Workforce

The Director of Workforce drew attention to particular areas of the report:

- Workforce expenditure increased in October to £22.85m
- Temporary workforce usage decreased by 0.5% to 8.4%.
- Appraisal compliance at 84.7% however some CSC's were still not compliant.
- Flu vaccination – currently 58% of staff vaccinated against flu. 41% of front line staff have been vaccinated. Whilst this is a better position than the national picture, the Trust is keen to encourage more staff to be vaccinated.
- The National Staff Survey is due to close shortly and the response rate is better than the national average with over 50% of staff having responded.
- Staffing levels reported at 98.1% against the planned requirement with some obvious pressure points.

A discussion ensued about the ongoing risks of the shortage of registered nurses in the UK. Many Trusts have employed nurses from other countries in Europe and as a result, the source of registered nurses from Europe was drying up. The Trust needed to look at other ways of working including collaboration with other Trusts and working more creatively with other staff groups.

Steve Erskine was concerned at the decrease in the number of staff who have had fire training. The Director of Workforce was equally concerned and agreed that fire training was important.

205/14 Self Certification

The Director of Corporate Affairs and Business Development presented the Self Certification to the Board, seeking approval for the Chairman and Chief Executive to sign it off prior to submission to the Trust Development Agency at the end of the month.

He drew attention to Board statement 10, highlighting the non-compliance for A&E performance.

He advised that some of the risks which had been included on previous submissions had now been removed.

The Self Certification was approved by the Board for submission to the TDA.

206/14 Assurance Framework

The Acting Director of Nursing presented the Board Assurance Framework and drew attention to the top 7 risks and 1 risk with a decreased score.

She reminded that the Assurance Framework was a live document and the risks within it, and associated scores, can change at any time.

207/14 Risk Register

The Acting Director of Nursing presented the Risk register and drew attention to the:

- 9 top risks
- 2 risks with an increased score
- 1 risk with a decreased score
- 1 new risk
- 2 risks to be removed

208/14 Audit Committee Report

The Board noted this report.

Steve Erskine drew attention to 3 particular areas:

- Fire risk assessments and associated actions
- Limited assurance on the internal audit of estates and facilities
- Report from the Local Counter Fraud Specialist

209/14 Charitable Funds Update

The Board noted this report.

The Director of Corporate Affairs advised that new branding had been developed and implemented for the Hospital Charity, following consultation with staff. The Charity would work closely and complement the existing Rocky Appeal. The Charity would soon become more noticeable with various posters being erected around the Trust.

The Director of Finance highlighted a risk to next year's payment towards the Robot based on the current income from the Rocky Appeal.

210/14 Non Executive Directors' Report

Steve Erskine advised that he had recently attended an Foundation Trust Network event for Non Executive Directors and it was apparent that some of the issues facing this organisation

were the same as many other Trusts across the country. The meeting had presentations to the changes in role of the Audit Committee and a slightly different approach to Board Assurance Frameworks.

Liz Conway advised that she had recently been a patient on the Surgical Assessment Unit and had been very impressed by the treatment she received.

211/14 Annual Workplan

The Board noted the workplan.

212/14 Record of Attendance

The record of attendance was noted by the Board.

213/14 Opportunity for the Public to ask questions relating to today's Board meeting

Robin Marsh, Governor, asked whether the Board now had all of the skills and talents needed in order to successfully run the Trust over the next few years and through the Foundation Trust journey. The Chairman reminded that the NHS was facing some challenging times and as a consequence, it is unknown what changes might occur within the NHS. However the Board would be looking at its skill distribution over the coming months to ensure that it has all the skills it needs. A Board development programme would be put in place to ensure that it has the right people with the right skills in the right positions. The Board needed to be proactive to any challenges coming in the future and he felt that there was a gap in the Director portfolios particular around strategy and business development.

Ernie Wells, Governor, asked what the Trust had done in order to be prepared for the winter pressures. The Chief Executive advised that there was an Urgent Care Board in place to address the current shortfall in order to get to a sustainable position. A system wide improvement plan has been established which included clear metrics for each organisation on what improvements were needed. Operational resilience money had been secured which would be used to address the winter pressures.

Roland Howes, Governor, was disappointed to see that fire training compliance had reduced and felt that it was one of the key training subjects. The Chairman agreed that it was a very important subject and advised that a lot of effort has gone into improving the compliance rate. Steve Erskine advised that fire had recently been scrutinised by the Audit Committee who had recognised the amount of work which has gone into improving the situation around fire.

Roland Howes, Governor, referred to the appraisal rates and was concerned that some of the CSC's were still not meeting the targets, particularly since the introduction of the new appraisal process. The Director of Workforce advised that the change in the appraisal process had been implemented to ensure that appraisals were good quality and meaningful to all. Whilst the new process had not necessarily improved the compliance rate, it is clear from the pulse survey results that the quality of appraisals had improved. The compliance rates are not as good as they should be and the Trust would soon be implementing a zero tolerance policy and would expect to see real improvements early next year.

Sue Mullan, 38 Degrees, asked for more information about the overseas recruitment of nurses and the packages offered to them. The Director of Workforce advised that many Trusts have now started recruiting nurses from other countries across Europe and some offer relocation and retention packages. Whilst all Trusts are recruiting from the same pool of nurses, there is a real need for collaboration to ensure consistency with the offer of packages.

214/14 Any Other Business

There being no further items of any other business, the meeting closed at 12:10pm.

Date of Next Meeting:

Thursday 29 January 2015

Venue: Lecture Theatre, Queen Alexandra Hospital