

Trust Board Meeting in Public

Held on Thursday 3 December 2015 at 10:00am

Lecture Theatre
Queen Alexandra Hospital

MINUTES

Present:	Sir Ian Carruthers	Chairman	
	Mark Nellthorp	Non-Executive Director	
	Steve Erskine	Non-Executive Director	
	John Smith	Non-Executive Director	
	Liz Conway	Non-Executive Director	
	Mike Attenborough-Cox	Non-Executive Director	
	Ursula Ward	Chief Executive	
	Tim Powell	Director of Workforce & OD	
	Simon Jupp	Director of Strategy	
	Cathy Stone	Director of Nursing	
	Ed Donald	Interim Chief Operating Officer	
	Chris Adcock	Director of Finance	
	Simon Holmes	Medical Director	
	In Attendance:	Peter Mellor	Director of Corporate Affairs
		Gemma Hobby	PA to Trust Board (Minutes)
Barry Hodgson		Head of Education Healthcare Science & Allied Health Professions (Staff Story)	
Alice Appleford		Trainee Associate Practitioner (Staff Story)	
Amy Regan		Trainee Pharmacy Technician (Staff Story)	

Item No **Minute**

201/15 Apologies:

None

Declaration of Interests:

There were no declarations of interest.

202/15 Staff Story

Barry Hodgson, Head of Education Healthcare Science & Allied Health Professions, introduced Alice Appleford, training as an Associate Practitioner in Blood Sciences and Amy Regan, training as a Pharmacy Technician within the Pharmacy department and asked them to share their experiences as apprentices at Portsmouth Hospitals NHS Trust.



PHT Technical
Apprenticeships Dec 2

Following the presentation the Chairman thanked Barry, Alice and Amy and invited questions.

The Director of Nursing asked what Alice and Amy would say to anyone thinking of doing one of these placements and what the organisation could do to make them even better. Amy and Alice explained that they would advise anyone to go for it as they feel the value of work placements is underestimated. They had both received great support so it is difficult to say what they would improve; so they would just advise keep doing more of the same.

Steve Erskine, Non-Executive Director, asked how other members of staff had reacted to them as apprentices. Amy and Alice explained that, on the whole, everyone had been very supportive.

The Chairman expressed a big 'well done' to both Amy and Alice and thanked Barry for his continuing outstanding contribution.

203/15 Minutes of the Last Meeting – 29 October 2015

Liz Conway, Non-Executive Director, pointed out a slight correction to the final paragraph of the finance section on Page 5. It was agreed that the minutes would be amended; otherwise the minutes were approved as an accurate record of the meeting.

204/15 Matters Arising/Summary of Agreed Actions

193/15: Information Risk SIRO Annual Report – The Director of Corporate Affairs had circulated a report comparing Portsmouth Hospitals NHS Trust with other Trusts throughout the country and a briefing paper produced by the IT Department highlighting cyber and network security.

Steve Erskine, Non-Executive Director, asked whether there are plans in place to review and improve IT security. The Director of Corporate Affairs assured the board that the IT Dept. is continually working to make improvements and the Director of Strategy explained that he is currently working with IT on this.

205/15 Notification of Any Other Business

None.

206/15 Chairman's Opening Remarks

The Chairman emphasised key points:-

- He noted the recent need to divert attendees to the Emergency Department on different occasions during the past month and how the intense pressure on the department continued. He expressed both his thanks and his admiration to all those who work in the hospital, as the amount of patients coming through the hospital is relentless.
- The Best People Awards had taken place last week. This is an annual award ceremony where the Trust recognises people for their excellence; it is a very uplifting occasion. However, it is important not to forget the other 7,000 members of staff who work here and he gave his thanks to them all; most of them do not consider what they do as being special but as just part of their everyday job.
- He was very pleased to confirm the Non-Executive Director appointment and re-appointments, including Liz Conway, Mark Nellthorp as Senior Independent Director, Steve Erskine as Deputy Chairman, Mike Attenborough-Cox and John Smith.
- Following the recent comprehensive spending review, the government is to give the NHS £2billion more than planned. Whilst this is a generous settlement compared to most other Government Departments, this amount of money will not fully resolve the financial position within the NHS. The road ahead will still be very challenging.

207/15 Chief Executive's Report

The Chief Executive drew attention to particular areas within her report:

- 28 systems had been identified by the centre as ones that would benefit from intensive support in terms of Unscheduled Care; we were one of them. A report had been produced by some very experienced clinical staff from outside of the organisation and this had identified a selection of things that we might do to improve the current situation. This included working closely with the health and social care system to identify a clear plan. The Chief Operating Officers from the three local provider units had been working closely together and had produced a series of recommendations which they had presented to the accountable officers across the system. This has resulted in some additional investment which has been agreed by our commissioners.
- Whilst she, in her role as Chief Executive, had thanked her equivalents in the different organisations that had assisted with patient diverts, she thought that it would be a good idea to send an official 'thank you' from the Trust Board. She also wanted to acknowledge the hard work of all of our staff in helping to keep patients safe.
- The Junior Doctors strike had now been cancelled.
- The Trust had recently won the HSJ award for technology and innovation.
- In relation to the pressure the organisation is under, the Chief Executive had been holding a number of briefing sessions with different groups of staff. These had been good constructive meetings and had been welcomed by staff.
- The Director of Corporate Affairs had been accompanying the Chief Executive to a series of Governor's Public meetings where she had given a presentation on our recent Care Quality Commission Inspection. She was delighted to note the excellent support for the Trust from both our local communities and our Governors.

John Smith, Non-Executive Director, asked how often ambulances, with patients from other organisations, were diverted to us. The Chief Executive explained that we were very rarely in a position to be able to offer help, however it had happened in the past.

John Smith, Non-Executive Director, asked whether there had been any financial implications as a consequence of the Junior Doctors strike. The Director of Workforce & OD replied that no financial implications had been anticipated and that it was expected to have been 'cost neutral'.

Liz Conway, Non-Executive Director, asked for an update on the Lord Carter review. The Director of Workforce & OD explained that there was a meeting scheduled for later in the week with Lord Carter and his team and a further meeting had been arranged to include the Director of Finance.

208/15 Integrated Performance Report

Quality

The Director of Nursing drew attention to the following areas, with supporting comment from the Medical Director:

- She was keen that the contribution of the staff be fully recognised by the Board. This is a very challenging time; yet our staff continue to provide high-quality, compassionate care. Our greatest asset is our staff.
- It is disappointing to note an increase in the number of falls. However we have seen an improvement in November which will be reflected in the next Board report.
- There had been an increase in the number of moves at night time as a consequence of the extreme pressure. Our teams are working hard to minimise the disturbance to patients by moving them earlier in the day.
- There has been a recent decline in the number of patients recommending our Trust through the Friends & Family test, predominantly within the Emergency

Department. This is linked to the deterioration of the patient experience as a result of the immense pressure. The Patient Experience Team has been visiting the Emergency Department and speaking to patients to see what can be done to improve the situation.

- Hygiene and cleanliness continues to be of a very high standard throughout the hospital.
- Incidents of MRSA remain at zero. There had been were 3 CDiff cases during the month against a trajectory of 4. CDiff cases are increasing across the country; so it is gratifying to see that our infection rate is below trajectory and continuing to decrease. There have been 3 MSSA cases against an expected number of 4.
- Mortality rates are very similar to previous months, so our HSMR and SHMI remain the same.
- The reviews of the death of every patient reveal no differences between those coming through the elected pathway than those coming through the unscheduled pathway.

Steve Erskine, Non-Executive Director, asked about our duty of care in relation to falls. The Director of Nursing explained that whilst there had been a cause for concern at the time, no trend had been identified and she was pleased to report an improvement this month. Liz Conway, Non-Executive Director, pointed out that there had been recent publicity linking the number of patients who suffer from falls to those who use hearing aids.

Mark Nellthorp, Non-Executive Director, felt that there was an obvious causal link between the number of falls and a hospital that was under severe pressure. The hospital is working above capacity and it is clearly affecting the quality of the care that we are providing. The Medical Director explained that extra beds had been opened (around 75) which would have a negative impact on clinical incidents. The Chairman was determined that any decline in quality should be immediately reversed and assured his Non-Executive colleagues that the quality of care and patient safety would remain the priority.

The Chief Executive explained that there had been a National concern in relation to maternity and the mortality rates of those babies that were born at the weekend. The Trust had investigated the local situation and she was pleased to be able to reassure the Board that this was not an issue at Portsmouth Hospitals NHS Trust.

Liz Conway, Non-Executive Director, explained that she had read recently of an increase in the number of patients suffering from HIV and asked whether it was anticipated that this would have any impact on us. The Medical Director explained that HIV patients locally are the responsibility of Solent NHS Trust.

Operations

The Interim Chief Operating Officer drew attention to particular areas within his report:

- There continues to be a huge demand on the hospital; so the main focus is on patient safety and getting patients as quickly as possible to the relevant ward.
- A range of measures to take, in relation to the large number of those patients in hospital that don't need to be here, had now been accepted and agreed by our local Commissioners; so we are now pulling together with our community partners.
- Despite the challenging environment, teams are maintaining the constitutional access targets; for October incomplete standards were achieved, diagnostic wait standards were achieved, 7 of the 8 cancer standards were achieved, 31 days achieved and 62 day standard achieved, Urology is improving (numbers have halved); whilst the number of patients who are medically fit for discharge had increased to 150 plus.

John Smith, Non-Executive Director, expressed concern at the well-being of our staff and cautioned of allowing the pressure to reach breaking point.

Steve Erskine, Non-Executive Director, acknowledged the positive response from our partners but asked if there was a shared view in relation to the capacity within the local healthcare system. The Interim Chief Operating Officer felt that there was not a clear understanding of the local capacity and felt strongly that the system needed to make a short term investment to increase capacity to enable patients to be treated in the community.

Steve Erskine, Non-Executive Director, reminded that we had been told many times before of improvements to the discharge regime and wondered what would be different this time. The Medical Director felt confident that some positive changes had been identified.

The Chairman was frustrated that these different initiatives had still not produced the required outcome. He felt strongly that the pace of change was an issue and sought assurance that we were working on the right things to get the results we need.

Finance

The Director of Finance highlighted some key areas from his report:

- The pressure the hospital continues to face from Unscheduled Care demand is a key factor in the adverse financial position.
- The position year to date is £17.4M deficit. The report sets out a potential year end deficit of £23.6M. A number of opportunities for improvement as well as further risks have been identified and are being managed and reviewed to ensure no further deterioration in the financial position and that improvement are secured wherever possible.
- The cash position is currently satisfactory but will become an increasing risk between now and the end of the financial year.
- We continue to deliver more activity than planned.
- The cost Improvement Plan forecast has been revised down as a result of the detailed validation book and the development of mitigations is part of the approach the Trust is adopting through CSC performance review meetings.

Steve Erskine, Non-Executive Director, welcomed the clarity and accuracy provided within the report and encouraged the Trust to concentrate on those opportunities that could be delivered. The Director of Finance confirmed that the projected year end position assumed the continuation of the current unscheduled care pressures.

Workforce

The Director of Workforce & OD drew attention to particular areas of his report:

- Workforce capacity remains stable.
- Recent nursing recruitment had been very effective.
- However, this has not resulted in an equivalent reduction in agency staff. This was mainly as a consequence of the significant pressure that we are under.
- The organisation is compliant with the new capping for agency framework costs. Some agencies are not reducing their agency rates; so we will need to look at this.
- The rate of Appraisals has held up well, particularly when taking into consideration the on-going pressures. However, the completion of Essential Skills is a particular issue with medical and dental staff.
- There is still a significant proportion of our workforce who have yet to have a flu vaccination.

Mark Nellthorp, Non-Executive Director, was pleased to hear that the majority of nurse vacancies had been filled but asked how that squared with the safe staffing report. The Director of Nursing confirmed that we will have achieved our full nursing complement by the end of the year.

Mark Nellthorp, Non-Executive Director, asked what would the likely impact be of the Chancellors announced changes with regards to nurse training and an increase in the number of nurses. The Director of Nursing explained that this would take the cap off higher education student places and should therefore generate more trainees. The Director of Workforce & OD was nervous of the introduction of fees.

John Smith, Non-Executive Director felt that it is a reflection of our staff the fact that the sickness figures are so low but queried how we are going to deal with the issue with agency staff usage. Then Director of Workforce & OD explained that this all leads back to Emergency Care and resolving the issues there. Mike Attenborough-Cox, Non-Executive Director suggested adjusting arrangements with agency in order to reduce cost. The Director of Workforce & OD explained that there is a risk with doing that at the moment.

The Chairman summarised the Integrated Performance Report update and thanked all for their hard work at such a difficult and challenging time.

209/15 Self-Certification

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

The Director of Corporate Affairs explained that there had been no changes since last month and that the self-assessment reflected our failure to meet the 4 hour Emergency Department waiting standard, a risk against our ability to meet cancer 62 day first definitive treatment and the delivery of RTT. This reflects our position at the end of October. We have been assured that we will continue to have full support from the TDA with regards to our current financial position.

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

210/15 Quarterly Research & Innovation Report

Dr Greta Westwood, Deputy Director of Research & Innovation joined the Trust Board to present the Quarter 2 Performance Report on Research & Innovation.

The Chairman then invited the Board to ask questions.

Liz Conway, Non-Executive Director asked for more detail regarding Table 4.2.

Steve Erskine, Non-Executive Director congratulated Dr Westwood for a very good report and recognised the importance of Research & Innovation to the Trust. He suggested that it would be good to know what the research has resulted in, for example the end product for the patient. It might be difficult to include within future reports but he would welcome an understanding.

Mark Nellthorp, Non-Executive Director, referred to table 3.1 where there is quite a discrepancy between the CSCs and asked whether there was an issue with the engagement of particular CSC staff in research. Dr Westwood explained that if you are not research active you cannot take part in research studies; so where there are less research trained consultants you will see a resultant reduction in activity. Some feel they should do it as part of their job but that is not the opinion of all CSCs.

Mike Attenborough-Cox, Non-Executive Director felt that we should recognise that people are doing this work in their own free time and asked Dr Westwood to pass on thank you to the team.

John Smith, Non-Executive Director felt this work to be very impressive and queried how often Consultants need to be trained and how long the training takes. Dr Westwood explained that this has to be done every 2 years and takes around 4 hours online.

The Chief Executive felt that huge progress has been made with this but that we still need to get Research & Innovation to be seen as a core part of the Trust, almost like a separate CSC. There are real opportunities to transform patient care.

The Chairman felt this was very impressive work and thanked all the team. We are very proud of what has been achieved.

211/15 Risk Register

The Director of Nursing presented the Trust Risk Register to the Board for discussion. The Board were then asked for comments or questions.

Steve Erskine, Non-Executive Director, queried the Stroke Service pathway and the long term impact. The Medical Director explained that whilst Stroke had shown some improvements, it was often impacted by Unscheduled Care; for example some patients do not get to the ward on time or spend the correct time on the ward. We are still driving towards a specialist centre; this is just a blip due to the current pressures. Steve also pointed out the fire risk which was missing from the Risk Register. The Director of Corporate Affairs clarified that there is a plan in place for recommendations in relation to fire and the Director of Nursing agreed to ensure this is included.

Other than the above, all agreed they were content with the Risk Register.

Action: Director of Nursing to ensure Fire included on Risk Register.

212/15 CQC Quality Improvement Plan

The Director of Nursing presented the Care Quality Commission Improvement Plan to report on progress and highlighted some key points.

- Page 2 of front sheet shows on-going compliance action with 'must-do's' and demonstrates that we are very much sighted on this.
- We have established a monthly care quality review. The process is open to all and 45 people had attended on the last occasion.
- The deadline for the Governance actions has been put back. The Director of Nursing and Director of Corporate Affairs met with DAC Beachcroft yesterday to discuss how best to develop a new assurance framework and a new approach to risk.
- The actions within the Unscheduled Care pathway have not been completed and remain 'red'. We have been tasked with re-profiling the actions.

The Board noted the report.

213/15 Audit Committee

Steve Erskine, Non-Executive Director presented the Audit Committee update for November and the Audit Committee Annual Report to the Board. The November report highlighted particular areas including reference costs strategy, Internal Audit Plan, audit of software licencing, changes in External Audit and Counter Fraud personnel, and that from 2017/18 the Trust will be responsible for the appointment of its External Auditors. The annual report is a consolidation of previously reported issues which include fire risk assessments, clinical coding and review of the Trust's accounts. The report also contained a review of the effectiveness of the Audit Committee and the External Auditors.

The Board noted the report.

214/15 Charitable Funds Update

The Director of Corporate Affairs presented the Charitable Funds Activity Report. He pointed out the diversity of the fundraising schemes that have been introduced by the Fundraising Team. Mark Nellthorp, Non-Executive Director, wished to echo the Director of Corporate Affairs comments and agreed that the Fundraising Team have made a huge impact.

The Board noted the report.

215/15 Non-Executive Directors Report

Liz Conway, Non-Executive Director, congratulated those who had arranged the Best People Awards – it had been a great event. The Chief Executive confirmed that she had sent a 'thank you letter' to all of those that had been involved. The Chairman also expressed his thanks for a splendid occasion.

216/15 Annual Work plan

The annual work plan was noted by the Trust Board.

217/15 Record of Attendance

The record of attendance was noted by the Trust Board.

218/15 Opportunity for the Public to ask questions relating to today's Board meeting

None

219/15 Any Other Business

The Director of Corporate Affairs explained that a review of the Trust governance arrangements had recently been completed. The date of Trust Board meetings would now change to the first Thursday of the month; the next meeting being on Thursday 4 February. Full details will be sent out.

The Chairman closed the meeting by wishing everyone a very Happy Christmas and thanked everyone for their support this year.

220/15 Date of Next Meeting:

Thursday 4 February 2016

Venue: Lecture Theatre, Education Centre, Queen Alexandra Hospital