

**TRUST BOARD MEETING  
MINUTES  
Open Session  
29 June 2017**

<b>PRESENT</b>	Valerie Bartlett	Deputy Chief Executive/Director of Strategy and Transformation
	Mike Baxter	Non-Executive Director
	Hilary McCallion	Non-Executive Director
	David Fluck	Medical Director
	Neil Hayward	Non-Executive Director
	Michael Imrie	Chief of Patient Safety/Deputy Medical Director
	Chris Ketley	Non-Executive Director
	Keith Malcouronne	Non-Executive Director
	Simon Marshall	Director of Finance & Information
	Louise McKenzie	Director of Workforce Transformation & OD
	Aileen McLeish	Chairman
	Terry Price	Non-Executive Director
	Suzanne Rankin	Chief Executive
	Tom Smerdon	Director of Operations – unplanned care
	James A Thomas	Director of Operations – planned care
	Meyrick Vevers	Non-Executive Director
<b>SECRETARY:</b>	Liz Davies	Acting Company Secretary
<b>APOLOGIES:</b>	Heather Caudle	Chief Nurse
<b>IN ATTENDANCE</b>	Mark Hinchcliffe	Programme Office Manager ( <i>item 6.6</i> )
	Giselle Rothwell	Head of Communications
	Russell Wernham	Deputy Chief Nurse/Associate Director of Quality

Minute		Action
	<b>Declaration of Interests</b>	
	There was no declaration of interests.	
<b>O-77/2017</b>	<b>MINUTES</b>	
	<p>The Chairman opened the meeting and welcomed members of the public and Russell Wernham, Deputy Chief Nurse.</p> <p>The minutes of the meeting held on 25 May were AGREED as a correct record.</p>	
<b>O-78/2017</b>	<b>MATTERS ARISING and ACTION LOG</b>	
	<p>The Trust Board reviewed all of the actions contained within the minutes of the previous meeting. Nominated leads confirmed that all the respective actions had been completed, appeared as agenda items for the meeting or were on track within the agreed timescales.</p> <p><b>O-58/2017</b> – It was confirmed that suggestions on how we might celebrate other staff groups will come to Board in September.</p>	
	<b>REPORTS</b>	
<b>O-79/2017</b>	<b>Chairman's Report</b>	
	<p>The Chairman drew attention to the following matters in the report:</p> <ul style="list-style-type: none"> <li>• <b>The election</b> has resulted in no one party having an overall majority and Jeremy Hunt remains as Secretary of State for Health. There is unlikely to be a change in the overall priorities of the NHS and spending plans are unlikely to change although there have been hints by the Secretary of State that there may be increases in salaries for front line staff.</li> <li>• <b>First Steps Day Nursery</b> at St Peter's Hospital has achieved a 'Good' rating following its latest unexpected Ofsted inspection. The report shows how impressed the Inspectors were with what the staff do in the nursery for the children. Well done to Dawn Hunt and the team.</li> <li>• <b>Better Births Launch</b> - Surrey Heartlands is one of 7 pilot sites in the country receiving funds to trail-blaze a new integrated way of working. As an early adopter we will test a range of new and innovative ways of working that will help to transform maternity services across Surrey Heartlands STP to reflect the needs of all women and their babies. Baroness Julia Cumberledge, author of the 2015 Better Births Report joined the launch.</li> </ul>	

	<ul style="list-style-type: none"> <li>After a long and distinguished career at the Trust (34 years), Dr Grundy, Microbiology Consultant, is retiring and his last day is tomorrow, 30 June.</li> </ul> <p>The Board RECEIVED the report.</p>	
<b>O-78/2017</b>	<b>Chief Executive's Report</b>	
	<p>The Chief Executive highlighted the following in the report:</p> <ul style="list-style-type: none"> <li><b>An inquest</b> into the tragic death of baby Sophie Burgess, whilst receiving care and treatment at the Trust in June 2016, was opened 19 June and suspended after a number of days to enable a further police investigation. The Trust is supporting the police investigation with openness and transparency The Trust recognises this is a very difficult time for everyone involved and has conveyed deepest condolences to Sophie's parents and family and a number of more personal communications have been undertaken. Until the conclusion of the investigation it is not possible to comment further.</li> </ul> <p>We have already taken a range of definitive actions and will continue to do whatever is necessary to ensure no child or family ever has to go through anything like this again.</p> <ul style="list-style-type: none"> <li><b>Staff Benefits Week</b> is a key component of the Trust's Workforce Strategy. The Chief Executive reported that a member of staff had sought her out especially and said, "You have changed my life, I have a new car on order which is really exciting." This was made possible as the Trust now offers a car leasing scheme for staff.</li> </ul> <p>The staff benefits 'app' includes some of the national benefits that are available for all NHS staff such as the pension scheme details, together with local benefits that are just for our Trust staff - local discounts that we've negotiated with local companies and businesses.</p> <ul style="list-style-type: none"> <li><b>Annual Research and Development Open Day</b> was very well attended, an enthralling event demonstrating how the power of collaboration and research can inspire and create the conditions for the highest quality most efficient and effective care and treatment.</li> <li><b>Surrey Heartlands Devolution</b> will provide an opportunity to make more local decisions. An agreement has been signed by NHS England, NHS Improvement, Surrey County Council and our three Surrey Heartlands Clinical Commissioning Groups outlining how partners will work together to improve the health outcomes of the 850,000 people living across Surrey Heartlands. It also means more local accountability for the spending of health and social care budgets.</li> </ul>	

	<ul style="list-style-type: none"> <li>• <b>Named as CHKS Top Hospital</b>, an accolade awarded to the top performing CHKS client trusts. This is part publicity, and reward for being a top performing hospital. The Top Hospitals award is based on the evaluation of over 22 key performance indicators covering safety, clinical effectiveness, health outcomes, efficiency, patient experience and quality of care.</li> </ul> <p>We were shortlisted in two categories; CHKS Quality of Care Award 2017 and CHKS Healthcare Efficiency Award 2017. This is further evidence of our commitment to making a difference and ensuring patients who use our services receive the highest standards of care at all times.</p> <ul style="list-style-type: none"> <li>• <b>Stroke Services in West Surrey</b> – it was noted that the ‘Committees in Common’ meeting to make decisions in relation to the Stroke Services Review and the outcome of the public consultation has been postponed.</li> </ul> <p>The Board RECEIVED the Report.</p>	
	<p><b>PERFORMANCE</b></p>	
<p><b>O-79/2017</b></p>	<p><b>Quality Improvement Strategy and Next Steps</b></p>	
	<p><i>This item was taken early in the agenda.</i></p> <p>The Deputy Chief Executive/Director of Strategy and Transformation introduced the document which describes some of the progress made so far as well as the plans for the year ahead. In addition, we have outlined some steps that the Board can take to help in the delivery of the strategy and in helping to create a culture for improvement - a culture of ‘curiosity and creativity’.</p> <p>It was noted that Trusts that have done well have embraced Quality Improvement (QI) and there is evidence to show that this has led to good quality outcomes.</p> <p>The Chief Executive reported on the Quality Improvement event yesterday; the theme of which was “Everyone is an improver”. We heard from a variety of colleagues, clinical and non-clinical, from all levels of the organisation, about the improvement work they have undertaken over the last year, working with their teams to improve patient experience and patient safety.</p> <p>There were two keynote speakers. Dr John Harden, National Clinical Lead for Quality and Safety at the Scottish Government, talked about some inspiring examples of improvements in patient safety that have been made in Scotland through the application of QI methodology across the whole health sector.</p> <p>Professor Tom Downes, Consultant Geriatrician and Honorary Senior Lecturer at Sheffield Teaching Hospitals NHS Foundation</p>	

	<p>Trust, described how the application and spread of QI in Sheffield has led to the transformation of the care of frail older patients in the city; and he was very supportive of the ASPH approach to QI.</p> <p>We also had a video message from Jim Mackey, Chief Executive of NHS Improvement, sending a personal message of support for our QI work.</p> <p>Mark Hinchcliffe, Programme Office Manager drew attention to Section 4 which outlines next steps in three key areas:</p> <ul style="list-style-type: none"> <li>• Alignment of Quality Priorities Mobilisation of Efforts – pick one or two things to mobilise</li> <li>• Building Improvement Capability – embedded in the Manager’s Toolkit</li> <li>• Building Our Reputation as a Leader in Improvement – giving talks at conferences etc.</li> </ul> <p>It will be important for Board members to be present, consistent champions of QI to reinforce the message to staff. We currently run executive walkabouts which take a QI approach and would encourage other board members to take part; and Mark will be looking at coordinating the opportunities to make this happen.</p> <p>The QI Academy is available to all staff wishing to develop the key improvement skills for change and to get started with their QI activities. We aim to embed objectives for improvement within our management structures and expectations for personal development for all staff.</p> <p>Mark reiterated that the most valuable contribution the Board can make in embedding a culture of improvement is by their presence and being regular and visible champions of improvement.</p> <p>Neil Hayward, Non-Executive Director observed that it is a well written document and that Section 3 resonated.</p> <p>The Board RECEIVED the Report.</p>	
	<p><b>QUALITY AND SAFETY</b></p>	
<p><b>O-80/2017</b></p>	<p><b>Quality and Performance Committee Minutes (QPC)</b></p>	
	<p>Hilary McCallion, Non-Executive Director and Chair of the committee reported that in July the formal meeting will be suspended and a meeting will take place between the Non-Executive Directors who attend the QPC, Divisional Directors, and Executive Directors to discuss the future format of the QPC using a Quality Improvement approach.</p> <p>The following items were highlighted and had been discussed at the meeting in May :</p> <ul style="list-style-type: none"> <li>• The Maternity Deep Dive Stillbirth Audit Report is complete;</li> </ul>	

	<p>and the action plan focuses on learning.</p> <ul style="list-style-type: none"> <li>• Falls Service</li> <li>• Mortality Reviews</li> <li>• Pressure Ulcer Report</li> </ul> <p>Mike Baxter, Non-Executive Director added that on a monthly basis QPC will be tabling presentations from the wards. In June there was a presentation from Cedar Ward which provided good insight and this will be reported on next month.</p> <p>The Board RECEIVED the Minutes.</p>	
<p><b>O-81/2017</b></p>	<p><b>Quality Report</b></p>	
	<p>It was accepted that the report had been read, and the following matters were highlighted from the report:</p> <ul style="list-style-type: none"> <li>• A slight rise in mortality rate in May</li> <li>• We are preparing a business case on the resource required to deliver the mortality review process, and it has been agreed to use the first month of the new process to carry out a retrospective review of the winter mortality spike. The paper will go to the Trust Executive Committee.</li> <li>• There has been a decrease in the uptake of I Want Great Care in Maternity and we are monitoring the issue. It has been agreed to implement a poster campaign to increase visibility across the trust</li> <li>• Pressure Ulcers were above target this month.</li> </ul> <p>The Board NOTED and obtained ASSURANCE from the report.</p>	
<p><b>O-82/2017</b></p>	<p><b>Safer Staffing Report</b></p>	
	<p>This paper provides a review of the safer staffing levels within inpatient areas in the Trust in accordance with the national reporting requirements and guidelines. The Trust continues to follow its policy on safer staffing escalation, thus supporting the delivery of safe, high quality care.</p> <p>It was noted that regular, daily meetings with senior staff take place on meeting safer staffing levels. The challenge is recognised and risks are constantly being mitigated through daily actions and professional judgement.</p> <p>The Deputy Chief Nurse noted that Aspen Ward had been flagged as a unique case with their model of staffing – they have opted <i>not</i> to replace bank with agency staff due to the specialty of patients. It was confirmed that Aspen Ward is scheduled to present to QPC and will be reported on next month.</p>	

	<p>The Chief Executive confirmed she had spoken with the Divisional Chief Nurses about their decision not to replace bank staff and their response was that they had elected to understaff and not use agency.</p> <p>It was noted that applications by students in England for nursing and midwifery courses at British universities have fallen by 23% after the government abolished NHS bursaries.</p> <p>A discussion took place on recruitment and retention and an overview of the Trust's position was requested.</p> <p>The Trust is working with the University of Surrey, and Hilary McCallion, Non-Executive Director noted that Surrey is ranked one of the top universities for nursing.</p> <p>Hilary asked that we formally record that she sits on the London South Bank University Board where they train nurses and provide newly qualified nurses.</p> <p>The Director of Finance and Information reflected that one area we should consider is the midwifery service. There is the potential for a change in demand and we need to have a better understanding of birth rates in Surrey. It was noted this was a strategy piece to be undertaken in relation to our future workforce model.</p> <p>The Board NOTED and obtained ASSURANCE from the Report.</p>	
	<p><b>PERFORMANCE</b></p>	
<p><b>O-83/2017</b></p>	<p><b>Performance Report</b></p>	
	<p>The Performance Report was taken as read. The following matters were highlighted from the report:</p> <p><i>A&amp;E</i></p> <p>The Trust missed the 4 hour A&amp;E NHSI standard in May with performance recorded at 91.24%. Our daily attendance increased in May with last Sunday and Monday reaching 341 and 352 respectively.</p> <p>There were two days in May recording 77 and 103 breaches respectively which triggered the attention of the Regulators. Analysis has shown that we have a problem with flow and staffing levels in the evening. It was noted that in delivering the 93% 4 hour NHSI standard by July, the leadership in the department at night will be crucial.</p> <p>The Trust has been awarded £600,000 government funding to help streamline our A&amp;E service. Under the plans, patients who walk into AE could be referred to an on-site GP if their medical condition is deemed suitable thereby freeing up emergency resources in the</p>	

	<p>department.</p> <p>The Deputy Chief Executive/Director of Strategy and Transformation added that we should give further thought to leading an Emergency Department with different workforce solutions. The following comments were noted:</p> <ul style="list-style-type: none"> <li>• Recruit the right people</li> <li>• Engage the team</li> <li>• Consider the cycle of the day</li> </ul> <p><i>Cancer</i></p> <p>The Trust is expected to report compliance for 6 of 7 Cancer standards for May;</p> <p>The failing standard was;</p> <p>62 Day Screening Service; 1 breach due to patient choice who cancelled on the day of the appointment.</p> <p><i>RTT</i></p> <p>The Trust has remained compliant for the 18 weeks Incomplete Pathway Performance recorded at 93.6% and demonstrates a consistent performance.</p> <p>The Board NOTED and obtained ASSURANCE from the report.</p>	
<p><b>O-84/2017</b></p>	<p><b>Balanced Scorecard</b></p>	
	<p><i>Skilled, Motivated Workforce</i></p> <p>The Director of Workforce Transformation and OD reported that the Trust's vacancy rate stands at approximately 15-16%. We currently have 66 registered nurses and 70 unregistered in the pipeline, of which 57 are from overseas.</p> <p>This month we can report an improvement in our engagement scores which is positive news.</p> <p>We continue to develop our workforce retention plan and are involved in the Let's Work Together project in Kent, Surrey &amp; Sussex. This is an online summit bringing all health and care staff from across the region to share their opinions and ideas to build a collective understanding in solving the staff retention challenge.</p> <p><i>Top Productivity</i></p> <p>The Director of Finance reported that May was in line with plan and it has been a busy month. Our cost base has been well managed and is under control. The Trust reported an in-month surplus of £0.8m against a planned surplus of £0.7m resulting in a £0.1m favourable in-month variance.</p>	

	<p>The Trust remains on track with the NHSI control total at month 2 accruing the full amount of STF funding for month 2 as the A&amp;E performance target was also met</p> <p>It was noted that the Director of Operations for planned care reported a good month with theatre utilisation.</p> <p>The Board NOTED and obtained ASSURANCE from the scorecard.</p>	
<b>O-85/2017</b>	<b>Financial Management Committee Minutes</b>	
	The Board RECEIVED the Minutes.	
<b>O-86/2017</b>	Financial Management Committee Terms of Reference	
	The Board RECEIVED the Terms of Reference.	
	<b>REGULATORY</b>	
<b>O-87/2017</b>	<b>National Inpatient 2016 Survey Summary Report</b>	
	<p>This paper summarises results from the 2016 CQC National Inpatient Survey. All eleven sections of the 2016 survey remain in the 'about the same' category when compared to other Trusts. This is the same position as at 2015. The score for Overall Experience (question 74) has increased marginally (+0.1).</p> <p>Two questions have moved to within the 'worst performing' category compared to the previous year These are question 15 regarding noise at night, and question 65 on clear information about medication.</p> <p>Further analysis of the annual trends will be presented at a Trust workshop to support the development of improvement plans, run by the Picker Institute.</p> <p><b>Action</b> It was agreed to distribute the additional comments received from patients made in response to questions 85 and 86 respectively, <i>Was there anything particularly good about your hospital care?</i>, and <i>Was there anything that could have been improved?</i></p> <p>Terry Price, Non-Executive Director expressed his dismay at the inordinate length of time it takes Picker to produce the results.</p> <p>The Board RECEIVED the report.</p>	<b>RW/LD</b>
<b>O-88/2017</b>	<b>Trauma Unit Annual Report</b>	
	It was noted that the report to the Board had been withdrawn as it is required to go to the Quality and Performance Committee first for review.	

<b>O-89/2017</b>	<b>NHSI Self-certifications</b>	
	<p>As part of the Annual Plan Review process 2017/18 the board must sign off on self-certification. We are required to submit two self-certification documents; and this is the second of the certifications, Corporate Governance Statement.</p> <p><b>Action</b> It was agreed to review the risks and mitigations set down in relation to Statement 4, "The Board is satisfied that the Trust effectively implements systems and/or processes", with particular reference to the Well Led review.</p> <p>The Board APPROVED the self-certification.</p>	<b>SR/LD</b>
<b>O-90/2017</b>	<b>ANY OTHER BUSINESS</b>	
	<p>The Deputy Chief Executive/Director of Strategy Transformation reported that in light of the Grenfell Tower fire tragedy we are making an initial assessment of the external cladding of Trust buildings and checking the materials used. This will also include all buildings not managed directly by us and where trust staff work, and staff residential housing. A detailed review will be submitted to the Trust Executive Committee in due course.</p>	
<b>O-91/2017</b>	<b>QUESTIONS FROM THE PUBLIC</b>	
	<p>In response to a question about the Trust's Major incident plans; it was confirmed that following the Manchester bombing we reviewed and checked our continuity plans and an item on mass casualty management is scheduled at the Trust Executive Committee in August.</p> <p>A comment was also noted on the Trust "being good" but not getting the appropriate media attention.</p> <p>The Head of Communications responded that we have regular communication with the Surrey Advertiser however the paper is considered Guildford centric.</p>	
	<b>DATE OF NEXT MEETING</b>	
	<p>The next meeting of the Trust Board will take place on 27 July at St Peter's Hospital.</p>	

**Signed:** .....  
Chairman

**Date:** 29 June 2017