

**TRUST BOARD MEETING
MINUTES
Open Session
26 November 2015**

PRESENT	Nadeem Aziz Valerie Bartlett Philip Beesley Heather Caudle David Fluck Sue Ells Clive Goodwin Simon Marshall Aileen McLeish Terry Price Suzanne Rankin Peter Taylor	Non-Executive Director Deputy Chief Executive Non-Executive Director Chief Nurse Medical Director Non-Executive Director Non-Executive Director Director of Finance & Information Chairman Non-Executive Director Chief Executive Non-Executive Director
SECRETARY:	Liz Davies	Acting Company Secretary
APOLOGIES:	Robert Peet	Chief Operating Officer
IN ATTENDANCE:	Michael Imrie	Deputy Medical Director & Chief of Patient Safety

Minute**Action****Declaration of Interests****O-135/2015 MINUTES**

The minutes of the meeting held on 29 October were AGREED as a correct record, with the following amendments.

O-118/15 p. 4, second paragraph - change, "the trust will be hosting some military nurses, the programme starts in February" to "the trust will be hosting some military nurses, one nurse will join us in February and the programme starts in November."

Change date of next meeting to read 26 November 2015.

O-136/2015 MATTERS ARISING

The action log identified that all items were up to date in accordance with agreed time scales and complete with updates for each action noted on the Action log.

O-112/2015 – Transport The Director of Finance & Information reported that he had not received a response in regard to the transport issue and this would be taken forward for next time

O-122/2015 – Learning Disabilities The Chief Nurse confirmed that this action was progressing through QAPC and the action was closed.

O-137/2015 Junior Doctor industrial action update

The Medical Director reported we are well prepared for the first day of action, and that the second and third days full walk out has been discussed in Divisional performance meetings and plans have been formulated. The biggest risk is A&E.

The news today reports that the government has agreed talks with ACAS (Advisory, Conciliation and Arbitration Service) in an attempt to avert the strike. However, it is felt that the junior doctors are keen to carry out their strike action. The Director of Workforce Transformation added that the doctors plan to picket outside the front at St Peter's Hospital and will move to Guildford in the afternoon.

The Medical Director noted that a balanced discussion had taken place at the Medical Staffing Committee; a representative from the British Medical Association had been present and advised that the action could include consultants. It was concluded to discuss junior doctor engagement at the Workforce & OD Committee (WOD)

Action: Reflection at WOD.

REPORTS

O-138/2015 Chairman's Report

The Chairman noted the following from her report.

- Results of the recent governor elections for Runnymede, Windsor, and Maidenhead Constituency. Andrew Ryland and Danny Sparkes were both re-elected and Lilly Evans was elected as our new governor. Margaret Lenton was not re-elected and the Chairman confirmed she is to meet with her in the near future.
- The Research & Development Open Day chaired by our Deputy Chairman Professor Philip Beesley was an excellent day and provided an opportunity to hear direct from patients who had benefitted from research carried out at the trust.

The Board RECEIVED the report.

O-139/2015 Chief Executive's Report

The Chief Executive referred to the Chairman's report which highlights the number of trust awards this year and added this can only aid in raising the profile of the trust. We have also been short-listed for the Kent, Surrey & Sussex Innovation Awards for falls and AKI (Acute Kidney Injury).

The Trust won three awards at the international WOW awards. Midwife, Kirsty Addison for Going the Extra Mile, the Leadership Award went to Jules Potter, Head of Organisational Development and Judith Thompson,

Acting Learning and Development Manager, and Wordsworth Ward for WOW! What A Team.

Peter Taylor, Non-Executive Director, commented that we can make effective use of these awards for internal marketing.

The Director of Workforce Transformation stated that we still have a lot of work to do to improve the perception of the trust as an employer and wished to formally record thanks to Colleen Sherlock, Head of Workforce Planning & Resourcing for all her hard work in this area, i.e. staff benefits, launching the social club, and improving the employee section of the Trust website, all of which is having an impact. Louise added we will be linking the annual awards to our value-based behaviours and our internal, multi-channel campaign has already started and includes the Chief Executive's weekly message and the messages appearing on our work screensavers.

The Chairman made note that Spelthorne Borough Council had launched a mobile app to meet customer expectations and provide easy access to services which is proving a success and something we could consider.

The Board RECEIVED the report.

O-140/2015 PERFORMANCE

Performance Report

The following issues were highlighted from the report:

RTT incomplete pathway

- The Trust remained compliant for October at 96.1%, and all specialties achieved compliance.

Cancer

- We are compliant with cancer waiting times for October. The root causes of breaches against the 62 day standard have been fully analysed with improvement activities at the Trust and with tertiary partners scheduled to deliver sustainable improvement and resilience in ongoing achievement of this standard.

A&E Performance:

- Performance was better at the beginning of the month; however pressures are building with the SPH site performance recorded at 88.3%, which is 6.7% under the recovery trajectory target. In mitigation we are reviewing all medically fit for discharge patients on a daily basis and linking with Social Care to enable the system to achieve the four hour standard, and efforts are focused in the following areas;
- Reducing Length of Stay and Improving Internal Patient Flow
- Reducing Demand, and
- Right- Sizing the Bedded and Non-Bedded Capacity within the

Trust and Community.

The Chief Executive referred to Appendix A, the Urgent Care Recovery Plan, and confirmed this had been sent to the Clinical Commissioning Group (CCG) and sets out the current recovery plan activity and the root cause analysis of breach reasons.

Discussion took place on the plan and the following points noted:

- The shifted emphasis to flow
- Support the clinical leadership
- The need for someone to lead the project

Action:

Schedule a visit and explanation of the ED pathway for NED's in the new year. Provide a description of the model. – Chief Operating Officer

The Chief Executive added that we benchmark well with our peers and are doing well on other targets. Monitor is to arrange a meeting with the executive team by end of November to discuss our governance rating.

Outpatient Improvement Project

Appendix D provides an update of the project. Following a brief discussion on the project's progress it was suggested to carry out a stock check of the project to assess the alignment of methodology. The Deputy Chief Executive added that it would also be helpful for the Executive team to attend the next Transformation Board and discuss the OPD project.

The Board NOTED and obtained ASSURANCE from the report.

O-141/2015 **Balanced Scorecard**

Skilled Motivated Workforce

The Director of Workforce Transformation reported we are sustaining a marginal improvement in staff turnover:

Agency expenditure as a percentage of the pay bill increased this month to 9.4%, and remains above target. We are reporting on non-compliance in line with our agreed trajectory in relation to the Monitor price caps for agency staff in all staff groups. Monitor is happy for us to work to the 8% cap and in October and November we met the cap, although the challenge will increase month on month. Other points to note:

- In mitigation we continue with various recruitment campaigns
- 21 Filipino nurses arrive tomorrow
- The Trust continues to work towards converting agency to substantive posts
- We have set up a nurse Revalidation Working Group
- Encouragement of temporary workforce to work over the winter period, e.g. non-clinical healthcare assistant.

A discussion took place on maintaining a safe hospital within the cap and

the Chief Nurse confirmed that control is managed at ward level and staff projections are included in the workforce report submitted to the Finance Management Committee. The Director of Workforce Transformation gave assurance that the Chief Nurse/Director of Finance and Workforce team all work closely together to ensure that the relevant controls and processes are in place.

The Chief Executive added that although we aspire to achieve a complete, substantive workforce, it is not possible in some areas, for example in A&E and that we must focus on our strategic direction with current staff levels.

Nadeem Aziz, Non-Executive Director added that sound progress had been made over the last few months and the visibility of control at Finance Committee is good.

Top Productivity

The Director of Finance & Information reported that overall it's been a good month and we are doing well.

The Board NOTED and obtained ASSURANCE from the scorecard.

O-142/2015 Finance & Performance Committee Minutes

The Chair of the Committee highlighted the continued improvement of reports that feed into the Committee.

The Minutes were RECEIVED by the Board.

QUALITY AND SAFETY

O-143/2015 Integrated Governance Assurance Committee Minutes

The Chair of the Committee highlighted the following from the minutes of the meeting held on 17 September.

- Membership of the committee has been modified and Divisional Directors will attend the meeting from February 2016.
- A short paper will come to Board to brief on the changes to the committee structure
- Slight slippage on CQC Action Plan compliance; plans are in place to achieve the actions within the given timeframe.

The Report was RECEIVED by the Board

O-144/2015 Quality Report

The Chief of Patient Safety reported that the last three weeks show mortality is significantly lower than this time last year.

Philip Beesley, Non-Executive Director noted that response to complaints was dipping again and that we need to understand the cause. The Chief Nurse replied that due to the re-introduction of timescales there have been

a few outliers and the reasons are recorded in the report narrative.

The Chief of Patient Safety noted that stroke performance shows a decline because of problems with ring fencing beds due to operational pressures and confirmed that there is work on the pathway to be completed. However, it was recorded that performance on admissions for October is good.

The Chief Nurse reported that we are to encourage more reporting of medication errors as we don't benchmark well with other trusts. As a result we are likely to see higher levels of reporting, however it was noted that more reporting of errors leads to increased patient safety.

The Chief Nurse drew attention to the revised quarterly schedule of Best Care Audits which started in October. Table 1 provides a summary of this month's audit results and action plans will be presented at the Best Care Surveillance Panels set for December 2015.

The Deputy Chief Executive noted that the audit shows that surgical wards appear to fare less well and suggested we correlate this information with the CQC Action Plan and meet with the surgical team to address the issues highlighted.

The Board NOTED and obtained ASSURANCE from the report.

O-145/2015 Safer Staffing Levels

The Chief Nurse referred to the last 9 months' data and noted the following:

- The fill rate of substantive staff has reduced
- Our ability to staff safely has improved although dropped in October due to the agreed ward uplifts
- Mitigation approach over time has been successful
- The paper demonstrates our ability to respond to staffing levels deemed not to be safe
- The new Escalation Policy describes the actions to be taken and mandate to report red flags

The Chief Nurse referred to the fill rates described in Table 4 and an action to bring an exposition to Board was agreed.

The Board NOTED and obtained ASSURANCE from the report.

O-146/2015 Trust Risk Register (TRR)

The Chief of Patient Safety reported that the Register had not been brought to Board for a number of months. The Risk Scrutiny Committee meets quarterly and a number of risks had been suggested although not formally notified.

Philip Beesley, Non-Executive Director and Chair of IGAC stated that the position had been discussed at IGAC in November. It had been agreed at IGAC to look at the process for scrutinising risk and to take a refreshed

TRR to the Trust Executive Committee in December for review.

The Board NOTED the update.

O-147/2015 Board Assurance Framework (BAF)

The Chief Executive reported that there was one risk in relation to staff to be added and that an extensive review/refresh is on hold pending the proposed merger.

The Board NOTED and obtained ASSURANCE from the Report.

O-148-2015 Patient Panel Report

Sue Ells, Non-Executive Director made note that three Panel members have now joined the Patient Advisory Group and will help North-West Surrey Clinical Commissioning Group Integrated Care Programme design and deliver the first Locality Hub in the community.

The Board RECEIVED the Report.

STRATEGY AND PLANNING

O-149/2015 Winter Plan Summary 2015/16

The Chief Executive introduced the summary which covers important learning from last winter and noted that the Trust has instigated a number of key initiatives since winter 2014/15 which is detailed in the plan summary.

It was noted to adjust point 8 on p.3 and remove the wording “with the exception of Christmas day.”

The Board NOTED and obtained ASSURANCE from the report.

REGULATORY

O-150/2015 Audit Committee Minutes

Terry Price, Non-Executive Director and Chair of the Committee drew attention to the Internal audit plan status report. Final reports have been issued for the four audits, two of which provide reasonable assurance and two limited assurance. The report notes limited assurance around safeguarding and this matter has been referred to the Quality and Performance Committee. It was noted that the six recommendations outstanding on quality assurance would be overseen and actioned by the Quality & Performance Committee.

The Minutes were RECEIVED by the Board.

O-151/2015 Financial Management Committee Terms of Reference

The Terms of Reference were APPROVED by the Board.

ANY OTHER BUSINESS

O-152/2015 Board Agenda

Philip Beesley reported that the Working Group would be meeting again in February and would be reviewing submission of board papers.

QUESTIONS FROM THE PUBLIC

O-153/2015 A question was raised regarding information on wait times on arrival at A&E. The Chief Executive said part of the solution will be the Urgent Care Centre which could see up to 50% of patients attending A&E. The Head of Communications noted that the Clinical Commissioning Group was doing a collaborative piece for local radio on advising patients to see their GP or visit the Pharmacist, and delivering the established message about A&E and what constitutes an “emergency”. The Chief Executive added that it is difficult as the public trust the A&E “brand” and stated that a new model of care will build on the brand.

It was noted that we have a volunteer helping in A&E explaining the wait, and our A&E wait times are publicised on the Trust website:

<http://www.ashfordstpeters.nhs.uk/>

Clive Goodwin suggested that we investigate the use of ‘mobile apps’ in other trusts.

The Chief Nurse reported that the trust has received clearance on C Difficile and Norovirus.

DATE OF NEXT MEETING

The next open meeting of the Trust Board will take place on 28 January 2016 at St Peter’s Hospital

Signed:
Chairman

Date: 26 November 2015