

**Board of Directors Meeting**  
**Minutes of the Meeting held in Public**  
**Monday, 4 April 2016**  
**at 9.30am in the Boardroom, Leighton Hospital, Crewe**

**Present:**

Mr D Dunn	Chairman
Dame P Bacon	Non-executive Director (Deputy Chair)
Mrs T Bullock	Chief Executive
Mr J Barnes	Non-executive Director
Mr J Church	Non-executive Director
Mr M Davis	Non-executive Director
Dr P A Dodds	Deputy Chief Executive/Medical Director
Mrs D Frodsham	Chief Operating Officer
Mr D Hopewell	Non-executive Director (Senior Independent Director)
Ms A Lynch	Director of Nursing and Quality
Mrs R McNeil	Non-executive Director
Mr M Oldham	Director of Finance and Strategic Planning

**In attendance:**

Ms E Carmichael	Director of Workforce & Organisational Development - Designate
Mrs C Ralphs	PA to Director of Finance & Strategic Planning
Ms H Williamson	Ward Manager, Ward 12 – <i>item 16/04/2</i>

**Observing:**

Mrs B Beadle	Public Governor
Mr S Eaton	Divisional General Manager – Surgery & Cancer
Mrs J Roach	Public Governor
Mrs B Smith	Volunteer

**BoD16/04/1 Welcome and Apologies for Absence**

- 16/04/1.1 The Chairman welcomed everyone to the meeting and explained that Mr S Eaton was observing the Board meeting as part of his development on the Nye Bevan Programme.
- 16/04/1.2 The Chairman welcomed Ms E Carmichael who is due to commence with the Trust in May 2016 as Director of Workforce and Organisational Development.
- 16/04/1.3 Apologies for absence were received from Ms L Hughes, Interim Trust Secretary and Mr J Lyons, Lead Governor.

**BoD16/04/2 Patient and Staff Story**

- 16/04/2.1 Ms A Lynch presented a patient and family story that centred on the care and treatment provided to a patient on Ward 12. The patient's daughter, through recorded video, told the Board of the compassionate and caring way her mum and her family were cared for by the team at Leighton Hospital, and particularly Ward 12. The patient's daughter told us that they were overwhelmed by the care and support her mum and the family received. The Board heard that not only did nursing and medical staff provide care above their expectations, but that small things such as porters and cafeteria staff recognising them as they visited and asking 'how is your mum today' made a difference to the overall experience. Sister Helen Williams, Ward Manager

from Ward 12 was in attendance to hear the story and the Board thanked her for her leadership role and also recognised and reflected on the work of other teams in estates and facilities and how staff throughout the whole Trust was perceived by the family. The Chairman thanked Sister Williams and asked that Ms Lynch convey the Board's thanks to the patient's daughter and the family for sharing such an important story with the Board.

16/04/2.2 **Resolved:** The Patient and Staff Story was noted.

**BoD16/04/3 Board Member Interests**

16/04/3.1 There were no new interests declared and no interests declared in relation to open items on the agenda.

**BoD16/04/4 Minutes of the Previous Meeting**

16/04/4.1 The minutes of the last meeting held on 1 February 2016 were accepted as an accurate reflection subject to minor typographical errors and:

16/03/11.7 – “explained that the Trust would continue to use RAMI”, should read “explained that the Trust would *not* continue to use RAMI *after March 2016*”

16/03/13.3 – “national reporting requirements for patient falls” should read “national reporting requirements for *inpatient* falls”

16/03/4.2 **Resolved:** The minutes of the last meeting held on 7 March 2016 were accepted as an accurate reflection subject to changes in 16/04/4.1 above.

**BoD16/04/5 Matters Arising and Actions from Previous Meeting**

16/04/5.1 There was only one Matters Arising in addition to those included on the agenda.

16/03/30.1 Local Supervision of Midwives – Ms A Lynch advised that the formal report had now been received and noted the positive feedback. An action plan had been developed following their recommendations.

16/04/5.2 The Action Log was reviewed and the two completed actions were agreed to be closed. The three open actions were discussed:

15/07/11.3 *Stroke Services* – Mrs D Frodsham indicated that the business case should be ready for either the May 2016 or June 2016 Board of Directors meeting. Mrs D Frodsham agreed to confirm the date with Ms L Hughes to update the Action Log.

16/02/8.2.1.3 *Council of Governors meeting* – it was agreed that this item would be closed.

16/03/7.3.1 *South Cheshire and Vale Royal CCG* – The Chairman confirmed he had formally written and the CCGs had agreed for the two Boards to have a Board to Board meeting and dates were currently being sought.

16/04/5.3 **Resolved:** The progress made with regards to Board actions was noted.

**BoD16/04/6 Annual Work Programme**

16/04/6.1 Mr M Oldham advised that as the Trust does not currently have a signed contract with commissioners, it was not possible for the annual budget to be presented today. Mr M Oldham added that an interim budget pack would be presented to the May 2016 meeting, with the final report to the June 2016 meeting.

16/04/6.2 Ms A Lynch explained that the report on Nursing & Midwifery Staffing was now included in the Patient Quality & Safety report, timings remaining the same.

16/04/6.3 **Resolved:** The Annual Work Programme for the financial year 2016/17 was noted and approved.

**BoD16/04/7 Chairman's Announcements**

16/04/7.1 The Chairman provided a verbal report on the following:

**16/04/7.2 Subscription Renewals**

16/04/7.2.1 It was noted that subscription renewals had been received for NHS Confederation and NHS Providers. The Chairman noted the NHS Confederation subscription had been renewed at a cost of approximately £3,000 and asked the Board for their view regarding value for money in respect of NHS Providers, as this was approximately £15,000 for the year. It was agreed that it was an effective group but that the rise in fees should be challenged.

16/04/7.2.2 **Resolved:** To approve the subscription renewal for NHS Providers in principle, but to seek some negotiation before renewal.  
**ACTION: (Mrs T Bullock)**

**16/04/7.3 Cheshire East Council**

16/04/7.3.1 It was noted that there had been some significant leadership changes in Cheshire East Council. The Chairman advised that meetings had been arranged for Mrs T Bullock and himself with the Chief Executive, Mr Michael Suarez, and Councillor Paul Bates, Portfolio Holder for Communities and Health. The Chairman added that a meeting had also been secured with the Leader of the Council Rachel Bailey.

**16/04/7.4 University Hospitals of North Midlands NHS Trust**

16/04/7.4.1 The Chairman noted that Mrs T Bullock and himself were to meet with the Mr John Macdonald, Chairman and Mr Rob Courteney-Harris, Interim Chief Executive of UHNM in the near future .

17/04/7.5 **Resolved:** The Chairman's verbal update was noted.

**BoD16/04/8 Governors Items**

16/04/8.1 The Chairman provided a verbal update on the following items:

16/04/8.2 **Governor Statutory Duty Training Facilitated by Dr J Bevington (Deloitte)**

16/04/8.2.1 It was noted that Governors' Statutory Duty Training facilitated by Dr Jay Bevington from Deloitte was held recently and the consensus was that it was both useful and effective. The training session was followed a week later with the Governor and Non-executive Director meeting which will be reported to the next Council of Governors' meeting on 21 April 2016. It was noted that out of the current 27 Governor complement, 14 Governors had attended the training session facilitated by Dr J Bevington and as there was an opportunity to re-run the session the Chairman asked the Board whether an additional session should be offered to the Council of Governors. In response to the Chairman's query the Board's inclination was to not re-run the training session but to canvas Governors views.

16/04/8.2.2 **Resolved:** It was the inclination as a Board not to re-run the training session but to canvas Governors' views at the next Council of Governors meeting on 21 April 2016.

16/04/8.3 **Governor Vacancies**

16/04/8.3.1 It was noted that there were now two vacancies on the Council of Governors due to Ms Gill Fairhurst submitting her resignation and the Chairman would be setting an election programme for later in the summer. The Chairman noted he had written to Ms Fairhurst on behalf of the Board and Council of Governors to thank her for her involvement as a Governor.

16/04/8.4 **Resolved:** the Chairman's verbal update was noted.

**BoD16/04/9 Chief Executive's Report**

The Chief Executive provided a verbal report on the following items:

16/04/9.1 **Sustainability and Transformation Plan (STP) Development**

16/04/9.1.1 It was noted that the lead for the development of the Cheshire & Mersey Sustainability and Transformation Plan had been announced as Ms Louise Shepherd, Chief Executive, Alder Hey. Mrs T Bullock added that an STP Group had been established to oversee STP development and that the Cheshire & Mersey Provider Chief Executives had nominated 6 providers to be included in the Group, but no response has been received to date.

16/04/9.1.2 Mrs T Bullock advised that the Connecting Care Board had met recently and the workplan was presented for the forthcoming financial year. Mrs Bullock suggested that the workplan be paused until June / July 2016 to enable the development of the Local Delivery Plan for Cheshire to be written which was agreed and meetings were being arranged urgently to proceed with writing the narrative.

16/04/9.2 **Community Services**

16/04/9.2.1 Mrs T Bullock updated the Board regarding developments in respect of the re-commissioning of Community Services. Mrs T Bullock noted that as this was a significant transaction that a sub-committee of the Board would be established in due course that would report directly to the Board. Mrs Bullock

noted the Trust is working closely with Cheshire Wirral Partnership Trust (CWP) and the GP Alliances on two areas of work: (i) the Business Case, which is a significant piece of work to include due diligence, care model and the NHS Improvement process, which will be presented to the Board; and (ii) the commissioner led process for the re-commissioning of Community Services. The two pieces of work will run in parallel and Mr M Oldham and Mrs D Frodsham will be in discussion with NHS Improvement to ensure the correct process is followed.

16/04/9.3 **Cavendish Group**

16/04/9.3.1 Mrs T Bullock noted the Group had received an update from all Vanguards. A session had taken place from Mr Adrian Masters (NHS Improvement) and Mr Richard Baker (NHSE North) regarding the planning guidance with key messages that the 5 year view was still the way forward; services should be defined around populations not institutions; and the need to control deficits. Mrs T Bullock also noted that small DGHs were now seen to have a key role in future developments as they were seen as more innovative and flexible and In recognition of this the last planning guidance included a new models programme titled the 'reinvention of acute model' which is specifically aimed at small DGHs.

16/04/9.4 **Reinvention of the Acute Medical Model**

16/04/9.4.1 It was noted that the Trust had submitted a bid to be part of this new models programme. The team stated that on this occasion all Trusts expressing an interest would take part. A survey was submitted on the 17 March 2016 and the new models team visited the Trust on 31 March 2016. Mrs T Bullock explained that this project appears to be a vanguard in everything but name, however, with much more limited funding; circa £2M between 23 organisations, to be used for backfill so staff can find time to do the work. From the survey submitted on 17 March 2016 and the meeting on the 31 March 2016 a number of key challenges and interests were distilled down to four key priorities: Senior Decision-making at the Door (Front of House); Frailty models; Specialist in reach; and Telemedicine and Tele-education. Mrs T Bullock added that further discussions will take place to establish where quick pilots and trials could take place.

16/04/9.5 **Cheshire & Mersey Chief Executives Meeting**

16/04/9.5.1 It was noted that at the last meeting significant concerns were raised regarding discrepancies in the data around nursing posts commissioned. There appeared to be a lack of synergy between Health Education England (HEE) and Local Workforce Education Groups and this was of concern. It was also noted that NHS Improvement would be taking a greater interest in HEE going forward.

16/04/9.5.2 Mrs T Bullock also reported on discussion around the importance of meeting GMC standards for Training as it was clear that Cheshire & Mersey cannot afford any loss of training places.

16/04/9.5.3 Mrs T Bullock advised that the Group agreed for six representatives to be put forward for the Sustainability Transformation Plan Development although four had been requested. The Cheshire & Mersey Chief Executive Group did not feel that four was representative of the patch.

16/04/9.6 **Executive Director Away Day**

16/04/9.6.1 Mrs T Bullock drew reference to four key items discussed at the Executive Director Away Day: (i) the Lord Carter gap analysis whereby an Executive lead was identified with the relevant Committee or Group to report to. This will be progressed through the relevant Executive and the Board of Directors will be sighted on the gap analysis at the Board Away Day; (ii) a review of the Trust's major Projects with a view of trying to reduce workloads, but unfortunately there was nothing that could be deferred; (iii) the Community Services Project plan; and (iv) UHNM Stronger Together Programme with a commitment to continue with the shared posts.

16/04/9.7 **Junior Doctor Contract**

16/04/9.7.1 It was noted that the Trust had now received the detail of the contract and Senior Managers were working through it to determine the implementation plan and impact. The Trust is expected to appoint a Guardian of Safe Working and a process was underway to conclude this. The information had been forwarded to trainee doctors who Mrs T Bullock had met with on a number of occasions. Contingency planning was still taking place in respect of the 2-day strikes taking place during April. Mrs T Bullock noted the impact of cancellations as a result of the strikes on patient experience, Trust reputation and the financial consequence.

16/04/9.8 **Commissioning for Quality and Innovation (CQUIN) – Clinical Utilisation Review**

16/04/9.8.1. It was noted that on 29 March 2016 the Trust had received a CQUIN from the CCG chosen from an NHS England list that was published on 9 March 2016. The value of the CQUIN is 85%, approximately £850k, therefore a significant CQUIN which aimed to create system wide improvement across the whole pathway. Mrs T Bullock highlighted some key concerns in respect of this CQUIN namely significant capital expenditure which would require NHS Improvement approval and as this was non-essential spend approval would not likely be approved; the significant project and workforce resource and costs required by the Trust; the significant investment, circa £250K, required for training and software. Mrs T Bullock sought Boards views in respect of the CQUIN which, if approved by NHS Improvement would require Board approval as investments that had been through months of review and prioritisation would need to be revisited and the Operational Plan amended. The Chairman was concerned that such a significant CQUIN was presented so late in the process and supported the position that the executive had taken. Following significant discussion Board agreed that the CQUIN could not be supported as the level of investment required would not be a priority when viewed against the limited investments that were planned. Mrs T Bullock confirmed that discussion in respect of this CQUIN would continue as part of the contract negotiations.

16/04/9.9 **Resolved:** The Chief Executive's verbal report was noted.



**BoD16/04/10**

**16/04/10.1 Quality, Safety and Experience Report**

- 16/04/10.1.1 Ms A Lynch presented the Patient Quality Safety and Experience report as at 29 February 2016.
- 16/04/10.1.2 It was noted that 26 complaints had been received in month which was a decrease on the previous month. The highest three categories of complaints were: nursing, communication, and medical.
- 16/04/10.1.3 Reference was drawn to the 17 complaints which were closed during February 2016. Mrs R McNeil highlighted that one of the closed complaints included sepsis and asked if the lessons learnt were being monitored, whilst noting the high national profile of sepsis. In response Ms A Lynch advised this had been raised at the Executive Quality Governance Group and was one of the five pathways that was being focused on by the Group.
- 16/04/10.1.4 Ms A Lynch drew reference to an increase by 32 of informal contacts, 115 for February 2016. The Surgery & Cancer Division had the largest number of informal concerns with 45 contacts being made.
- 16/04/10.1.5 In response to Mr J Barnes' observation of how the data is presented in the report, Mrs T Bullock explained that the Board had discussed and agreed the format of the report at the recent Board Away Day.
- 16/04/10.1.6 Reference was drawn to the safety section of the report. It was noted that there had been three serious incidents reported, two of which were inpatient falls resulting in fracture, and one hospital acquired stage 3 pressure ulcer. Ms A Lynch noted there had been 23 serious incidents reported for this financial year to date.
- 16/04/10.1.7 It was noted there had been 3 cases of Clostridium Difficile reported for February 2016, one case reported as avoidable and two cases were reported as provisionally unavoidable. The target continued to be achieved with 8 avoidable cases reported year to date against a target of 24.
- 16/04/10.1.8 Ms A Lynch explained that the information against safe staffing had now been amalgamated within the safety report which provided details of the actual hours of registered nurses/midwives and health care assistants' time on wards for day and night shifts against planned staffing levels. Ms A Lynch also highlighted that the data was now looked at alongside Safety Thermometer Results which allowed Board to see any potential impact of staffing levels.
- 16/04/10.1.9 In response to a query from Mr J Barnes regarding safe staffing levels, Ms A Lynch explained that staffing levels on the ward was monitored by day, by week and by month and she gave assurance that staff was being managed effectively to maintain patient safety on the wards. Ms A Lynch added that the purpose of the report which is nationally mandated for Boards, does not cover the operational management of staffing on a day to day basis.
- 16/04/10.1.10 **Resolved:** The Patient, Quality Safety and Experience Report as at 29 February 2016 was noted.

## **BoD16/04/11**

### **16/04/11.1 Draft Quality Governance Committee notes**

16/04/11.1.1 The draft Quality Governance Committee notes from the meeting held on 14 March 2016 were noted. It was also noted that the attendance record and action log had been omitted.

16/04/11.1.2 It was noted that the Gynaecology Oncology Business Case was escalated to the Board of Directors following approval in principle pending assurance around the implementation plan. Mrs T Bullock noted that following the meeting the go live date of 4 April 2016 was changed by 12 months by the Commissioners.

16/04/11.1.3 Dame P Bacon advised there had been some significant amendments made to the Workplan and that Mr Ehsan Haqqani, Head of Integrated Governance, had been invited to attend the Non-Executive meeting in May 2016 to look at Board Assurance and which Committees have responsibility for each part of the Assurance.

16/04/11.1.4 **Resolved:** The draft Quality Governance Committee notes and escalated item from the meeting held on 14 March 2016 was noted.

### **16/04/11.2 Serious Untoward Incidents and RIDDOR Events**

16/04/11.2.1 Dr P Dodds provided a verbal update on Serious Untoward Incidents (SUI) and RIDDOR Events.

16/04/11.2.2 It was noted that there had been no RIDDOR Events reported since the last meeting.

16/04/11.2.3 It was noted there was one SUI reported relating to a stage 3 pressure ulcer. Dr Dodds explained that a root cause analysis would be conducted.

16/04/11.2.4 **Resolved:** The Serious Untoward Incidents and RIDDOR Events update was noted.

## **BoD16/04/12**

### **16/04/12.1 Performance Report**

16/04/12.1.1 The Performance Report for the period ending 29 February 2016 was noted which covered Operational Delivery, Financial Performance and Workforce metrics.

16/04/12.1.2 It was noted that the Trust had delivered eight of NHS Improvement's nine Compliance Indicators: the four hour transit time for Accident and Emergency failed to be delivered in month with 90.10% achieved against the 95% target, with year to date performance noted as 94.30%. Mrs D Frodsham noted that in March the A&E Department saw 800 more patients than March 2015. The Board acknowledged the hard work of the staff in the Emergency Department.

16/04/12.1.3 The Board were pleased to note that all cancer waiting time targets had been achieved in month as well as for the quarter reporting period.



- 16/04/12.1.4 It was noted that length of stays increased in February 2016 to 3 days and non-elective length of stay had decreased to 3.1 days. Bed occupancy within the Medical and Surgical divisions had increased in month and as a result of emergency demand pressures 46 cancelled operations for non-clinical reasons had taken place which ultimately impacted on theatre efficiency which had decreased to 68.9% against the 81% target.
- 16/04/12.1.5 With regards to finance it was noted that performance against NHS Improvement's Continuity of Service metric remained at two against a plan of two, with an expectation to achieve a two at year end. Mr M Oldham noted the change to the financial risk rating to include a wider range of metrics. The income and expenditure position in month was reported as £6.7m deficit prior to exceptional items against a planned deficit of £6.2m. The forecast remains at £8.2m deficit. Mr M Oldham drew attention to a contract notice raised by the South & Vale Royal CCGs with a financial risk of £1.4m in terms of zero length of stay. As there has been an increase in zero day length of stay, the CCG are stating these should be counted as outpatient attendance, which the Trust disputes. The South and Vale Royal CCG contract was noted to be £5.9m over plan. Mr M Oldham then drew Boards attention to a further letter received on the 1 April 2016 from the CCGs seeking to recover £4.1m for 2015/16 from disputed activity and a £1.4m for zero day length of stay admissions. Mr M Oldham advised that both issues raised by the CCGs were strongly disputed and would be addressed through mediation and possible arbitration. Mr M Oldham advised that whilst this is a risk he felt the Trusts position was strong as definitions had clearly been misinterpreted.
- 16/04/12.1.6 With regards to the Cost Improvement Programme it was noted that the programme was £411,000 behind plan with slippage as a result of drugs efficiency but additional schemes were being developed. Mr M Oldham noted that the schemes would deliver recurrently for 2016/17.
- 16/04/12.1.7 It was noted that cash was £2.8m at the end of the month, £1.5m better than plan. Mr M Oldham reported that cash was likely to be less than £1m at year end which may cause problems with creditors. Mr M Oldham advised he was currently working with NHS Improvement and Department of Health to secure a working capital facility. Mr M Oldham requested that once the final documentation has been received that the Board delegated authority for the loan to be drawn down.
- 16/04/12.1.8 **Resolved:**
- i) the drawdown of the working capital facility was approved;
  - ii) the terms and transactions contemplated by the finance documents to which it is a party and resolve that it execute the finance documents to which it is a party;
  - iii) delegated authority was granted to the Director of Finance and Strategic Planning to execute the finance documents to which it is a party on its behalf;
  - iv) delegated authority was granted for the Director of Finance and Strategic Planning to sign and dispatch all documents and notices (including utilisation requests) in connection with the finance documents to which it is a party.
- 16/04/12.1.9 With regards to workforce it was noted that there were challenges to meet the appraisal and training targets.
- 16/04/12.1.10 **Resolved:** The Performance Report as at 29 February 2016 was noted. .

16/04/12.2 **Draft Performance and Finance Committee notes**

16/04/12.2.1 Mr M Davis provided the Board with a verbal update. Mr M Davis made the Board aware that the meeting of 23 March 2016 was not quorate and that a further meeting had been arranged for 1 April 2016 to ensure the timetable for the annual plan and budgets would be met.

16/04/12.2.2 Mr M Davis drew reference to the four escalated items from the meeting for Board's attention: (i) The Trusts performance against the four hour performance target in February and March 2016 which will result in the Trust falling its quarter four NHS Improvement standard; (ii) Financial dispute relating to the 2016/17 contract with CCG, the decision of Executives to commence dispute resolution was endorsed; (iii) Control total technical adjustment for charitable income; and (iv) Significant in terms of achieving £6.5m Sustainability and Transformation funding was the agency cap set at a challenging level to reduce by £3.5m measured quarterly in arrears.

16/04/12.2.3 **Resolved:** The verbal update from the meetings held on 23 March 2016 and 1 April 2016 and four escalated items were noted.

The minutes of the Performance & Finance Committee of 23 March 2016 and 1 April 2016 would be included in the Board papers for May 2016.

16/04/12.3 **Annual Budget/Planning**

16/04/12.3.1 It was noted that the final Operational Plan for 2016/17 had to be submitted to NHS Improvement on Monday 11 April 2016 in line with the new control total. Mr M Oldham noted that due to the variables; the interim annual budget document would be presented to the May 2016 Board.

16/04/12.3.2 **Resolved:** It was noted that the interim annual budget document would be deferred to the May 2016 meeting.

**BoD16/04/13**

16/04/13.1 **Draft Transformation and People Committee Minutes**

16/04/13.1.1 Mrs R McNeil presented the draft Transformation and People minutes from the meeting held on 8 March 2016 which were noted. It was also noted that there were no items from the meeting escalated to the Board.

16/04/13.1.2 Mrs R McNeil advised that there had been a discussion regarding theatre performance and it was agreed that the clarification of KPIs would be monitored through the Executive Transformation Steering Group and escalated to the Transformation and People Committee by exception.

16/04/13.1.3 **Resolved:** The draft Transformation and People minutes from the meeting held on 8 March 2016 were noted.

## **BoD16/04/13.2**

### **16/04/13.2.1 Annual Budget / Contract Discussions**

16/04/13.2.2 Mr M Oldham confirmed that the Trust would be responding formally to the CCG declining their contract offer and to commence the contract dispute process.

16/04/13.2.3 **Resolved:** The update regarding the contract dispute was noted.

## **BoD16/04/14**

### **16/04/14.1 Consultant Appointments**

16/04/14.1.1 Dr P Dodds provided a verbal report confirming that there had been two Consultant Gastroenterologist appointments made since the last meeting.

16/04/14.2.2 **Resolved:** It was noted there had been two Consultant appointments made since the last Board meeting.

### **16/04/14.2 Visits of Accreditation, Inspection or Investigation**

16/04/14.2.1 Mrs T Bullock reported that the National Procurement Development team had recently assessed the Trust against the national standards. Positive verbal feedback had been received and the Trust is awaiting the final report. Similarly, the Ante-Natal and Newborn Screening Quality Assurance had taken place recently, again with a positive verbal feedback, but awaiting the report.

16/04/14.2.2 Mrs T Bullock reported that the Information Governance Toolkit had been submitted with a final score of 90% which shows significant improvement from previous years, but is still rated “unsatisfactory” based on the Trust not achieving two of the standards.

16/04/14.2.3 **Resolved:** The Visits of Accreditation, Inspection or Investigation update was noted.

## **BoD16/04/15 Any Other Business**

16/04/15.1 There was no other business to report.

## **BoD16/04/16 Date and Time of Next Meeting**

16/04/16.1 The next meeting was scheduled to take place on Tuesday 3 May 2016 at 9.30 am in the Boardroom, Leighton Hospital, Crewe.

## **BoD16/04/17 Exclusion of Press and Public**

16/03/17.1 The Board of Directors resolved to exclude the press and public from the meeting at this point on the grounds that publicity of the matters being reviewed would be prejudicial to public interest, by reason of the confidential nature of business.

Signed by:  
Chairman

Date:

**Board of Directors Meeting  
Minutes of the Meeting held in 'Private'  
Monday, 4 April 2016  
in the Boardroom, Leighton Hospital, Crewe**

**Present:**

Mr D Dunn	Chairman
Dame P Bacon	Non-executive Director (Deputy Chair)
Mrs T Bullock	Chief Executive
Mr J Barnes	Non-executive Director
Mr J Church	Non-executive Director
Mr M Davis	Non-executive Director
Dr P A Dodds	Deputy Chief Executive/Medical Director
Mrs D Frodsham	Chief Operating Officer
Mr D Hopewell	Non-executive Director (Senior Independent Director)
Ms A Lynch	Director of Nursing and Quality
Mrs R McNeil	Non-executive Director
Mr M Oldham	Director of Finance and Strategic Planning

**In attendance:**

Ms E Carmichael	Director of Workforce & Organisational Development – Designate
Mr S Eaton	Divisional General Manager, Surgery & Cancer Division ( <i>observing</i> )
Mrs K Edge	Deputy Director of Finance – Business Intelligence
Mrs C Ralphs	PA to Director of Finance & Strategic Planning

**BoD2/16/04/1 Welcome and Apologies for Absence**

- 16/04/1.1 The Chairman welcomed everyone to the meeting, and in particular, Mrs Edge, who would be presenting an update of the Annual Plan 2016/17. It was noted that Mr S Eaton was observing the Board meeting as part of his development on the Nye Bevan Programme.
- 16/04/1.2 Apologies were received from Mr J Lyons, Lead Governor, Ms L Hughes, Interim Trust Secretary.

**BoD2/16/04/2 Board Member Interests**

- 16/04/2.1 There were no new interests declared in addition to those declared in the Board meeting held in Public held earlier that day and no interests declared in relation to open items on the agenda.

**BoD2/16/04/3 Minutes of the Previous Meeting**

- 16/04/3.1 **Resolved:** the minutes of the last meeting held on 7 March 2016 were accepted as an accurate reflection; subject to minor typographical errors.

**Section removed under S42 of the Freedom of Information Act.**

#### **BoD2/16/04/4 Matters Arising and Actions from Previous Meeting**

- 16/04/4.1 There were no open actions currently on the Action Log for the Board meeting held in Private.

#### **BoD2/16/04/5 Medical Staffing Update**

- 16/04/5.1 **Section removed under S42 of the Freedom of Information Act.**
- 16/04/5.2 **Resolved:** the Medical Staffing verbal update was noted.

#### **BoD2/16/04/6 Stronger Together Programme Board**

- 16/04/6.1 Mrs T Bullock provided a verbal update on the Stronger Together Programme Board meeting. It was noted that the minutes of the meeting had not been received but the main focus of discussion was around Gynaecology Oncology Business Case that had recently been presented to the Quality Governance Committee.  
**Section removed under S43 of the Freedom of Information Act.**
- 16/04/6.2 Mrs T Bullock advised that she and the executive team had met with Mr Robert Courtney-Harris, Interim Chief Executive and his team regarding a review of the Stronger Together programme.  
**Section removed under S43 of the Freedom of Information Act.**  
Mrs T Bullock noted that Mr Courtney-Harris had agreed to look at resourcing a dedicated co-ordinator to ensure the elective capacity moves forward.
- 16/04/6.3 **Section removed under S43 of the Freedom of Information Act.**  
Mrs T Bullock also noted that the work relating to the elective capacity between the Trusts had already begun. Mrs R McNeil observed that although some projects were now secondary, the relationship between the two Trusts was still strong which was key and critical for moving forward.
- 16/04/6.4 **Resolved:** the verbal update on the Stronger Together Board meeting was noted.

#### **BoD2/16/04/7 Annual Plan 2016/17 Update**

- 16/04/7.1 Mrs K Edge explained that the purpose of her presentation was to inform the Board of Directors on the actions taken and movements and assumptions within the plan following the submission to Monitor of the Annual Plan on 8 February 2016.
- 16/04/7.2 The Board had received a paper at a previous meeting that outlined the summary of the £100k surplus control total required to receive the £6.5M transformation funding. Recently Monitor have made a technical adjustment to the control total to recognise charitable income. This amended figure for the Trust is now an £800k deficit which will give headroom on the Income and Expenditure but not improve the cash flow. Mrs K Edge added that the presentation today was to explain the plan noting the tables therein are still being finalised for the budget pack that will be presented at the May Trust Board.

- 16/04/7.3 Mrs K Edge then took the Board through the presentation in detail explaining what is proposed for the final submission to Monitor on Monday 11 April 2016.
- 16/04/7.4 Following the presentation a lengthy discussion took place. Mrs R McNeil asked what the risks are of not receiving any winter monies on the plan and on access and flow. Mrs D Frodsham outlined the risks and noted that the efficiencies required for the additional bed capacity would be led through the access and flow group.
- 16/04/7.5 Mr M Oldham in responding to a query by Mr D Hopewell, noted that benchmarking in the Lord Carter review indicated MCHFT were in the top percentile in terms of revenue costs for Estates & Facilities. Mrs Bullock also noted that space not used for clinical use was relatively high and that a significant part of this was due to the rebuild of new theatres which meant the old theatres were currently empty and the empty wards at VIN which were not fit for patient use.
- 16/04/7.6 **Section removed under S43 of the Freedom of Information Act.**
- 16/04/7.7 **Section removed under S43 of the Freedom of Information Act.**
- 16/04/7.8 The Chairman thanked Mrs K Edge and the team, acknowledging the tremendous amount of work that had been undertaken. The Chairman stated that the discussion had been very useful and, although this was not a position the Board would like the Trust to be in, the challenges were relatively modest compared to other Trusts. The Chairman asked the Board to consider approval of this position for submission to Monitor on 11 April 2016.
- 16/04/7.9 **Resolved:** the Annual Plan 2016/17 was approved for submission to Monitor on 11 April 2016..

#### **BoD2/16/04/8 Any Other Business**

- 16/04/8.1 Mrs T Bullock advised that the CCG had recently sent out a letter regarding a contract challenge for the last financial year as discussed in Part 1 Board and added that this likely follows pressure they are facing from NHS England who are challenging their plan.
- 16/04/8.2 Mrs T Bullock advised she had met with the Chief Officer from East Cheshire  
**Section removed under S43 of the Freedom of Information Act.**
- 16/04/8.3 **Section removed under S43 of the Freedom of Information Act.**  
Mrs T Bullock added that Wirral, Countess of Chester and their respective CCGs were meeting to form a South Mersey Local Deliver group and that MCHFT had been invited to be part of. The Chairman observed that there was strength in multiple relationships.
- 16/04/8.4 Mrs T Bullock explained that a cohort of CCGs had been brought together to manage the development of the STP and had worked on a job description for recruiting the STP leader, however were subsequently informed by NHS England that Mrs Louise Shepherd, Chief Executive at Alder Hey had been appointed into the role. Mrs Bullock confirmed this was a positive appointment from her perspective.



16/04/8.5 In response to a query from Mr M Davis regarding a CCG commissioned economic review with external consultants, Mrs T Bullock stated that this had began as a long term economic review but had now grown into a strategic options case looking at various models of care as well as the economic case. Information given at the Connecting Care Provider Board indicated a 3 week delay in the 12 week programme to mid / late May 2016. Mrs T Bullock noted that, despite the extra workload, MCHFT were fully co-operating but not all Trust's were being fully co-operative. It was noted that ECHT had withdrawn from the Connecting Care Board.

16/04/8.6 **Resolved:** the any other business items were noted.

#### **BoD2/16/04/9 Review of Meeting**

16/04/9.1 Mr J Church provided a summary review of the Board of Directors meeting which was reported as having a strong focus on patient safety and experience and particularly noted the excellent patient story. Mr J Church added that the Board meetings collectively focused strongly on strategic matters with constructive challenge and debate throughout.

#### **BoD2/16/04/10 Date and Time of Next Meeting**

16/04/10.1 The next meeting is scheduled to take place on Tuesday 3 May 2016 following the Board meeting held in Public.

Signed by:  
Chairman

Date: