

Board of Directors

Minutes of the Meeting held in Public at 9.30am on Monday, 7 July 2014 In the Salt Arch Room, Victoria Infirmary Northwich

PRESENT

Mr D Dunn MBE	Chairman (<i>in the chair</i>)
Dame P Bacon	Non-Executive Director
Mrs T Bullock	Chief Executive
Mr M Davis	Non-Executive Director
Dr PA Dodds	Deputy Chief Executive and Medical Director
Mrs D Frodsham	Chief Operating Officer
Mr D Hopewell	Non-Executive Director
Mr M Davis	Non-Executive Director
Mr M Oldham	Director of Finance & Strategic Planning
Mr D Pitt	Director of Service Transformation & Workforce
Mrs J Smith	Director of Nursing & Quality

IN ATTENDANCE

Mr J Lyons	Lead Governor
Ms M Steele	Acting Trust Secretary

The Chairman opened the meeting and welcomed those members of the public and Governors in attendance. The Chairman noted contribution from those in attendance was not permitted during the meeting, however, advised there would be an opportunity to discuss any issues with the Directors after the meeting, if a person so wished.

PATIENT STORY

Mrs Smith introduced the patient story, a video interview with a mother who had received care at Leighton Hospital. Mrs Smith noted the mother had undergone fertility treatment at the Trust and had been under the care of the Trust whilst pregnant. Mrs Smith advised the mother had been admitted with high blood pressure early in the pregnancy and there had been concern over the baby's wellbeing. Mrs Smith noted the baby had been born at 29 weeks weighing just 2lb 4oz. The mother advised the baby had been on a TPN (feed) drip for a period of three weeks and noted she had had the pleasure of meeting with the Pharmacist who had prepared same and who had been a key member of the team who had helped in getting her child better. The mother noted the whole team had been very professional and 'on the ball' doing their very best for her son. She advised the Staff on Ward 19, Ante-natal and NICU had been wonderful noting the support and assistance from the Nurses, Midwives, Cleaners, Healthcare Assistants, Consultants and Doctors. The mother noted each and

every staff member had played a part in looking after and caring for her son.

Mrs Smith advised the mother and her son had now been home a week and her son was doing well. Mrs Smith advised she had received a letter of thanks from the mother for the care received.

Mrs McNeil noted the patient story was testament as to why the Trust had achieved CNST Level 3. Mrs Bullock advised it underlines the Trust have excellent staff who do an excellent job, however, noted the physical environment (seen in the video) was that of NICU. Mrs Bullock noted the setting underlined the importance of the investment in NICU.

In response to the Chairman's enquiry as to whether the child would receive further care at the Trust, Mrs Smith advised there would be follow-up check-ups with Paediatrics.

Resolved

- **To note the patient story and thank the lady for sharing her experiences.**

DIRECTORS' INTERESTS

The Chairman noted he was no longer Pro-Vice Chancellor International of Manchester Metropolitan University having taken up the post, substantively, as Chairman of the Trust.

The Chairman noted he was now an Emeritus Fellow of the University.

Resolved

- **To note the change in Interests**

MINUTES OF THE LAST MEETING

After discussion, it was

Resolved

To sign the minutes as an accurate record of the Board meeting held in Public on Monday, 2 June 2014 and the Extraordinary Board of Directors meeting of Friday, 27 June 2014

The Chairman noted under Review of the Meeting, there had been discussion regarding a review of the format of the Board of Directors Agenda. The Chairman confirmed discussion had taken place at the Board of Directors Away Day of 16 June 2014 and the agenda for the meeting had been prepared with that in mind.

ACTIONS ARISING FROM PREVIOUS MINUTES NOT INCLUDED ELSEWHERE ON THE AGENDA

None noted.

ANNUAL WORK PROGRAMME

The Chairman presented the Annual Work Programme for noting. It was noted the Work Programme would need to be amended to reflect the revised format of the agenda.

Resolved

- **To note the Annual Work Programme**
- **To amend the Work Programme to reflect the revised format of the agenda** *MS*

CHAIRMAN'S ANNOUNCEMENTS

14.07.7.1 Board Away Day – 16 June 2014

The Chairman noted a Board of Directors Away Day had taken place on Monday, 16 June 2014.

14.07.7.2 Stakeholder Meetings

The Chairman advised he and Mrs Bullock had recently met with Mr Mike Suarez, Chief Executive, Cheshire East Council and Mrs Lorraine Butcher, Executive Director for Strategic Commissioning, Cheshire East Council wherein the meeting had been positive and productive.

The Chairman noted he had also met with the Chairs of the local Clinical Commissioning Groups (South Cheshire Clinical Commissioning Group and Vale Royal Clinical Commissioning Group) where he had extended an invitation for them to come to a future Board Away Day. The Chairman advised they had accepted the invitation and a date was currently being arranged.

The Chairman advised he had also met with Mr Tony Crane, Director of Children's Services, Cheshire East Council, noting the Council were considering the development of a Health Academy (free school) working in partnership with the Trust to establish same. The Chairman advised he had invited Mr Crane to attend a future Board Away Day to discuss strategy, etc.

The Chairman advised he had also met with internal stakeholders having had meetings with Domestic, the Pathology Department and also the Senior Medical Leadership Team.

14.07.7.3 Monitor Induction

The Chairman advised he had recently attended an Induction Day for Chairs hosted by Monitor. The Chairman advised the day had been very interesting and informative with the focus mainly on Monitor's new powers since the enactment of the Health & Social Care Act 2012.

14.07.7.4 Foundation Trust Network (FTN) Governance Conference

The Chairman advised he had also recently attended an FTN Governance Conference where the focus had been on partnerships and strategic alliances in public and private health, going forward.

14.05.6.4 Non-Executive Director Recruitment

The Chairman invited Mr Pitt to give an update on the Non-Executive Director recruitment process wherein Mr Pitt advised a meeting of the Nominations & Remuneration Committee had taken place the previous week to review a long-list of candidates. Mr Pitt noted there was a good field of strong candidates and the Committee were due to meet on 17 July to consider a shortlist.

14.07.7.5 Deputy Chair

The Chairman advised following his appointment as Chair, there was now a vacancy for the role of Deputy Chair. The Chairman advised the meeting of the Nominations & Remuneration Committee had also seen discussion regarding the proposal of appointing Dame Pat Bacon as Deputy Chair. The Chairman advised the Committee endorsed the proposal and same will be presented to the Council of Governors meeting of 31 July 2014 for formal ratification.

14.07.7.6 Interim Chair Support

The Chairman thanked Mr Hopewell for his support whilst Interim Chair, prior to his substantive appointment.

Resolved

- **To note the Chairman's Report**

GOVERNORS ITEMS

14.06.8.1 Governor Representation on Committees

The Chairman noted the work being undertaken in relation to Governor Representation on both Governor and Board Committees and advised he was to meet with each of the elected Governors to discuss same. The Chairman advised he would also use the opportunity to discuss the external facing role of the Governor.

14.07.8.1 Lead Governor Agenda Item

The Chairman noted the Council of Governors Agenda Item – Lead Governor Report and suggested requests for information from individual Governors should be included under this item with the potential for a discussion topic. The Chairman advised he would suggest this proposal to Governors at the next Council of Governors meeting.

Resolved

- **To note the report**

CHIEF EXECUTIVE'S REPORT

14.07.9.1 Quality Surveillance Group Formal Feedback

Mrs Bullock advised she had met Moira Dumma, former Director, Cheshire Warrington & Wirral Area Team, on 12 June 2014. The meeting was arranged to receive formal feedback from the Quality Surveillance Group Meeting, however, Mrs Bullock noted the discussion had focussed more on how the Area Team could support the Trust and Clinical Commissioning Groups to develop a future strategy for the local health economy.

Mrs Bullock advised that she had taken the opportunity to discuss a couple of points in relation to the recommendations particularly to the proposal for weekly mortality case note reviews to include peer review with other organisations. Mrs Bullock advised Dr Dodds had liaised with other Medical Directors in the area and not all complete weekly reviews and concerns were raised regarding the time it would take to do this. Ms Dumma advised that Dr Dodds may benefit from a discussion with the Area Team Medical Director to establish the appropriateness of this recommendation. The Chairman enquired as to whether there was a way of achieving the same objective but in a different way wherein Dr Dodds noted he was to raise the issue of Peer Review at the next Medical Directors Forum (scheduled for 11 July 2014).

Mrs Bullock suggested the Quality Surveillance Group report be presented at a future Board Away Day for discussion in further detail. Mrs Bullock advised discussion with the Clinical Commissioning Groups would also be required as a number of the recommendations are health economy recommendations.

14.07.9.2 Clinical Commissioning Group Senior Team Meeting

Mrs Bullock noted the meeting which had taken place on 13 June 2014. Mrs Bullock advised the recommendations from the Quality Surveillance Group meeting were to be discussed, however, in the

absence of the Final Report it was suggested by the Clinical Commissioning Group that discussion take place at the next meeting once the report had been received.

Mrs Bullock advised the HED (Healthcare Evaluation Data) relating to mortality had still not been received by the Trust. The Chairman sought clarification as to whether or not it had previously been agreed the Trust would focus on SHMI as a mortality indicator, Mrs Bullock advised it had been agreed, however, as the Area Team utilise HED it is important the Trust are aware of and consider same. Dr Dodds noted HED is circulated monthly, however, the SHMI data is released quarterly, although there are currently issues with the monthly circulation of HED.

Mr Barnes noted the Trust should have one indicator as a focus with an understanding of the others. Mrs Bullock agreed with Mr Barnes' comment and advised the Trust would continue to focus on SHMI as it was a nationally recommended tool.

Mrs Bullock advised there had been an update on partnership reviews and provided detail of a change to the ENT Out of Hours Service. Mrs Bullock advised of the financial impact of same. Mrs Bullock advised the Trust were to undertake a Service Line Review of the ENT Service following which a more detailed substantive paper would be presented to the Board of Directors. Dr Dodds advised there was a clear SOP (Standard Operating Procedure) in place as regards what happens over the weekend and he is assured there is sufficient cover in place. Dr Dodds advised the SOP was to be presented to the Strategic Integrated Governance Committee on 14 July 2014. It was agreed the Board of Directors would receive the report of the Service Line Review to the Board of Directors meeting on 6 October 2014.

Mrs Bullock advised the Clinical Commissioning Groups advised of their Quarter 4 meeting with the Area Team and the discussion regarding sustainable levels of activity.

Mrs Bullock noted Mrs Karen Edge, Deputy Director of Finance & Business Intelligence, was currently supporting the Clinical Commissioning Groups in the assumptions regarding activity.

14.07.9.3 Forward Thinking Event

Mrs Bullock noted the Forward Thinking Event which had taken place on 19 June 2014, comprising of two consecutive sessions, had been well attended with positive feedback.

14.07.9.4 Connecting Care Board

Mrs Bullock advised that Mr Pitt had attend the meeting on her behalf and invited Mr Pitt to provide feedback from the meeting.

Mr Pitt noted the Connecting Care Board 5 Year Strategy had been approved and subsequently submitted. Mr Pitt advised discussion had also taken place in relation to the workforce planning approval process, the Better Care Fund and winter pressures guidance.

Mr Pitt advised the information governance issue relating to the sharing of data between Clinical Commissioning Groups and Social Care was also discussed and it was acknowledged correspondence had been received from Norman Lamb MP, Minister of State for Care and Support.

14.07.9.5 Provider Board Meeting

Mrs Bullock advised of the meeting which had taken place on 27 June 2014. Mrs Bullock noted the Board agreed to fund the GP Advice Line from 1 July 2014 whilst the majority of the meeting saw discussion on the progress with the Integrated Care Teams. It was agreed to appoint 4 Care Co-ordinators. In response to Mr Oldham's enquiry as to who would be responsible for the appointments, Mrs Bullock advised Community Services (East Cheshire NHS Trust).

14.07.9.6 Stakeholder Meeting – Renaissance of the A&E Department

Mrs Bullock advised of the stakeholder meeting with Andy Black noting the alignment of aspirations between the Connecting Care Strategy and the Renaissance of the A&E Department. Mrs Bullock advised she had spoken to Mr Paul Mears, Chief Executive of Yeovil District Hospital NHS Foundation Trust, and provided feedback on the actions they had taken. Mrs Bullock advised she was to set up a conference call between herself, the Chief Executive at Yeovil and the respective Clinical Commissioning Groups.

Mrs Bullock advised Mr Mears and Bridget Fletcher, Chief Executive, Airedale NHS Foundation Trust had met with Simon Stevens, Chief Executive NHS England, Nick Seddon, Health Policy Advisor to Jeremy Hunt and Mr Andy Black to discuss future ways of working. Mrs Bullock advised Mr Black had updated her on the discussion and invited her to be part of future discussions.

The Chairman noted there was nothing to be lost by being involved in the discussions.

14.07.9.7 Major Incident

Mrs Bullock advised of a major incident, week commencing 16 June 2014 when 14 GP Practices in the 01606 area lost the ability to receive incoming calls. Mrs Bullock advised there had been a number of breaches associated with this incident, however, the total impact on the Trust had been moderate. Mrs Bullock advised the Trust would seek to have 38 breaches removed due to the force majeure circumstances. Mrs Bullock advised this was acceptable protocol nationally. Mrs Bullock advised the incident had impacted significantly on the North

West Ambulance Service NHS Trust who had received support from the East Midlands Ambulance Service NHS Trust.

Mrs Bullock advised an After Action Review of the Incident was to be completed.

14.07.9.8 Learning Through Collaboration Event

Mrs Bullock noted the Learning Through Collaboration Event which had taken place on 25 June 2014 . Mrs Bullock advised the event had focused on Long Term Conditions and feedback from same had been very positive.

Mrs Bullock advised the Trust would look to organise similar events in the future.

Resolved

- **To note the Chief Executive's Report**
- **To receive the report on the Service Line Review of ENT at the Board of Directors meeting of 6 October 2014**

CARING

14.07.10.1 Patient Quality Safety & Experience Report

Mrs Smith presented the report noting the number of formal complaints received for the month of May was 28 with one received via the Clinical Commissioning Groups. Mrs Smith provided detail of the key trends.

Mrs Smith noted there were two complaints currently being reviewed by the Ombudsman.

Mrs Smith noted the number of closed claims advising 2 had been upheld, 12 partially upheld and 5 were not upheld. Discussion took place regarding the partially upheld claims wherein Mrs Smith advised all claims are reviewed in the same manner, with some elements of the claim being upheld and others not. Dame Pat Bacon advised the Complaints Review Panel, when selecting claims to review, choose to review a number of complaints that have not been upheld with the purpose of reviewing the process as well as the outcome.

In response to Mr Hopewell's enquiry as to whether there was a backlog in complaints being dealt with, Mrs Smith explained the variable timeframe to closure depending on the investigation. Mrs Smith assured Mr Hopewell there were monitoring systems in place to ensure complaints were being responded to in the required timeframe. Dame Pat Bacon advised the Complaints Review Panel had developed a checklist to record the time taken to close a complaint and this is actively reviewed by the Complaints Manager.

Discussion took place regarding the level of detail received in the Patient Experience Report wherein it was noted that under the current governance arrangements the details of complaints and claims were discussed in far greater detail at the Patient Experience Committee and by the Complaints Review Panel. Mrs Bullock advised that should there be areas of concern raised by Board Members at the Board meeting this should be delegated to the relevant Board Committee/Subcommittee. Dame Pat Bacon advised the current governance structure/reporting works well. Dame Pat Bacon advised the Trust would look, however, to review the Annual Report on complaints to include a focus on lessons learnt.

Mrs Smith advised there had been 91 contacts raising concerns and provided detail of the key trends. Mrs Smith noted there had been 180 compliments/thank-yous received.

Mrs Smith presented the Legal Services Report noting there had been 7 new Clinical Negligence claim received whilst 1 Clinical Negligence claim had been closed during the period.

Mrs Smith advised 2 inquests had been concluded in May noting the conclusions of each and any Lessons to be Learnt. Mrs Smith advised of national changes meaning that the Coroner must now hold an inquest where a death involves a fall and in this regard, advised the Trust may see a higher number of inquests being falls related.

Mrs Smith advised there had been 7 postings on NHS Choices and also provided detail of the Friends & Family Test Response Rates and Net Promoter Scores. In relation to the data received for Community Midwives, Dame Pat Bacon noted same was lower than that for the other areas and enquired if there was an issue of which the Trust was aware. Mrs Smith advised the figures had been variable over the months noting the area related to post-delivery care and nationally the response rate is lower.

In relation to the Patient Safety Monthly Performance Report, Mrs Smith advised of the number of patients who experienced a harm incident whilst being treated in the Trust against the total number of patients cared for by the Trust in the same period.

Mrs Smith advised there had been no Serious Incidents or Never Events for the period.

Mrs Smith noted the number of patient falls and the comparative data for the previous year. In response to Mr Davis' enquiry as to whether there was benchmarking data available nationally, Mrs Smith advised benchmarking data is available with same reviewed twice yearly at the Strategic Integrated Governance Committee

Mrs Smith noted the number of Hospital Acquired Pressure Ulcers Resulting in Harm by Month had increased, however, advised an alternative cleansing product had been sourced and was being piloted in a number of areas. Mrs Smith noted the number of incidents in the pilot areas had reduced and the Trust would roll-out the alternative product across all wards. Mrs McNeil suggested the Trust advise the Care Homes wherein Mrs Smith advised the Care Homes should be aware as the Tissue Viability Team were leading on the review and they also have clinics in the community, treating patients at home and in Care Homes.

Mrs Smith also detailed the Trust's RAMI, SHMI and number of In-Patient Deaths.

Mrs Smith noted the number of Hospital Initiated Outpatient Cancellations and also advised there were no incidents of MRSA in May 2014. Mrs Smith advised there had been two cases of *Clostridium difficile* reported.

In relation to Outpatient cancellations, Mrs McNeil enquired as to whether the reduction target was based on the number of cancellations in the previous year and whether same had been adjusted to reflect increasing numbers of Outpatient appointments in the current year. Mrs Smith advised it was against the previous year's total, however, it was agreed the reduction target was therefore more challenging than if against this year's figures.

Mrs Smith noted the number of mothers smoking in pregnancy had reduced in May whilst the Breast Feeding Initiation Target had been achieved.

In relation to the number of patients cared for by the Trust, Mr Davis noted this was a reduction on previous months and enquired as to whether the month had been unusually quiet or if it was the beginning of a trend. Mr Oldham advised it was too early to say if this was a trend but the numbers would be kept under review.

Resolved

- **To note the report**

14.07.10.2 Care Quality Commission – Dementia Theme

Mrs Smith provided a presentation on the Final Report received from the Care Quality Commission (CQC) on their Dementia themed inspection of the Trust.

Mrs Smith advised the CQC had undertaken a series of dementia themed inspections nationally with the findings accumulated into a national report. Mrs Smith noted the Trust had been in discussion

with the CQC regarding the triangulation of some of the observations that had been made.

Mrs Smith advised of the findings against each of the 4 standards reviewed – Care and Welfare of people who use services, Cooperating with other providers, Staffing and Assessing and Monitoring the quality of service provision. Mrs Smith advised of those actions which had already been undertaken and those were to be undertaken against each of the findings.

In response to Mr Barnes' enquiry as to whether two care pathways can run in parallel, Mrs Smith advised it was possible to have two pathways – one relating to the medical condition and one relating to dementia.

Mrs Smith noted the investment in nursing staff had improved the response time to call bells with the audit of same continuing to be undertaken. Mrs Smith advised an additional 11 nurses from Spain had been recruited the previous weekend.

Mrs Smith advised the review was a snap shot in time with same completed over a one and a half day period. Mrs Smith advised the review had seen a number of areas of good practice and many positive comments by patients and carers, however, there were a number of areas for improvement. Mrs Smith advised an action plan had been submitted to the CQC and it is anticipated same will be used as a key line of enquiry when the Trust undergoes its CQC inspection. In response to the Chairman's enquiry as to whether the inspection had yet been scheduled, Mrs Bullock advised the date was not known yet, however, it was anticipated it would be during Quarter 3 of the 2014/15 financial year.

Mr Davis acknowledged the concerns regarding the findings, however noted the positive actions and response of the Trust. Mr Davis noted the demographics of the local area and noted the implementation of a joint care pathway was key.

In response to Mr Barnes' enquiry as to when a member of staff will know if a patient has dementia, Mrs Smith noted how the diagnosis of dementia was made. Mrs Smith advised a diagnosis will not be undertaken when an individual is admitted for an acute episode of care, however, for those patients previously diagnosed, Mrs Smith advised the Trust would be aware on admission. Mrs Bullock noted a mental capacity assessment can be undertaken should staff be concerned about the mental capacity of a patient. Mr Barnes' enquired as to whether those patients considered 'at risk' would be put on the dementia care pathway, Mrs Smith advised no it would only be those patients who have been formally diagnosed.

Mr Oldham referred to the patient feedback cards and enquired as to the number of negative comments received. Mrs Smith noted that over half the responses had been positive, 6 had been negative and the others had been mixed.

Dame Pat Bacon noted that partnership working across the whole health economy was key to improving the patient's care pathway and in instances, avoiding hospital admission.

The Chairman requested the presentation be amended to include a bullet point under 'Overall' that acknowledges the areas for improvement and notes the Trust is determined to do better. The Chairman requested the information also be made available to Governors wherein Mrs Bullock advised she would provide a summary to Governors in her Chief Executive's Report and that Governors would be informed of where the full report could be obtained.

Resolved

- **To note the presentation**

14.07.10.3 Monthly Nursing & Midwifery Staffing Report

Mrs Smith presented the report noting the purpose of same. Mrs Smith advised the updates, which will be discussed at the Board of Directors meeting held in public, will also be available on the Trust's website.

Mrs Smith provided an explanation of the data provided noting on some wards there will be a difference between the planned and actual staffing hours as in some cases departments will have used more hours than they planned to use and other cases they will have used less hours than planned. Mrs Smith provided an explanation as to why these differences might occur.

Mrs Smith noted the top three reasons recorded for not meeting the plan during day shifts, in May, were vacant posts, sickness and patient numbers/acuity not requiring the level of staffing within the plan. Mrs Smith advised there were no occasions when the plan was not met for night shifts during May.

Mr Oldham noted Ward 24/NICU appeared to have subsidised the unqualified staff with qualified staff and advised this was uneconomical. Mrs Smith advised the reason for same and noted she would monitor the situation to ensure it did not reoccur.

Mr Hopewell expressed his concern that the information included for the current vacant positions wherein Mrs Smith advised it was important the Trust does reflect the monies invested against the planned establishment.

The Chairman noted that as a Non-Executive Director he required assurances that patients were safe advising the ratio information detailed did not provide such assurances. Mrs Smith noted it was important the Trust reported against mandatory requirements, however, could include additional information in the report if required.

Mrs Smith advised the nursing establishment had been approved with same due to be reviewed again in October 2014.

Resolved

- **To note the report**

SAFE

14.07.11.1 QuEst Committee – 15 May 2014

Mrs Bullock presented the Action Notes noting the two items to be raised to the Board of Directors.

Mrs Bullock advised a closure report had been received on the Ten out of 10 Quality Strategy, with the Strategy concluding on 31 March 2014. Mrs Bullock advised the Committee had also approved the Quality Account.

Mr Davis referred to Survey being undertaken by Pascal Metrics wherein Mrs Bullock advised the survey had now closed with Pascal Metrics reviewing the results. Mrs Bullock advised a series of webinars had been arranged with senior staff to discuss the results.

Resolved

- **To note the Action Notes of 15 May 2014**

14.07.11.2 Serious Untoward Incidents and RIDDOR Events

Dr Dodds advised there had been 4 RIDDOR reportable events and no Serious Untoward Incidents for the period.

Resolved

- **To note the verbal update**

14.07.11.3 MCHFT Health & Safety Policy

Dr Dodds presented the policy for noting by the Board of Directors.

Mr Davis noted the Strategic Integrated Governance Committee had subsequently approved the Risk Management Strategy and suggested the Health & Safety Policy be reviewed to reflect same. Dame Pat Bacon suggested the Policy also consider reference to the Integrated Governance Strategy.

Resolved

- **To note the policy**

RESPONSIVE

14.07.12.1 Audit Committee – 9 June 2014

Mr Hopewell presented the Action Notes of the meeting which had been in the main an introductory session with KPMG, the Trust's recently appointed Internal Auditors.

Resolved

- **To note the Action Notes of 9 June 2014**

14.07.12.2 Performance & Finance Committee – 25 June 2014

Mr Oldham presented the Action Notes noting the three items to be raised to the Board of Directors.

Mr Oldham advised performance against the All Cancer: 62 day wait for first treatment from urgent GP referral had been challenged, however, noted the target had been met for the Quarter.

Mr Oldham advised Theatre Productivity and Financial Challenges would be raised under Agenda Item 12.3 – Performance Report

Mr Oldham noted the Committee had received a presentation on Bed Productivity with assurances received in relation to the Transformation Programme in place.

Resolved

- **To note the Action Notes of 25 June 2014**

14.07.12.3 Performance Report

Mr Oldham presented the Performance Report noting the Trust's performance against the Cancer Pathways whilst also noting the Trust continues to deliver the admitted, non-admitted and incomplete Referral to Treatment pathway targets in month, at an aggregate level. Mr Oldham noted monies were to be released nationally to support a reduction in 18 week waiting list initiatives so Trusts were in a more robust position for the winter period. Mrs Bullock advised of her concerns regarding the unrealistic timeframe for the release of the monies and required reduction in waiting listings noting she was to discuss same with the Area Team and Clinical Commissioning Groups.

Mr Oldham noted concerns regarding Theatre Efficiency advising same was performing below the internal target. In response to Dr Dodds' enquiry as to the plan in place to ensure theatre efficiencies were delivered, Mrs Frodsham provided a detailed explanation of the

reasons for the issues noting same was to be monitored by the Project Management Board. It was noted a presentation on Theatre Utilisation was to be received by the Performance & Finance Committee at their meeting in July 2014 and this would be escalated, via the Action Notes, to the Board of Directors. Mr Hopewell noted the performance and suggested there could be serious implications should theatre efficiencies not be attained. It was agreed the target date to be on trajectory was the end of March 2015.

Mr Oldham noted the Trust had achieved the Four-Hourly target for May and also noted the increasing number of GP referrals.

In relation to the financial position, Mr Oldham provided detail of the Trust's income and expenditure performance also noting the Trust's pay and non-pay costs, contract income, performance against Cost Improvement Programmes, the Capital Programme and the cash position. Mr Oldham noted the Trust is currently achieving a rating of 3 against Monitor's Continuity of Services metric.

Mr Hopewell raised his concerns in relation to performance of the Cost Improvement Programmes. Dr Dodds noted the Trust would need to consider the bed position in respect of elective activity, particularly in relation to the potential increase in non-elective activity and winter pressures. Mr Oldham noted a reforecast would be brought to the Performance & Finance Committee for in-depth discussion.

In respect of Workforce, Mr Oldham noted the position in relation to sickness absence, appraisals and mandatory training. Mr Pitt advised the Performance & Finance Committee were now reviewing, in detail, mandatory training and in particular those staff whose training was out of date.

Resolved

- **To note the report**

14.07.12.4 Governance Paper with regard to Surgical Admissions Lounge, Endoscopy & Treatment Centre Reconfiguration

Mrs Frodsham presented the paper noting the purpose of same was to provide additional information to support the decision regarding the plan to reconfigure the existing Treatment Centre, surgical and endoscopy facilities and to create a surgical admissions lounge. Mrs Frodsham noted the paper brought together a number of proposals which had been included in previously approved business cases and draws down additional capital funding included within the 2014/15 investment plan to complete the reconfiguration. Mrs Frodsham noted the reconfiguration would improve the patient experience and patient safety.

Mrs Frodsham noted the Phase 1 Capital Scheme (Theatres and Critical Care) was due to be signed off in the coming days with Phase 2 not to commence until final costs and closure have been agreed and completed.

Mr Barnes requested the Total Cost heading under the Capital Table be amended to read Indicative Cost.

In response to the Chairman's enquiry as to whether Board Members were happy to approve the paper subject to the change noted above, it was agreed to approve the paper.

Resolved

- **To approve the paper subject to the amendment noted.**

14.07.12.5 Divisional Quarterly Reviews

Mrs Frodsham provided a presentation giving a summary of the Divisional Quarterly Performance Reviews for 2013/14. Mrs Frodsham advised the process had previously been reviewed and a new system implemented in Quarter 1 of 2013/14. Mrs Frodsham noted the rating of each Division, the progress by Division and Divisional actions.

Resolved

- **To note the presentation**

14.07.12.6 Business Case for the expansion of the General Surgery Consultant Workforce

Mrs Frodsham presented the Business Case noting same outlined the need for investment in one additional General Surgery Consultant with associated support infrastructure. Mrs Frodsham noted the additional workforce requirement was due to a sustained period of significant growth in referrals to the service and the need to support increased provision of out of hours surgery cover. Mrs Frodsham advised the business case proposed the recruitment of an Emergency Surgeon which will contribute to the quality agenda and enhance the patient experience whilst also helping to improve outcomes in emergency general surgery.

Mrs Frodsham detailed the role of the Emergency Surgeon noting same was an innovative model seen in a number of other Trusts in the UK. Mrs Frodsham noted the proposed appointment would also require the appointment of additional Anaesthetists.

Mrs Frodsham detailed the total investment requested and referred to the financial appraisal included in the case.

Mr Barnes referred to previous discussions on the recruitment timeframe and whether action could have been taken sooner by the Trust wherein Dr Dodds advised he was working with the Divisions to

consider how the process can be accelerated, where appropriate. Mrs Bullock advised Divisions are being requested to complete Job Descriptions whilst preparing the Business Case in order not to delay the process should the Business Case be approved.

Dr Dodds referred to the Job Plan included in the Business Case and detailed discussion took place regarding the speciality of the Surgeon required. It was agreed that a Surgeon was required, however, in the discussion it was agreed the Executive Directors are to review the Emergency Model and consider whether an emergency surgeon is the most appropriate appointment to support the service requirement.

Dr Dodds also raised his concerns regarding the implementation timelines and the availability of anaesthetists.

In the discussion it was agreed to support the appointment of a General Surgery Consultant with associated infrastructure subject to clarification at the Board of Directors meeting of 4 August 2014 regarding the specialism.

Resolved

- **To approve the appointment of a General Surgery Consultant subject to confirmation of the specialism of the same**
- **To receive confirmation of the Speciality at the Board of Directors meeting of 4 August 2014**

14.07.12.7 Legal Advice

Mrs Bullock advised of one minor piece of legal advice sought.

Resolved

- **To note the verbal update**

WELL-LED

14.07.13.1 Clinical Services Strategy

Mrs Frodsham presented the Progress Report noting the progress for 2013/14 and the key objectives for 2014/15.

Resolved

- **To note the paper**

14.07.13.2 Well-Led Framework for Governance Reviews

Mrs Bullock provided a presentation on the Well led Framework for Governance Reviews based on papers released by the Care Quality Commission and Monitor.

Mrs Bullock noted Monitor, the Trust Development Authority and the Care Quality Commission were seeking to align the assessment of leadership, management and governance to create coherency and consistency across the activities of regulatory bodies.

Mrs Bullock noted the key lines of enquiry under the Care Quality Commission well-led framework and also the key questions under the well-led framework of Monitor and the Trust Development Authority.

Mrs Bullock outlined the guidance for Foundation Trusts and noted the four domains for review – Strategy & Planning, Capability & Culture, Process & Structures and Measurement. Mrs Bullock requested Non-Executive Directors review the document entitled Well Led Framework for Governance Reviews and in particular, Annex 1, which included examples of best practice. Mrs Bullock advised of the frequency and format of the reviews noting the suggested scoring criteria mirrored that of the Quality Governance Framework.

Mrs Bullock noted the impact of an inadequate rating for the Well Led Framework.

Resolved

- **To note the presentation**

14.07.13.3 Visits of Accreditation, Inspection or Investigation

SEQOHS Accreditation

Mrs Bullock advised the Trust's Occupational Health Service had undergone its annual accreditation review and had been reaccredited.

Cancer Screening QA Site Visit

Mrs Bullock advised of the multi-disciplinary peer review of the Cervical Screening Service. Mrs Bullock noted a positive report on the service had been received.

Care Quality Commission Final Report re Medicines Management

Mrs Bullock advised the Final Report had been received from the Care Quality Commission and the Trust were confirmed as compliant with the Medicines Management Outcome.

National Peer Review of Paediatric Diabetes

Mrs Bullock noted the a peer review of the Trust's Paediatric Diabetes Service had been undertaken and an overall positive report received. Mrs Bullock noted there had been one serious concern relating to On Call for the Lead Clinician. Mrs Bullock noted the issue would be one for a number of Trusts and advised discussions were being undertaken with other Trusts in the Cheshire and Warrington area to put arrangements in place.

Resolved

- **To note the verbal update**

EFFECTIVE

14.07.14.1 Strategic Integrated Governance Committee – 9 June 2014

Dr Dodds presented the Action Notes of 9 June 2014 noting there was one item to raise to the Board of Directors. Dr Dodds advised the Committee had received the Trust's response to the letter received from Professor Sir Bruce Keogh, National Medical Director regarding the disposal of Foetal remains. Dr Dodds advised the Committee were satisfied that systems and processes had been adjusted and accepted the Trust's response.

Resolved

- **To note the Action Notes of 9 June 2014**

14.07.14.2 Consultant Appointments

Dr Dodds advised two replacement Consultant Anaesthetists had been appointed.

Resolved

- **To note the verbal update**

14.07.14.3 Report on the Use of the Trust Seal

Mrs Bullock presented the report for noting.

Resolved

- **To note the report**

14.07.15 BOARD ACTIONS

After discussion, it was

Resolved

- **To approve the schedule of Board of Directors' actions**

ANY OTHER BUSINESS

None noted.

TIME, DATE AND PLACE OF FORTHCOMING MEETINGS

A Board of Directors meeting, in public, is at 9.30am on Monday, 4 August 2014.

Signed

Chairman

Date