

Board of Directors

Minutes of the Meeting held in Public at 9.30am on Monday 4 August 2014 In the Theatre Seminar Room, Leighton Hospital, Crewe

PRESENT

Mr D Dunn MBE	Chairman (<i>in the chair</i>)
Dame P Bacon	Non-Executive Director
Mr J Barnes	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
Mrs R McNeil	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

APOLOGIES

Mr J Lyons	Lead Governor
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IN ATTENDANCE

Mrs C Ralphs	PA to Director of Finance & Strategic Planning and Director of Nursing & Quality
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The Chairman opened the meeting and welcomed those members of the public 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 member of staff who had been admitted as a patient following an accident. The lady had been a patient on the Surgical Admissions Unit (SAU), Ward 9 and then, due to complications, had been readmitted to Ward 15. The lady went on to relay her experience and highlights of her hospital stay.

Mrs Smith indicated that overall the staff member genuinely gave her experience a high rating, noting a realistic expectation for Pharmacy and welcomed the fact that a volunteer took her to the Chapel on Sunday.

Mrs Bullock noted that the story was very positive and common to Ward 9, who rarely receives complaints.

In response to an enquiry from Mr Barnes of how the Trust can manage expectations in relation to discharge time, Mrs Smith replied that this was being actioned by the Patient Experience Committee.

Resolved

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

DIRECTORS' INTERESTS

None noted.

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 7 July 2014**

ACTIONS ARISING FROM PREVIOUS MINUTES NOT INCLUDED ELSEWHERE ON THE AGENDA

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

Mrs Frodsham explained that the Business Case was approved in principle last month, but the Board of Directors had requested clarity on the role of the Emergency Surgeon and how it would link in with other Surgeons. Mrs Frodsham stated she had met with Mr David Corless who had explained that the recruitment of the Emergency Surgeon would alter the rota in order to provide extra hours on site at the weekends. The Job Description is currently in development and noted that the cost implications remain the same.

Resolved

- **To accept Mrs Frodsham's update and proceed as per the business case timetable**

14.07.9.1 Quality Surveillance Group Formal Feedback

Mrs McNeil enquired of Dr Dodds if there was any further comment regarding raising the issue of peer review with colleagues.

Dr Dodds explained he had attended the Medical Directors' Forum on 11 July 2014 whereby he agreed to lead on a piece of work on behalf of all Acute Trusts' Medical Directors leading to a process of peer reviews but not just focused on mortality. Dr Dodds had agreed to speak to other Medical Directors to see how they want to take forward.

In response to Mrs Bullock's question, Dr Dodds confirmed he had also contacted Medical Directors from surrounding Trusts to ascertain their views on undertaking peer review for the weekly mortality audits. However, responses indicated that not all Trusts conduct weekly reviews and concern around the resource that would be required to do this was also expressed.

Dr Dodds confirmed he had yet to speak with Public Health colleagues and the Medical Director from the Area Team.

Resolved

- **To note Dr Dodds' update.**

14.07.11.1 QuEst Committee – 15 May 2014

Pascal Metrics

Mrs McNeil enquired if there had been any further developments following the Pascal Metrics survey.

Mrs Bullock responded that the survey was now complete and two webinars had been arranged to take the Trust through the results. The first one was held last week and this was around how to interrogate the data draw down reports. The next webinar is imminent and this will focus in more detail on what the results mean for the Trust. Mrs Bullock agreed to update at a future meeting.

Resolved

- **To note Mrs Bullock's update**
- **To update the Board at a future meeting**

ANNUAL WORK PROGRAMME

The Chairman presented the Annual Work Programme for noting. No amendments were recorded.

Resolved

- **To note the Annual Work Programme**

CHAIRMAN'S ANNOUNCEMENTS

14.05.6.4 Appointment of Non-Executive Director

The Chairman formally announced the appointment of Mr Robert (Rob) Allen to the Board as approved by Council of Governors at their recent meeting. It was anticipated Mr Allen would join the Trust on 1 September 2014.

The Chairman thanked those people from the Board, Sir David Henshaw, Chair from Alder Hey and the Governors who took part in

the process. The Chairman noted that the Board would now be at full strength.

14.08.7.2 Board to Board with University Hospital of North Staffordshire NHS Trust (UHNS)

The Chairman asked for the Board's thoughts on how the first Board to Board meeting was received. The general agreement was that the meeting was excellent where a positive atmosphere was felt. The Board felt that it was well thought through with the combination of the visit to the Cancer Unit at UHNS and the clinical feedback on current collaborations was powerful. Mrs Bullock advised that a joint briefing is prepared following each of the joint executive boards and that going forward the joint communication will specifically focus on progress of projects rather than the broader partnership.

In response to Mr Barnes' query regarding the need to agree robust joint measures to help to gain assurance that the direction of travel is correct, Mrs Bullock stated that this would be achieved through individual business cases around each clinical service. Mrs Bullock advised that the Chairman and Chief Executive Officer from each Trust will meet in September to ensure governance is synchronised across both organisations. Mrs Frodsham stated that the Terms of Reference and Memorandum of Understanding would be shared with the Trust's Internal Auditors, KPMG, to provide a view on governance and this would be discussed further in September.

The Chairman summarised that it had been a good meeting from which assurance had been gained appropriate to it being the first Board to Board meeting.

14.08.7.3 Chair to Chair with Chairman of University Hospital of North Staffordshire NHS Trust

The Chairman advised he had met with Mr John McDonald, Chair of UHNS and they discussed, as Chairs, the required governance arrangements that would need to be in place from the partnership and in particular, for stakeholder groups to ensure the partnership considers in detail at the very different communities they would be serving. The Chairman indicated that he thought the meeting went very well and they had agreed to meet periodically.

14.08.7.4 Stakeholder Engagement

The Chairman advised he was continuing to meet with stakeholders, both existing and new. The Chairman had been in contact with Active Cheshire (formerly Sport Cheshire) who are broadening their remit with considerable access to funding to support partnerships for their agenda. The Chairman explained he would be inviting Ms Ann Boyd, CEO from Active Cheshire to a future Board Awayday for the Board to appreciate their widening remit. The Chairman indicated they were a

keen and creative group who are looking to work in partnership with the Trust.

Resolved

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

GOVERNORS ITEMS

14.08.8.1 Council of Governors' Meeting – 31 July 2014

The Chairman referred to the recent Council of Governors meeting.

The Chairman advised the Council meeting had seen discussion on the Annual Report and National Inpatient Survey results. The Chairman also noted the Council of Governors' committee refresh and asked Chairs of Board Sub-Committees to meet with new Governors to outline the remit and purpose of those Committees.

The Chairman asked the Board to note the change of date for the Annual Members' Meeting, due to the impending Care Quality Commission Inspection. This had now been arranged for the afternoon of Monday 13 October 2014.

Mrs Bullock has invited Governors to determine how they wished to receive information and assurance in respect of the Care Quality Commission Dementia report. The Governors had decided that this would be best placed with the Patient Experience Committee who would hold an extra-ordinary meeting to take this forward. This would be reported back to the next Council of Governors meeting.

The Chairman gave his thanks to Mr John Lyons, as he is to continue as Lead Governor for another year. The Chairman indicated that Mr Lyons would not want to carry on in the role thereafter, so preparation work was to begin for succession planning.

The Chairman reported that Council formally endorsed Dame Pat Bacon's appointment as Deputy Chair as from 1 August 2014 for the remainder of her term.

Resolved

- **To note the report**

CHIEF EXECUTIVE'S REPORT

14.08.9.1 Joint Overview and Scrutiny Committee Meeting

Mrs Bullock noted she and Mrs Smith had attended the Joint Overview and Scrutiny Committee meeting, Cheshire West and Chester and East Cheshire. Mrs Bullock advised the meeting had taken place to seek

assurance in respect of the health economy's position on mortality. The meeting was very positive with intelligent questioning. Mrs Bullock indicated a further meeting would take place in February 2015, which will be after two further SHMI releases.

14.08.9.2 Executive Director Awayday

Mrs Bullock referred to the Executive Away day which had taken place on Monday 21 July 2014. Mrs Bullock advised discussion had focused on the Planning Cycle and how to better align this with the development of workforce planning and how this can be used to better plan business cases progression. This would ultimately support greater compliance with timescales and deadlines.

Mrs Bullock advised discussion had also focused on the impending Care Quality Commission Comprehensive Inspection due week commencing 6 October 2014. The inspection is likely to take two or three days to cover all three sites, but exact dates have not yet been released. Planning and actions are underway. Mr Barnes asked if there was a likelihood of the inspection being scaled down in light of their announcement to carry out fewer inspections. Mrs Bullock replied that, in her opinion, the inspection would not be scaled down, but that the Care Quality Commission would carry out fewer inspections going forward.

Discussion also took place regarding preparation for stakeholders and the information on key lines of enquiry that the Trust would wish to convey.

Mrs Bullock noted the final item discussed was the Trust's financial position and the delivery against the Cost Improvement Programme.

14.08.9.3 Mortality – SHMI for 30 July 2014

Mrs Bullock announced that the SHMI release from 30 July 2014 shows the Trust now in the "as expected" position. This was better than the Trust expected as this was only a part year effect of the correction of recording issue, thus reinforcing the clinical work underway from 18 months – two years ago. A further reduction is expected in October when the Trust will see the full year effect.

14.07.9.4 Connecting Care Board

Mrs Bullock advised she had attended the recent Connecting Care Board at which there was significant discussion around strategy implementation and the recognition that the scale, pace and resource are still to be worked through.

Mrs Bullock advised of the NHS IQ Transformation Programme is available to the health economy and they had been requested to develop a bespoke development programme for the Connecting Care

Board. Mrs Bullock advised plans were in place to agree what this would look like.

Discussion also focused around Moving Forward, public engagement events, which the Trust led on last year that were well attended and well received. Stakeholders are keen to repeat these events but to see if they could be made more interactive. Presentation of the Connecting Care Board Strategy would be the focus with each organisation outlining the impact of this for them.

14.08.9.5 Senior Team Meeting

Mrs Bullock advised that she had not attended the meeting and invited Dr Dodds to provide feedback.

Dr Dodds advised discussion focussed around the action plan developed following the Quality Surveillance Group meeting and where this should sit in terms of monitoring progress. Mr Simon Whitehouse, Chief Officer, NHS South Cheshire Clinical Commissioning Group and NHS Vale Royal Clinical Commissioning Group, will write to Mrs Bullock regarding this. Dr Dodds added that further discussion took place regarding the mortality action plan and about building relationships between the Trust and Clinical Commissioning Groups.

14.08.9.6 Care Quality Commission Comprehensive Inspection

Mrs Bullock indicated that this item had already been discussed in detail under previous items.

The Chairman advised that he had arranged a discussion with the Chair at Aintree, who had been through the Care Quality Commission Comprehensive Inspection, but unfortunately this was cancelled. The Chairman added that he would try to rearrange the telephone conference to discuss his experience of the inspection.

The Chairman noted that he had recently been on a ward visit and took time to have a discussion about the Inspection and was very reassured to have met some impressive people who were focused on making a positive contribution to the inspection.

14.08.9.7 Visit to Neonatal Unit

Mrs Bullock informed the Board that there would be a visit to the Neonatal Unit at 1.00 pm today, should anyone wish to participate.

Resolved

- **To note the Chief Executive's Report**

CARING

14.08.10.1 Patient Quality Safety & Experience Report

Mrs Smith presented the report noting the number of formal complaints received for the month of June was 27 which was a decrease of one compared to the previous month. Mrs Smith provided detail of the key trends.

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

Mrs Smith noted the number of closed claims advising 8 had been upheld, 9 partially upheld, 3 were not upheld and 1 complaint was withdrawn. In response to Mr Davis' enquiry regarding complaints being linked to incidents, Mrs Smith explained that this was not necessarily so, and in the event of a complainant raising concerns that an incident had occurred then this would be reported as such. Mrs Smith noted that feedback is given to staff in terms of learning.

Mr Davis enquired about the X-Ray reporting system being under review. Mrs Bullock explained that this was to do with the system of how the patient is informed of any possible fracture once diagnosed from formal reporting, and not a review of any X-Ray reporting software.

Mrs Smith advised there had been 131 contacts raising concerns and provided detail of the key trends. Mrs Smith noted there had been 179 compliments/thank-yous received.

Mrs Smith presented the Legal Services Report noting there had been 3 new Clinical Negligence claims received in June.

Mrs Smith advised 5 inquests had been concluded in June noting the conclusions of each and any Lessons to be Learnt.

Mrs Smith advised there had been 10 postings on NHS Choices, 8 positive and 2 negative and also provided detail of the Friends & Family Test Response Rates and Net Promoter Scores. Mrs Smith noted the Maternity Friends & Family Test local area team scores had been reported incorrectly nationally.

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 and indicated that patient falls were decreasing year on year. In response to an enquiry from Mrs McNeil regarding patient “tagging”, Mrs Smith explained this was about a principle and staff paying particular attention to patients who are vulnerable, not a physical tagging of the patient.

Mrs Smith noted the number of Hospital Acquired Pressure Ulcers Resulting in Harm by Month had decreased, and was continuing to do so.

Mrs Smith noted the number of Hospital Initiated Outpatient Cancellations and noted this was ahead of target to meet reductions.

Mrs Smith noted the significant discussions that had taken place in relation to mortality, and whilst pleased, the action plan moves forward with vigour.

Mrs Smith advised there had been no MRSA bacteraemia cases reported within the Trust in the financial year to date. The Trust is on plan against Clostridium Difficile performance, with 4 cases reported in this financial year to date, against a target of no more than 23 cases to be reported in the year.

In relation to the number of patients with a suspected stroke that are admitted directly to a specialist acute stroke unit, the figures are variable due to very small numbers, but are improving. Focus continues to get the number of patients diagnosed with a Transient Ischemic Attack (TIA) treated within 24 hours of referral back on track.

Mrs Smith noted the number of mothers smoking in pregnancy was variable in June, whilst the Breast Feeding Initiation Target had been achieved.

Dame Bacon indicated she had visited Ward 23 recently and noted the use of ex patients as volunteers to help mothers with breastfeeding.

Dr Dodds advised Internal Audit had been asked to look at reporting around serious incidents as it had been flagged the Trust has not had any serious incidents in 6 months.

Resolved

- **To note the report**

14.08.10.2 **Monthly Nursing & Midwifery Staffing Report**

Mrs Smith presented the report noting the purpose of same. Mrs Smith advised the updates, which are 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 June, were vacant posts, sickness and patient numbers/acuity not requiring the level of staffing within the plan.

Mrs McNeil requested that an extra column be added next to the ward number, stating what the ward specialty is. Mrs Smith agreed to this request and said she would circulate a chart identifying each ward and its specialty.

Resolved

- **To note the report**
- **To circulate ward specialty chart JS**

SAFE

14.08.11.1 **Infrastructure Development Committee - 14 July 2014**

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

Mr Oldham informed the Board that the Radiology Information System (RIS) business case had not been completed in time for the Board of Directors meeting due to cosmetic amendments and smarter targets required.

Mrs Frodsham asked the Board to consider approval of the replacement of a garden for stroke rehabilitation patients that previously had £x [Sum removed under Section 43 of Freedom of Information Act] allocated to it. This would require an additional £x [Sum removed under Section 43 of the Freedom of Information Act] approval for the Board and would allow the close down of the theatre costings.

In response to an enquiry from Mrs McNeil that £x [Sum removed under Section 43 of the Freedom of Information Act] is excessive for a garden, Mrs Frodsham replied that this was a therapeutic garden specifically for stroke rehabilitation patients that needs different paths and surfaces. It was, in effect, an outside rehabilitation area.

Mr Oldham clarified that the Board was being asked to approve a total of £x [Sum removed under Section 43 of the Freedom of Information Act], of which there was a £x [Sum removed under Section 43 of the Freedom of Information Act] increase on what was originally approved.

Mrs Frodsham gave an update on the Treatment Centre and Surgical Admissions Lounge (SAL) noting the issue still remains with the flooring in the Treatment Centre, which has now been decanted. External assessments have been carried out on the flooring and it will take 4 weeks of core testing. Mrs Frodsham noted that by the next Board of Directors meeting there would be a definitive solution.

In relation to the Main Entrance, Mr Oldham advised that following the contract being reassigned to alternative contractors the scheme was progressing well. Mrs Frodsham added that by 18 August 2014 the new entrance will be opened for pedestrian access, with the retail areas being completed by mid-September 2014. This would allow the portacabin to be removed and the resurfacing of the car park to be finished by 8 September 2014. Mr Oldham stated there were still some ongoing issues with the original contractor and the value of the work they had completed, this was currently with solicitors.

Mr Oldham advised that for the Wayfinder Scheme to be completed in time for October, a single tender waiver was to be approved. This single tender action would go through Infrastructure Development Committee as a variation.

Resolved

- **To note the Action Notes of 14 July 2014**
- **To formally approve an additional £x [Sum removed under Section 43 of the Freedom of Information Act] out of retained surplus, to close down the Theatre costs.**
- **To undertake a single tender waiver to ensure completion of the Wayfinder Scheme by the end of September**

14.08.11.2 Serious Untoward Incidents and RIDDOR Events

Dr Dodds advised there had been 3 RIDDOR reportable events and no Serious Untoward Incidents for the period.

Resolved

- **To note the verbal update**

14.08.11.3 Quality Assurance for Responsible Officers and Revalidation: Report for the Board of Directors.

Dr Dodds presented the report for approval by the Board of Directors.

Dr Dodds outlined the background to the introduction of Revalidation, the purpose of the report and the Trusts Governance arrangements around Revalidation. Dr Dodds outlined the Trusts Medical Appraisal Performance for 2013/14 and added that an electronic appraisal system “Allocate” has been introduced and is available for the current appraisal year. The system will also be used for job planning and annual leave. Dr Dodds asked the Board to recognise the extra work carried out by the staff in Medical Staffing Department following a long term absence since February 2014.

Resolved

- **To approve the report.**
- **To thank colleagues in the Medical Staffing Department.**

RESPONSIVE

14.08.12.1 Performance & Finance Committee – 23 July 2014

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

Mr Oldham advised that all performance was achieved in Quarter 1 and the Trust is now required to declare to Monitor its forecast for a Continuity of Service rating of 3 over the next 12 months. At the last quarter the Trust had declared it was compliant at a 3. The position was considered at the Performance & Finance Committee meeting and it was proposed to continue to declare a rating of 3.

Mr Oldham noted that the Committee had received a presentation on the Outpatient Department Rationalisation with assurances received in relation to the Transformation Programme in place.

Mr Oldham advised that a profiling issue had been identified which has had an adverse effect on the financial plan of £280k for the quarter. Mr Oldham stated that this did not alter the substantive position, but would change the forecast position on that reported in the minutes.

Resolved

- **To note the Action Notes of 23 July 2014.**
- **To note the recommendation that the Forward Declaration to Monitor should remain at a Continuity of Service rating of 3.**

14.08.12.2 Performance Report

Mrs Frodsham 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.

Mrs Frodsham noted the Trust had achieved the Four-Hourly target for June and also noted the increasing number of GP referrals.

In relation to the financial position, Mr Frodsham 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. Mrs Frodsham noted the Trust is currently achieving a rating of 3 against Monitor's Continuity of Services metric.

Mr Davis raised his concerns in relation to theatre productivity and lower than expected efficiencies realised. Mrs Frodsham explained there were still various problems relating to theatre productivity and a detailed presentation would be given to Performance & Finance Committee in September.

In respect of Workforce, Mrs Frodsham noted the position in relation to sickness absence, appraisals and mandatory training.

Resolved

- **To note the report**

14.08.12.3 Legal Advice

Mrs Bullock advised of two minor pieces of legal advice sought.

Resolved

- **To note the verbal update**

WELL-LED

14.08.13.1 Board Assurance Framework Quarter 1 2014/15

Dr Dodds presented the Progress Report noting it was in the standard format and had been approved at Strategic Integrated Governance Committee.

Resolved

- **To accept the paper**

14.08.13.2 Visits of Accreditation, Inspection or Investigation

Mrs Bullock advised there had been no visits since the last meeting of the Board of Directors.

Resolved

- **To note the verbal update**

EFFECTIVE

14.08.14.1 Strategic Integrated Governance Committee – 14 July 2014

Dr Dodds presented the Action Notes of 14 July 2014 noting the three items to be raised to the Board of Directors.

Dr Dodds noted that the Board Assurance Framework had been discussed previously.

Dr Dodds advised Divisions had responded to a letter which had been received from Professor Sir Bruce Keogh in relation to the surgical management of urinary incontinence and pelvic organ prolapse, and the Committee accepted the assurances provided by the Divisional responses.

Dr Dodds advised the Committee had received the Care Quality Commission Final Report on Dementia Care Themed Inspection and Action Plan and noted the Action Plan would be monitored by the Committee on a monthly basis.

Resolved

- **To note the Action Notes of 14 July 2014**

14.08.15 BOARD ACTIONS

After discussion, it was

Resolved

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

ANY OTHER BUSINESS

14.08.16.1 MR Scanner Business Case

Mr Oldham provided an update on the finances of the MR Scanner Business Case and noted that the £1M loan applied for had been approved by the ITFF (Independent Trust Finance Facility).

14.08.16.2 Department of Health Release

Mr Oldham advised that the Department of Health had released a report outlining variances across the NHS in relation to commodity charges, highlighting that the Trust does benchmark favourably in a number of areas. Mr Oldham noted this document is in the public domain but was not expecting any adverse publicity for the Trust.

TIME, DATE AND PLACE OF FORTHCOMING MEETINGS

A Board of Directors meeting, in public, is at 9.30am on Monday 1 September 2014 in the Boardroom, Leighton Hospital, Crewe.

Signed

Chairman

Date