

Board of Director Meeting
Minutes of the Meeting held in Public at 9.30am on Monday 2 February 2015
In the Board Room, Leighton Hospital, Crewe

Present

Mr D Dunn MBE	Chairman (<i>in the chair</i>)
Dame P Bacon	Non-Executive Director
MR J Barns	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 Oldham	Director of Finance & Strategic Planning
Mr D Pitt	Director of Service Transformation & Workforce
Mrs J Smith	Director of Nursing & Quality

In attendance

Jenna Davies	Interim Trust Secretary
John Lyons	Lead Governor
Rachel Pearson	KPMG

BoD15/02/1 Welcome, introduction and apologies

15/02/1.1 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.

15/02/1.2 Apologies for absence were received from Mrs Ruth McNeil

BoD15/02/2 Patient/Staff Story

15/02/2.1 Mrs Smith introduced the monthly patient story

15/02/2.2 Members of the Board listened to the audio story from a patient, who wished to remain anonymous, explaining her experience of maternity services. The patient described how after delivery of her first baby she tried to breastfeed and was unable - she further explained how she felt pressured to continue trying to breastfeed and felt like a failure when her continuing efforts failed.

15/02/2.3 The patient explained that she was in hospital for four days and was eager to get home but staff refused to discharge her until she bought all the necessary equipment for bottle feeding. The patient noted that on reflection she was sure the staff were trying to help but all she wanted was to go home.

15/02/2.4 Mrs Smith noted that the patient story had been played for staff on the ward, and they were shocked by what they heard. She explained that the Trust was currently reviewing the birthing classes and looking specifically at education for first time mothers. Mr Davies noted that it was a moving story, but questioned whether the breastfeeding targets were impacting on patients. In response Mrs Smith noted that often it's about communication, adding that how staff say things and how often they say it can be misinterpreted. Mrs Bullock added that even though the patient had received good care clinically and

technically, the experience element was missing and it is that which is remembered.

15/02/2.5 The Chairman asked that the Patient be thanked for sharing her moving story with the Board

BoD15/02/3 Board Members' Interests

15/02/3.1 None noted

BoD15/02/4 Minutes of the Board of Directors Meeting held on 5th January 2015

15/02/4.1 The minutes of the meeting held on 5th January were approved subject to amendments

Resolved to

- **Agree the minutes of the Board of Directors meeting held on the 5th January 2015**

BoD15/02/5 Matters arising

15/02/5.1 None noted.

BoD15/02/6 Annual Work Programme

15/02/6.1 Mrs Bullock noted that the annual work programme was due for review in April and all Directors had been asked to review the work programme. Mr Barnes requested that the work plan item relating to the deanery be amended to reflect the change in organisation to Health Education North West.

BoD15/02/7 Chairman's Announcements

Non-Executive Director

15/02/7.1 The Chairman noted that Mr Rob Allen has tendered his resignation due to work commitments. The Chairman informed Board that he had accepted Mr Allen's resignation which was effective immediately. The Chairman took the opportunity to thank Mr Allen.

15/02/7.2 Mrs Bullock confirmed that the Trust would convene a meeting of the Nomination and Remuneration Committee to review the Board skill matrix, agree the job description and approve an executive search company.

University of Chester

15/02/7.3 The Chairman invited Mr Davies to update the Board on a recent meeting he had attended at the University of Chester in relation to the University's plans to set up a medical institute. Mr Davies explained that the University of Chester is planning on setting up a medical institute in 2017, based on an undergraduate programme which would focus on integrated care. The university had invited all providers in the Cheshire, Wirral and Holton to attend.

15/02/7.4 Mrs Bullock noted the Trusts current alignment with Universities in respect of pre and post graduate medical education and advised Board of discussions with Keele University which aligned to the partnership arrangements with UHNM.

National Tariff

15/02/7.5 The Chairman informed the Board that confirmation had been received that 75% of NHS

15/02/7.6 providers by activity had objected to the new tariff. He explained that this means that Monitor will either have to re-consult on the tariff or refer to the Competition Commission. He went on to explain that if Monitor refer to the Competition Commission they would only be able to review the method and not revise the tariff. The Chairman noted that the current tariff would remain in place until a resolution was reached.

15/02/7.7 Mr Oldham added that the 75% figure was based on activity and the majority of providers who had objected were specialist Trusts and large teaching hospitals. Mr Oldham confirmed that the majority of objections were around two key issues: specialist commissioning and the marginal tariff. Mr Oldham noted that the annual planning process would be impacted due to the uncertainty around the Tariff, and there was a risk to the contracting cycle but the current contracts would roll forward until there is resolution.

15/02/7.8 Mr Barnes asked if the Trust was financially in a better position. Mrs Bullock responded that the uncertainty around the annual planning was cause for concern for the Trust and Mr Oldham added that there are some gains but also some losses e.g. marginal tariff would remain at 30%, therefore it was not a straightforward yes or no and much depended on the terms of the new contract.

Resolved

- **To note the Chairman update**

BoD15/02/8 Governors' Items

15/02/8.1 The Chairman introduced agenda item 8, noting that the Council of Governors had met on 29 January. The Chairman informed the Board that the Trust Constitution had been approved and Dame Pat Bacon's second term of office as a Non-Executive Director had been approved. The Chairman noted that two of the new Governors had attended the Council of Governors meeting and the Trust would shortly be going out to election for two Governors.

Resolved

- **To note the update from Council of Governors**

BoD15/02/9 Chief Executive's Report

Safety Improvement Network

15/02/9.1 Mrs Bullock informed Board of a new Safety Improvement Network being launched by AQuA and grant funded by the Health Foundation. Mrs Bullock advised that MCHFT had been invited to host an event on the 17 June which would allow the Trust to showcase its Quality Improvement Projects.

North West Coast AHSN Patient Safety Governance Forum

15/02/9.2 Mrs Bullock advised Board that as a member of the AHSN Board she had been invited to be the Chief Executive sponsor and chair the new AHSN Patient Safety Governance Forum (PSG). Mrs Bullock advised Board of the remit of the PSG and the multiple stakeholder membership. Mrs Bullock advised the first meeting had taken place on the 21 January and the agreed four key priorities were:

1. Medicine optimisation
2. Sepsis
3. Hydration & Acute Kidney Injury
4. Evaluation of the Patient Safety Collaborative

Post Inspection CQC Stakeholder Event

15/02/9.3 Mrs Bullock advised Board that the CQC stakeholder event which was held on 9th January was extremely positive. The Trust will submit an action plan to address issues which were raised by the CQC on 5th February 2015.

Connecting Care Board & Connecting Care Provider Board

15/02/9.4 Mrs Bullock informed Board Members that David Pitt has been appointed as the new interim Programme Director as of 9th February. Mrs Bullock noted that an interim Director of Service Transformation and Workforce has been appointed until both posts are recruited to substantively. The Chairman extended the Board's thanks and best wishes in his new role.

15/02/9.5 Mrs Bullock informed Board that she was unable to attend the last meeting of the Connecting Care Board and invited Denise Frodsham to feed back. Mrs Frodsham noted that the Board had discussed a number of issues currently affecting the NHS including the requirement to reduce delayed discharges by 50% in four weeks.

15/02/9.6 Mrs Frodsham also noted that the Board had approved the new model of integrated care which focused on a holistic team approach targeting the top 2% of patients who were at risk of hospital admission.

Executive Away Day

15/02/9.7 Mrs Bullock fed back on the Executive away day which took place in January, noting that attendees reviewed the progress in the development of the annual plan and budget, 7 day services business case, 4 hourly performance and the CQC action plan.

15/02/9.8 Mr Davies asked about the release on new NICE guidance around minimum staffing levels in A&E. Mrs Smith noted that a gap analysis was currently underway internally. In response to Mr Davis's question, Mrs Bullock noted the CCGs would be unlikely to approve any business case for additional staffing as its likely to be unaffordable.

Cheshire, Warrington and Wirral Chief Executives Meeting

15/02/9.9 Mrs Bullock noted that she and Dr Dodds had attended a meeting of Chief Executives and Medical Directors across Cheshire, Warrington and Wirral to discuss the reduction in trainee Doctors from August 2015 and the inequality of the allocation of Junior Doctor. Mrs Bullock noted the impact medical and surgical rotas and the mitigation already put in place whilst noting this did not address all the gaps. Mrs Bullock confirmed that she and Dr Dodds would be meeting urgently with Health Education North West representatives to address the loss of trainee doctors in August 15 and that it was agreed to set up a task and finish group, which both Mrs Bullock and Dr Dodds would be members of, which would look at the longer term equitable allocation of trainee Doctors.

Resolved

- **To note the Chief Executive update**

BoD15/02/10.1 Patient Quality Safety & Experience Report

15/02/10.1.1 Mrs Smith introduced the Patient Quality Safety and Experience report, highlighting a number of key metrics, including;

- 17 formal complaints received in month
- The Trust had no complaints referred to the Ombudsman
- The Trust had seen a reduction of PALS concerns
- The overall trend for complaints remains communications

15/02/10.1.2 Mr Davies asked about a new posting on NHS Choices relating to the Eye Care Centre. In

response Mrs Bullock explained that, due to the number of patients currently being seen, the service had outgrown the current waiting area, and in the short term the service was utilising other space. Mrs Frodsham noted that plans were currently in development for an extension to the current Ophthalmology building. Mrs Smith added that the Trust was also looking at what measures can be put in place to make the wait more comfortable for patients including refreshments.

15/02/10.1.3 Mrs Smith highlighted the section relating to the Friends and Family Test noting that responses from Maternity had increased, correlating to the Trust using cards instead of the text message service.

15/02/10.1.4 Mrs Smith introduced the safety section of the report highlighting the number of patients seen in month and the number of harm incidents, informing Board of one grade three pressure ulcer.

15/02/10.1.5 Mr Davies noted that the overall trend in respect of pressure ulcers was positive and asked if any further information was available in relation to the development of the grade three pressure ulcer. Mrs Smith noted the patient had been admitted to hospital with a stage 2 pressure ulcer and that the case had been extensively reviewed. Mrs Bullock assured Board Members that reports on pressure ulcers were the subject of rigorous scrutiny at the QuEST committee whose responsibility it was to provide assurance to Board.

Resolved

- **To note the Patient Quality and Safety Report**

BoD15/02/10.2 Monthly Nursing & Midwifery Staffing Report

15/02/10.2.1 Mrs Smith presented the monthly Nursing and Midwifery Staffing report, highlighting that the Neonatal Intensive Care Unit had, on a number of occasions throughout the month, not met the planned staffing levels. Mrs Smith noted that staffing levels on the NICU during December were adjusted based on the needs of the babies on the unit at the time.

15/02/10.2.2 Mrs Smith updated Board members on a possible national change to the way that this information is presented. NHS England are to publish indicators which will be RAG rated. Directors of Nursing have raised concerns relating the lack of consultation around these planned changes and are waiting for feedback from Jane Cummings, Chief Nursing Officer for NHS England.

Resolved

- **To note the Nursing and Midwifery staffing report**

BoD15/02/10.3 Quality, Experience and Safety Committee

15/02/10.3.1 Mrs Bullock noted the action notes in the pack had been presented to the last Board meeting and the escalated items discussed.

Resolved

- **To note the action notes from the Quality, Experience and Safety Committee**

BoD15/02/11.1 Infrastructure Development Committee

15/02/11.1.1 The action notes from the Infrastructure Development Committee in January were presented to Board; no issues were escalated to Board.

Resolved

- **To note the action notes from the Infrastructure Development Committee**

BoD15/02/11.2 Serious Untoward Incidents and RIDDOR Events

15/02/11.2.1 Dr Dodds advised Board there were no new incidents to report. He noted that one new RIDDOR event had been reported.

BoD15/02/12.1 Performance and Finance Committee

15/02/12.1.1 Mr Oldham presented the Action notes from the Performance and Finance Committee. He highlighted the following issues which the committee escalated to Board;

15/02/12.1.2 The Financial Forecast, highlighting specifically that the Trust was now reporting to Monitor on a monthly basis and has forecast a deficit of £3million. Mr Oldham noted that the revised forecast position would impact on the Continuity of Service rating (COS) which would now be a rating of 2.

15/02/12.1.3 Annual Plan, Mr Oldham noted that he had delivered a presentation to PAF highlighting the progress of the annual planning process in terms of consolidating divisional plans and the capacity and demand exercise. He noted that the draft Annual Plan is due to be submitted to monitor by 27th February 2015. As the draft plan was not ready for Board approval at this meeting, Mr Oldham recommended that the draft plan to be signed off by PAF on 20th February 2015.

Resolved

- To note the update from the Performance and Finance Committee
- To delegate authority to the Performance and Finance Committee to sign off the draft annual plan
- Agreed to add the draft annual plan to the Board Agenda in March

BoD15/02/12.2 Performance Report

15/02/12.2.1 Mrs Frodsham presented the Performance Report, highlighting that the Trust was performing well against cancer indicators, and that the Audiology target was delivered at 100%. Mrs Frodsham noted that the Trust had not delivered on the four- hour wait indicator, noting that this was due to a number of factors but the biggest challenge was relating to flow within the system and getting patients discharged.

15/02/12.2.2 Mr Barnes asked about the effectiveness of the Trust's winter plans, Mrs Frodsham noted that the winter ward was not able to be opened on time following refurbishment of a ward due to issues with the flooring which had compounded capacity issues. Mrs Frodsham also noted that, due to the time of year, Norovirus is a factor effecting patient flow both internally and externally. Mr Barnes asked about isolation for patients with Norovirus, in response Mrs Bullock noted that where possible patients are isolated whilst noting the rapid spread once a patient was admitted to hospital with norovirus. Discussion then took place around general isolation and the benefits of a decant ward which will be available later in the year following the refurbishment programme.

15/02/12.2.3 Under Financial Performance Mrs Frodsham noted that elective activity, including day cases were worse than plan £0.3million in month and by £1.4million cumulatively, also highlighting that Maternity is on plan in month but £0.4 million below plan cumulatively whilst noting births and booking are lower than planned year to date. Mrs Frodsham

highlighted that pay is worse than plan in month by £0.1million and year to date by £0.8million. Non-pay is worse than plan partly due to external contracts for Radiology and Endoscopy.

15/02/12.2.4 Within the workforce summary Mrs Frodsham highlighted that sickness absence was showing a rising trend although it was still well below the north west position. It was noted that Norovirus will impact on the figures next month due to the effects on staff.

15/02/12.2.5 Concerns remained in respect of performance against mandatory training and appraisal and Mr Pitt advised Board of actions being taken to address this and the scrutiny being undertaken and the Performance and Finance Committee.

Resolved

- To note the Performance Report

BOD/15/2/12.3 Legal Advice

15/2/12.3.1 None to note

BOD/15/2/13.1 Visits of Accreditation, inspection or investigation

15/2/13.1.1 None to note

BOD/15/2/13.2 Board Assurance Framework Q3 Progress Report

15/2/13.2.1 Dr Dodds presented the Board Assurance Framework, no questions were raised

Resolved

- **To Note the progress update**

BOD/15/2/14.1 Strategic Integrated Governor Committee

15/2/14.1.1 Dr Dodds presented the minutes and noted the items for escalation were:
1 Board Assurance Framework 2014/2015 Quarter 3 Progress Report (as at agenda item 13.3)
2 The CQC Dementia Care Action Plan, noting this had been formally signed off by members.

Resolved

- **To note the update from the Strategic Integrated Governor Committee**

BOD/15/2/14.2 Consultant Appointments

15/2/14.1.1 Dr Dodds provided an update to Board about recent consultant appointments, noting that two new consultants had been appointed in Ophthalmology.

Resolved

- **To note the update**

BOD/15/2/15 Any other Business

15/2/15.1.1 Mrs Bullock informed Board Members that the Trust had been unsuccessful in the tender process for sexual health services. Mrs Bullock noted that, when the successful organisation is appointed, the Trust would work with them to provide a smooth transition of the service.

- 15/2/15.1.2 Mrs Bullock noted that the Trust would was looking at other opportunities to utilise the estate currently used by the service. Dame Bacon noted that staff must be disappointed, in response Mrs Bullock noted that the staff had been informed of the decision and were very disappointed. Mrs Bullock also noted that staff would be tuped across as part of the contract to the new provider. Mrs Bullock noted the Trust's disappointment, adding that the service is excellent and receives outstanding feedback from users
- 15/2/15.1.3 Mr Oldham noted that the loss of the sexual health tender meant that the Trust would no longer be able to provide HIV services and as such, notice had been served to commissioners to enable them to secure alternative provision.
- 15/2/15.1.4 Mrs Smith noted her concern in respect of the current seamless management of safeguarding issues, particularly for children confirming the Trust was committed to working with the new provider to ensure continuity of service.
- 15/2/15.1.5 There was a general discussion about the apparent fragmentation of the services and the significant issues being experienced by Cheshire West and Chester through the re-provision of sexual health services following a similar tendering exercise. It was hoped that the transition of our sexual health service would be smoother and more professional.

BoD/15/2/16 **Date of the next meeting**
2nd March 2015

The meeting closed at 11:25 hours.