

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on
Tuesday 1 May 2012 at 11.00 am in the Board Room, Weston General Hospital**

Present:

Mr Chris Creswick	Chairman (V)
Mr Peter Colclough	Chief Executive (V)
Ms Jude Ferguson	Non Executive Director (V)
Mr Roger Lloyd	Non Executive Director (V)
Mr Grahame Paine	Non Executive Director (V)
Dr George Reah	Non Executive Director (V)
Mr Ian Turner	Non Executive Director (V)
Ms Bronwen Bishop	Director of Strategic Development (V)
Mrs Chris Bryant	Director of Service Redesign
Mr Nick Gallegos	Medical Director (V)
Mrs Irene Gray	Director of Nursing (V)
Mrs Alison Kingscott	Director of Human Resources
Mr Rob Little	Director of Finance (V)
Mrs Andrea Hunt	Trust Board Secretary

(V) denotes Voting Director

In Attendance:

Mr Stephen Buswell	North Somerset LINk
Mrs Julie Fisher	Executive Personal Assistant (Minute-Taker)
Mrs Caroline Welch	Head of Communications

733.12 WELCOME AND APOLOGIES

Mr Creswick, Chairman, noted the following apologies for absence:

Mr Nick Wood	Chief Operating Officer
Dr Patricia Woodhead	Director of Quality and Patient Safety

Mr Creswick welcomed Mrs Chris Perry, who joined the Trust yesterday as Associate Director of Nursing supporting Mrs Gray on the substantial nursing agenda. A welcome was also extended to David Craig, the Performance and Improvement Manager working as part of Mr Wood's Team, to Mr Martyn Case, Lead Infection Prevention and Control Nurse, and to Mr Alan Richardson representing Crossroads Care.

DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest.

724.12 CONSENT AGENDA

Minutes and Matters Arising from the Meeting held on Tuesday 3 April 2012

The Minutes of the meeting held on Tuesday 3 April 2012 were agreed as a correct record.

Resolution:

The Minutes of the April Board in Public Meeting were **APPROVED** as a true and accurate record of the meeting.

The Table of Matters Arising following the meeting held on Tuesday 3 April 2012 had been reviewed with the progress and completion data duly updated.

Attention was drawn to Minute Reference 726.12, acknowledging that progress had not been completed in full pending a further meeting to be arranged with Mr Paine and Dr Reah during May 2012 to review and discuss the Integrated Performance Report as part of its continued development.

735.12 ANNUAL REVIEW OF REGISTER OF INTERESTS

Resolution:

The Board **NOTED** the Annual Review of Register of Interests for 2011/2012.

736.12 CHIEF EXECUTIVE'S REPORT

Mr Colclough presented his Chief Executive's Report, firstly providing an update in respect of the new Services Division which has been formed, bringing the number of Divisions within the Trust to three. The appointment of a Divisional Director for the Services Division is yet to be determined.

Mr Colclough added that the introduction of the new Assistant Divisional General Managers has significantly increased capacity within the Divisions.

Mrs Gray was delighted to report that the Trust has recently had a further poster presentation on Nutrition accepted for presentation at the South of England 'Energising for Excellence Conference' to be held on Friday 11 May

2012. The Board welcomed sight of the two posters, which Mrs Gray acknowledged and agreed to provide at the May Board Seminar.

Action:

The posters accepted for presentation at the South of England 'Energising for Excellence Conference' to be made available for the Board at the May Board Seminar.

By:

Director of Nursing

Mrs Gray informed the Board of the celebrations which are taking place, both at the Trust and in the wider community, to celebrate National Nurses Day on Saturday 12 May 2012. Mrs Gray confirmed that the Sponsored Walk from the Hospital to Weston Pier on Saturday 12 May 2012 would commence at 10.45 for 11.00 am, with Weston College providing refreshments at the end.

The Board acknowledged the Quality Mark for Elder-Friendly Hospital Wards, and welcomed a further update on the work at a future Board Meeting.

Action:

A further update of the work centred around the Quality Mark for Elder-Friendly Hospital Wards to be brought to a future Board Meeting.

By:

Director of Nursing/Trust Board Secretary

Mr Buswell asked whether the Trust would again be participating in the South West Expert Reference Group for Dementia, to which Mrs Gray responded that we would.

Resolution:

The Trust Board **NOTED** the Chief Executive's Report

737.12

INTEGRATED PERFORMANCE REPORT

Mr Creswick introduced the Integrated Performance Report, asking that the Executive Director Leads highlight any emerging issues relating to their relevant sections since publication of the report.

Mr Creswick drew attention to the meeting which would be convened between the Executive Director Leads, Mr Paine and Dr Reah, to review the consistency and presentation of information. He acknowledged that the reporting of information within the Integrated Performance Report has come a long way over the last couple of months, and in particular he noted the improved content of the Executive Summary.

He hoped that the meeting would result in a shared understanding of the structure, content and style of reporting required for the Board and the wider readership of the Integrated Performance Report.

Summary Scorecard

Mr Craig provided an overview of the Trust's operational performance:

- Readmissions within 30 and 14 days have continued to fall, with readmissions within 30 days being at its lowest rate in 12 months at 4.3%.
- This has coincided with a reduction in Length of Stay over the past 12 months of 0.8 days, and in month the Trust is in line with a target performance of 2.9 days.
- The Trust has delivered on all eight of the Cancer targets for the month of March, and performance against all eight of the indicators has been consistently good across the entire financial year.
- The Emergency Department has had a challenging month. The Trust did not achieve the Four Hour target in March, with the department seeing an extra 753 attendances compared to the previous month. April had seen an improvement with the current estimate at 97%. Work remains ongoing internally to improve the patient pathways within the Emergency Department.
- At the March Board Meeting it was noted that a plan was being put in place for the delivery of a reduction in waiting times for Urology and Gynaecology. This plan has been successfully implemented and delivered, and as a result the RTT performance has continued to improve.
- The Trust failed to achieve the Stroke target for March, due to the considerable pressure on beds as a result of an increase in admissions from the Emergency Department and the acuity of these admissions. The constraint on the bed base restricted the ability to accommodate all of our stroke patients.

Mr Colclough drew comparison with last year, acknowledging the progress which has been made. This was echoed by Mr Gallegos who commended the Team for their efforts.

Dr Reah noted the removal of the 'Year to Date' column from the Scorecard, asking that this is addressed and the information reinstated. This was acknowledged, with the data to be included within the Integrated Performance Report for the June Board Meeting.

Action:

'Year to Date' column to be reinstated within the Scorecard and included within the Integrated Performance Report for the June Board Meeting.

By:
Chief Operating Officer

Section 2 - Quality and Patient Safety

Mrs Gray introduced the Quality and Patient Safety section of the report.

Dr Reah was encouraged to note that the number of patient falls is reducing, which Mrs Gray acknowledged to be the result of ongoing work within the Trust.

Mr Paine was disappointed to learn that the total number of Patient and Staff incidents over a rolling three year period was showing a negative trend. Mrs Gray confirmed that the last three years has seen an increase, and that the Trust is seeing a higher number of SUIs. Work to review the reporting process is ongoing.

Ms Ferguson felt that the summary of lessons learnt from SUIs closed in 2012 was clearer than had previously been reported, and asked how the learning process is being disseminated and actioned within the Trust. Mrs Gray advised that the Trust continues to improve its feedback into clinical and operational management with the outcomes of serious untoward incidents being monitored by the Divisions, and then formally reported through the Quality and Governance Committee. Mrs Gray added that action plans should also evidence the action taken.

Ms Ferguson noted the disappointing results from the Patient Survey. Mrs Gray advised that a number of the questions which are asked as part of the survey are not being answered by patients. The Trust is now looking to review the survey tools and techniques used. Mrs Gray drew the Board's attention to the 'Positive Patient Feedback' on Page 25 of the report.

Mr Creswick questioned the difference between a slip and a fall, suggesting that damage from either could be virtually the same. Mrs Gray explained that there is some subjectivity around this and it would be based on the judgement of the Nurse reporting the incident.

Dr Reah noted that the first paragraph/fourth sentence on Page 11 should read "However, it is necessary to recognise that any *avoidable* pressure ulcer is unacceptable and a programme of work has been determined to manage a reduction."

Mr Gallegos presented the Summary Hospital Mortality Index (SHMI) and was pleased to report an improvement on the latest figure for the Trust of 1.07 (from 1.10), which lies within the index range expected given the age of our patients and the severity of their illnesses.

Mrs Gray presented the Infection Control Performance for March 2012.

Mr Lloyd was disappointed to learn that some members of staff within the Trust are failing to achieve compliance with hand hygiene and bare below the elbow. Mr Gallegos acknowledged the areas where poor performance is shown, suggesting that the message needs to be reinforced and the culture strengthened. Mr Case noted a particularly poor month in respect of compliance.

The Trust continues to maintain a 100% success rate of patients screened for MRSA. There have been a total of 20 hospital attributed cases of Clostridium Difficile to year end against a national trajectory target of 16. Details of the cases and probable causes will continue to be discussed at Divisional Performance Meetings and recommendations made to help prevent future cases.

Mr Creswick congratulated members of the Infection Prevention and Control Team and thanked Mrs Gray for the clarity the report provided.

Section 3 – Operational Performance

Mr Paine referred to his request at last month's Board Meeting in respect of more detailed reporting around Theatre activity and in particular in relation to cancelled sessions. Mr Craig confirmed that representatives from Opera are in the Trust this week. A plan of training is now in place, and it is hoped that more detailed reporting will soon be available.

Noting the number of Emergency Department attendances, Dr Reah asked what discussions are taking place to address this increase. Mr Gallegos confirmed the trend for April and May as consistently high, suggesting that severity of illness is also higher than previously reported. Mr Craig advised that the activity report for Quarter 4 has been shared with NHS North Somerset in order to discuss trends and facilitate discussions regarding how we can work together.

Mr Colclough drew the Board's attention to the Choose and Book slot availability, which the Trust has achieved for the second consecutive month. Mr Colclough said that this is a great achievement for the Trust, paying credit to all those involved.

Mr Creswick made an observation in respect of the Emergency Access diagram on Page 51, which he felt raises a number of questions. He suggested that the members of the Board may wish to continue discussion as part of another meeting since the figures require detailed consideration.

Action:

A separate discussion to be held to review the detail within the Emergency Access diagram.

By:

Chief Operating Officer

Section 4 – Finance Report

Mr Little presented the Finance Report for Month 12, with the key headlines as presented within the report.

- The Trust's underlying run rate has remained consistent.
- In total the QIPP savings and non recurrent savings have achieved £5,039k in 2011/2012, which represents 5.3% of income for the year.
- The Draft Annual Accounts were submitted to the External Auditors on 23 April 2012, and the audited Annual Accounts will be approved at the Trust Board Meeting on Wednesday 6 June 2012.
- The Trust's Capital Programme and Expenditure Plan is detailed within the report.

Mr Creswick thanked Mr Little and his Team, noting the Board's continued appreciation of the clarity of the Trust's financial reporting.

Section 5 – Human Resources

Mrs Kingscott introduced the Human Resources section of the report, and apologised that the Year to Date figures as detailed within the Key Performance Indicators are for February and not March. Mrs Kingscott confirmed that the correct figures have now been issued and will be duly circulated.

Action:

Correct figures within the Key Performance Indicators section of the report to be circulated to the Board.

By:

Director of Human Resources

Mr Turner noted a disappointing increase in the number of Medical Agency and Nursing Agency during March. Mrs Kingscott advised that further work and analysis is being undertaken, which will be monitored through the Divisional Performance Meetings. It was also acknowledged that additional capacity was opened consistently throughout March. Mrs Gray confirmed that the Trust is continuing to enhance its Nurse Bank and is now entering into a relationship with the Avon and Wiltshire Mental Health Partnership NHS Trust, as reported at last month's Board Meeting.

Resolution:

The Trust Board **NOTED** the Integrated Performance Report

738.12

INFECTION PREVENTION AND CONTROL ANNUAL REPORT

10 March 2025

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Mrs Gray presented the Infection Prevention and Control Annual Report for 2011/2012.

Mr Colclough commended the Team for maintaining its high standards and levels of performance in preventing healthcare associated infections, suggesting that this is a cause for real celebration which should be presented as such to the local media.

Action:

Local media to be approached for an article on Infection Prevention and Control at the Trust.

By:

Head of Communications

Mr Buswell requested the date for the next PEAT Inspection. Mrs Gray was unable to confirm whether a date had been set, however acknowledged Mr Buswell's request and agreed to forward further details to him.

Action:

Date of the next PEAT Inspection to be forwarded to Mr Buswell.

By:

Director of Nursing

Mr Lloyd questioned whether there are any measures which are routinely put in place for Norovirus planning. Mr Case explained that Norovirus is extremely difficult to control and the Trust is constantly looking at ways to address this. Mrs Gray gave reassurance in terms of the daily reports which are circulated across the local community identifying of any schools etc, which are presenting the virus. Mr Colclough felt that the actions which are taken here at the Trust on presentation of the virus are very good.

Mr Case apologised for two errors within Page 7 of the report, one of which confirms that there have been two outbreaks of Clostridium Difficile and not one as reported. The report would be subsequently amended and re-circulated to the Board.

Action:

The Infection Prevention and Control Annual Report for 2011/2012 to be amended and re-circulated to the Board.

By:

Lead Infection Prevention and Control Nurse

Within her role as Associate Director of Nursing, Mrs Perry was confirmed as the Director Lead for Infection Prevention and Control.

The Board were pleased to receive an update on the work programme for Infection Prevention and Control within the Trust, as presented by Mrs Perry and Mr Case.

In concluding, Mr Creswick commended the Infection Prevention and Control Team and the good news detailed within the report.

Resolution:

The Trust Board **RECEIVED AND APPROVED** the Infection Prevention and Control Annual Report for 2011/2012 subject to the corrections identified.

739.12 NURSING AND MIDWIFERY STRATEGY

Mrs Gray presented the Nursing and Midwifery Strategy which seeks to galvanise the nursing workforce and focus on future challenges and developments.

Mrs Gray talked through the next steps, and, with the Board's approval, will publish the strategy in an A5 booklet which will be placed on each ward and routinely monitored by the Nursing and Midwifery Committee.

Dr Reah welcomed the inclusion of dates as providing a clearer understanding of the measures. This was further debated. Mr Lloyd commended Mrs Gray for producing an inspirational document, and noted the energy, focus and drive brought to nursing and midwifery within the Trust which has increased enormously over the last few months.

In concluding, Mrs Gray advised that her aim is now to launch the Strategy, within its current format, on National Nurses Day. The detail would also be shared with the Community Services.

Resolution:

The Trust Board **RECEIVED AND APPROVED** the Nursing and Midwifery Strategy.

740.12 STRENGTHENING SERVICE USER ENGAGEMENT AND PATIENTS' COUNCIL

Mrs Gray presented a paper which seeks to improve engagement with service users through the development of a Patients' Council.

Although this is a new opportunity for the Trust, Mrs Gray advised that she had developed the same system in a previous organisation and was pleased to report that this is still very much ongoing some seven years later.

Mr Paine acknowledged that the proposal for a Patients' Council had been very well received at the recent Patient and Public Involvement Group Meeting which he had attended.

In reviewing the Terms of Reference, Dr Reah questioned whether the proposed election of a Chairman and Vice Chairman from the Council and the attendance of the Chairman or Vice Chairman at Trust Board Meetings poses any constraints on membership of the Council or the roles in question. Mrs Gray advised that from her previous experience meetings had been held during the evening but that it had been possible for the Chair to join Trust Board Meetings. However, acknowledging the comments, Mrs Gray suggested that the Terms of Reference would need to be considered by the Council, with any changes to be brought back to the Trust Board.

Mr Creswick asked whether any existing committees/groups would cease to exist with the creation of the Patients' Council. Mrs Gray confirmed the Patient and Public Involvement Group would be replaced by the new body.

Mr Buswell questioned the requirement for Criminal Records Bureau Checks, which Mrs Gray confirmed is required in view of ward visits and potential involvement with the Infection Prevention and Control Teams. Mrs Gray added that this could be a judgement for the Patients' Council to take, however she said that she would be concerned if anyone declined to allow the formal checks. Mrs Kingscott concurred, noting that currently all Volunteers within the Trust are required to undertake CRB Checks.

Mr Creswick requested clarity in respect of Point 3.7 'The Chairman will have a non-voting seat on the Weston Area Health NHS Trust Board, and will be represented by the Vice Chairman in case of absence'. Mrs Gray confirmed this as a non-voting seat at the 'Public Session' Board Meeting.

As there are a number of internal groups within the Trust on which patient representatives sit, Mrs Kingscott asked whether it would be the responsibility of the Patients' Council to nominate individuals. Mrs Gray advised that this would be dependent upon the forum.

In concluding, Mrs Gray proposed that a seminar would be held on a Saturday during June, to describe to interested parties what the Trust's strategic direction is, what the key challenges are and how we wish them to be engaged. She also welcomed the involvement of LINk and other external parties throughout this process.

Resolution:

The Trust Board **CONSIDERED** the development of a Patients' Council and **APPROVED** the Terms of Reference and the proposal to proceed.

Mr Little presented a report on the key events and work programmes for the current Cerner Millennium systems and processes, together with an update on the planning for post 2015.

Mr Creswick asked at what point the Trust would need to take a decision. Mr Little advised that the future draft Millennium Strategy will be proposed in May 2012 and the procurement process and timescales will be considered. He added that the Trust is currently in discussion with the SPfIT and colleagues in the Southern Cluster regarding procurement options and potential collaborative processes. It is proposed that the Trust will be in a position to make a procurement route decision by the summer of 2012. Mr Colclough acknowledged the importance for the Trust's options to be developed as part of a consortium.

The concerns previously raised in respect of Order Comms and Medicines Management were both noted, along with the importance of factoring these issues within the Strategy. Mr Colclough added that both of these initiatives are also supportive of Integrated Care.

Resolution:

The Trust Board **NOTED** the progress with Millennium and the future Strategy development.

Audit and Assurance Committee

Mr Turner provided an update following the Audit and Assurance Committee Meeting held on Wednesday 11 April 2012, the key points from which include:

- Internal Audit had reported on two recent reports, both of which had been rated 'Green'.
- The Committee had received the Proposed Three Year Strategic Internal Audit Plan.
- The Draft Annual Counter Fraud Workplan for 2012/2013 had been presented, and the audit approach to focus on the key areas of risk as highlighted within the report were outlined.
- As Chairman, Mr Turner had presented the Audit and Assurance Committee Self Assessment Checklist, along with the areas for further work and development. The Assessment was positive, which was supported by both Internal and External Audit.

- Grant Thornton UK LLP have been appointed to audit the accounts of Weston Area Health NHS Trust for five years with effect from October 2012. Mr Turner advised that he would be attending an Introductory Meeting for the South West Contract Area on Friday 11 May 2012.

In concluding, Mr Turner confirmed that the next meeting of the Audit and Assurance Committee would be held on Wednesday 6 June 2012 to approve the Annual Report and Accounts for 2011/2012. Members of the Board are welcome to attend.

Finance Committee Meeting

Mr Paine provided an update following the Finance Committee Meeting held on Tuesday 17 April 2012, the key points from which include:

- The Committee had reviewed the final financial figures, and Mr Cook and Mr Little had been commended for their work.
- The Committee had received an update on the Savings Programme Workstreams.
- Mr Mortell had presented an update on the enhancements with Service Line Reporting.

In concluding, Mr Paine confirmed that the next meeting of the Finance Committee would be held on Tuesday 24 July 2012.

Quality and Governance Committee

Mr Lloyd confirmed that the Quality and Governance Committee would be meeting on Tuesday 22 May 2012, with an update to be provided at the June Board Meeting.

Action:

An Exception Update following the Quality and Governance Committee Meeting held on Tuesday 22 May 2012, to be taken to the June Board Meeting.

By:

Chair of the Quality and Governance Committee/Trust Board Secretary

Remuneration and Terms of Service Committee

The Remuneration and Terms of Service Committee had met on Tuesday 17 April 2012, during which the Committee had received reports on several issues, none requiring Board approval.

Resolution:

The Trust Board **NOTED** the verbal updates provided by the Chairs of the Audit and Assurance Committee, Quality and Governance Committee, Finance Committee and Remuneration and Terms of Service Committee.

743.12 ANY OTHER BUSINESS

Mr Richardson, within his role as a Lay Member of NHS North Somerset, commended the Trust following a recent Single Sex Inspection. Mr Richardson also passed comment in relation to the new signage, which he felt to be a marked improvement.

Further to the earlier discussion on which the Director of Nursing had reported, Mr Richardson noted that that there had been no mention of carers. Mrs Gray noted his comments, which she suggested was down to interpretation.

Mr Creswick informed the Board that he has been reappointed by the Appointments Commission to serve as Chair of Weston Area Health NHS Trust for a further period of four years. Mr Creswick hoped that colleagues would acknowledge the need to maintain continuity and see the Integrated Care Programme to fruition.

744.12 DATE OF NEXT TRUST BOARD MEETING:

Tuesday 12 June 2012 at 11.00 am in the Board Room

The **Trust Board in Public Meeting** closed at 1.00 pm
