

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on
Tuesday 2 September 2014 at 10.00 am in the Executive Board Room,
Weston General Hospital**

Present:

Mr Peter Carr	(PC)	Chairman (V)
Mr Nick Wood	(NW)	Chief Executive (V)
Mrs Sheridan Flavin	(SF)	Director of Human Resources
Mr Rob Little	(RL)	Director of Finance (V)
Miss Bee Martin	(AGM)	Executive Medical Director (V)
Mrs Brigid Musselwhite	(BM)	Non Executive Director (V)
Mr Grahame Paine	(GRP)	Non Executive Director (V)
Mrs Chris Perry	(CP)	Director of Nursing (V)
Mr Ian Turner	(IT)	Non Executive Director (V)
Mrs Gill Hoskins	(GH)	Associate Director of Governance and Patient Experience
Mrs Margaret Blackmore	(MB)	Vice Chair, Patients' Council

(V) Denotes Voting Director

In Attendance:

Mrs Julie Fisher	(JEF)	Executive Personal Assistant (Minute-Taker)
Ms Rebecca Rafiyah Findlay	(RRF)	Head of Communications

940.14 WELCOME AND APOLOGIES FOR ABSENCE

PC extended a welcome to Mrs Margaret Blackmore (MB), Vice Chair of the Patients' Council, Mr Tim Evans (TE), Healthwatch Representative and Mrs Delyth Lloyd-Evans (DLE), Chair of North Somerset Community Partnership.

The following apologies for absence were noted:

Ms Bronwen Bishop	Director of Strategic Development
Mrs Karen Croker	Director of Operations
Dr George Reah	Non Executive Director
Mr Nathan Meager	Chair, Patients' Council
Mr Geoff Pye	Chair, Hospital Medical Advisory Committee

DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest to note.

CONSENT AGENDA

941.14 MINUTES AND MATTERS ARISING FOLLOWING THE MEETING HELD ON TUESDAY 1 JULY 2014

The Minutes of the meeting held on Tuesday 1 July 2014 were agreed as a true and accurate record.

Resolution:

The Minutes of the July 2014 Board in Public Meeting were APPROVED as a true and accurate record of the meeting.

In reviewing the Table of Matters Arising following the meeting held on Tuesday 1 July 2014 the following update was provided.

Minute Reference 927.14 – Attendance by Mrs Rosie Smith, Ceramic Artist

NW provided the Board with an update on actions following Mrs Smith's attendance at the Trust Board Meeting in July 2014 and as included within his letter of 1 September 2014 to Mrs Smith.

QUALITY, PATIENT SAFETY AND PERFORMANCE

942.14 CHIEF EXECUTIVE'S REPORT

NW presented his Chief Executive's Report, and apologised for the late circulation of two additional papers.

NW advised that an interim report following the Visit by the College of Emergency Medicine on Thursday 18 September 2014 would be brought to the October Trust Board Seminar.

Action:

Interim report following the Visit by the College of Emergency Medicine on Thursday 18 September 2014 to be brought to the October Trust Board Seminar.

By Whom:

Chief Executive

NW introduced a report which provides information to the Board about the outcomes from the National Cancer Peer Review for 2014. The concerns raised within the report will be developed into an action plan, fed back to the Divisions and monitored by the Cancer Management Group and Cancer Strategy Steering Group. The Board will also receive an update on action at the Trust Board Meeting in November 2014.

Action:

Update on the Cancer Peer Review Action Plan to be presented at the Trust Board Meeting in November 2014.

By Whom:

Chief Executive

NW presented a further paper which sets out the background of the national drive to reduce the number of patients waiting over 16 weeks, the Trust's achievement to-date and the trajectory for September 2014.

Reference was drawn to Table 1 which illustrates the Trust moving from a position of 131 patients over 16 weeks to 24 by the end of September 2014, and subsequently on target to achieve a predicted performance of 96% in October 2014.

In concluding, NW advised that the Trust has a plan in place to be able to achieve the RTT target sustainably from October 2014 onwards where patients (excluding patient choice and complex pathways) will be treated within 16 weeks and have their first outpatient appointment within eight weeks. GP sought assurance that the Trust will not slip from this position.

Resolution:

The Trust Board **NOTED** the Chief Executive's Report, which included an update on the Cancer Services Peer Review and the Trust's Position and Plan in respect of Referral to Treatment Pathways.

943.14

INTEGRATED PERFORMANCE REPORT

Section 1 – Executive Summary

NW introduced the Executive Summary drawing reference to the Celebration of Success Awards Ceremony held on 10 July 2014. Recognition was passed to SF, RRF and the Team for their support and enthusiasm, and noting the planning now underway for the 2015 event.

NW alluded to the step change in activity volumes during July, which had resulted in the Trust not achieving the four hour standard for July and August 2014. NW and SF provided the Board with an update in respect of staffing within the Emergency Department, noting that although we are currently operating a safe model of staffing within the department, three of the five new Middle Grade Doctors are subject to Visa approval and furthermore Health Education South West have advised that as our posts for overseas Middle Grade Doctors relate to Trust-funded posts, they would not be interested in placing trainees with us when there are training posts vacant elsewhere in the country.

Section 2 - Quality and Patient Safety

CP introduced the Quality and Patient Safety section of the report, paying particular focus to the Patient Story from the Radiology Department and the actions taken, along with an update on actions from the previous Patient Story.

CP drew the Board's attention to the high level Nursing Metrics detailed on Pages 13 and 14 of the report, as previously requested by the Board, with full details to be provided within the Nurse Staffing Review Six Monthly Update Report.

CP was pleased to report a reduction in the number of patient falls from 57 in May to 44 in June and 34 in July 2014. There does, however, remain a focus on both Kewstoke and Hutton Wards who had seen a rise in patient falls during July 2014.

CP reported on the Peer Review, led by Somerset Clinical Commissioning Group, which was undertaken on 28 July 2014. Although the formal report is still awaited, highlighted areas of concern were narrowed down to training, induction and risk assessment, with good practice identified in Board engagement, investment in equipment and the use of wound photography in admission areas. CP added that the Quality and Governance Committee will receive a more detailed report in September 2014, with further inclusion within the Harm Free Care Report which will be presented to the Trust Board in November 2014. DLE provided assurance and support from North Somerset Community Partnership to continue to reduce the incidence of pressure ulcers within the community.

Complaint response times remains an area of challenge, with specific areas of focus as outlined on Pages 25 and 26 of the report. CP added that additional resources have now been placed within the Complaints Team. PC noted his concern in respect of the number of complaints received, to which CP acknowledged a series of system errors which are being worked through. In response to GRP's request for further detail in respect of the complaints received, reference was drawn to the Patient Story which is now included as a monthly feature within the Integrated Performance Report and the Patient Experience Review Group which meets on a quarterly basis. BM acknowledged the requirement for additional work around the ethos and culture and change to the complaints resolution.

CP was disappointed to report on one incidence of MRSA bacteraemia in July 2014. An investigation has since been completed which demonstrated learning related to ongoing screening programmes and general clinical management of the patients.

AGM presented performance against the VTE target which shows that in June 2014 the Trust improved performance and achieved the national target

of 95% with 98.4% of appropriate patients receiving a VTE risk assessment. AGM will continue to work with the new intake of Junior Doctors to ensure that this level of compliance continues.

Section 3 - Operational Performance

NW presented an update on Operational Performance, with particular focus on the significant work put into streamlining and optimising the patient's journey resulting in a further reduction in Length of Stay to 2.2 days. GRP asked whether the work being undertaken by OR International has seen a reduction on the movement of patients. NW advised that currently there is no clear data available to evidence this, however agreed to provide an update at the Trust Board Seminar in October 2014.

Action:

Update on the reduction in Length of Stay and movement of patients to be provided at the Trust Board Seminar in October 2014.

By Whom:

Chief Executive

NW reported that the Trust had achieved seven of the eight National Cancer targets for Quarter 1. Unfortunately the Trust was unable to achieve the two week wait target for referrals with breast symptoms, but is on track to deliver in July 2014 in line with the Recovery Plan.

Section 4 - Workforce

SF introduced the Workforce section of the report, with the key headlines as included within the Executive Summary.

SF noted the increase in Nurse Agency usage during July and August 2014 as a result of an increased level of annual leave being granted. Actions are now in place to avoid further incidents. In month the Nurse Agency expenditure increased significantly to £110k (up from £45k in June 2014), despite the reduction in bed capacity as part of the Savings Programme. Nurse Bank expenditure reduced slightly to £127k (down from £130k).

SF provided the Board with an update in respect of nurse recruitment and the campaign which is now underway to recruit 30 qualified Registered Nurses, targeting the Canary Islands, Spain and Italy. Since the first cohort of Nurses arriving from Spain in September 2013, the Trust has seen nine leavers, with a number moving to North Bristol NHS Trust. Members of the HR Team are continuing to work with colleagues to understand their reasons for leaving and encouraging a continued career at Weston Area Health NHS Trust.

SF drew the Board's attention to the high level of unfilled nursing shifts across the Trust during the August Bank Holiday and the Trust's offer of enhanced rates of pay to Registered Nurses to assist in filling vacant shifts. A number

of shifts were subsequently filled, with SF to provide a further update to the Board in due course.

SF was disappointed to report that the statutory/mandatory training compliance rate for July had decreased slightly to 81.61%. A new and robust approach is being taken by the Trust against staff who continually fail to meet their contractual requirements for training, with two forms of disciplinary action currently underway.

SF reported on the Celebration of Success Awards Ceremony held in July 2014 and the plans now underway for the 2015 event.

Referencing the Staff Friends and Family Test, SF advised that from the results of Quarter 1 (April to June 2014) 65% of staff who responded were either likely or extremely likely to recommend the organisation as a place to receive treatment whilst 62% of staff are either likely or extremely likely to recommend the Trust as a place to work. Results for Quarter 2 will be made available to the Trust at the beginning of October 2014.

In concluding, SF advised the Board of a number of Staff Listening Events planned throughout September 2014 to be led by members of the Executive Team.

Section 5 - Finance Report

RL presented the Finance Report for Month 4 with the Trust reporting a year to-date deficit of £1,478k which is in line with the plan. Overall both income and expenditure is £178k over plan at the end of July 2014.

RL advised that the adjusted expenditure run rate has increased in July by £251k, from £7.690m in June to £7.941m in July 2014. The main increases were against Drugs (£143k), Medical Staffing (£53k) and Nursing (£34k).

RL drew attention to overall activity for the period ended 31 July 2014, as shown on Page 73, and particular concern around 'First Outpatients' and 'Follow Up Outpatients', the volumes of which are both significantly down.

The cash balance of £4,269k, as at 31 July 2014, is £2,908k higher than the planned position of £1,361k.

In concluding, RL referred to the Capital Programme, which as at 31 July 2014 shows £78k of capital expenditure. The full Programme is shown on Page 82 of the report and includes the planned Theatre Refurbishment Programme totalling £550,000.

Resolution:

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

944.14

SIGN UP TO SAFETY – TRUST'S PLEDGES

CP presented a paper which sets out the Trust's pledges in support of the national Sign up to Safety Campaign, as introduced by CP at the Trust Board Seminar in August 2014.

The Trust Board is recommended to approve the commitments for the Sign up to Safety Programme, with an update on progress to be reported to the Board at three Board Meetings per year as part of the Harm Free Care Report, commencing in November 2014.

BM referenced the inclusion of partnership working seeking assurance of Board sign-up by North Somerset Clinical Commissioning Group, North Somerset Council and North Somerset Community Partnership on health system improvements for pressure ulcer prevention, falls reduction and healthcare associated infection prevention, which was acknowledged.

Resolution:

The Trust Board **APPROVED** the Trust's commitment to the Sign up to Safety Campaign.

945.14

THE PATIENTS' COUNCIL

Approved Minutes of the Patients' Council Meetings held on Thursday 17 April and Thursday 5 June 2014 are provided for information.

Additional points to note as presented by MB include:

- The Patients' Council are still awaiting receipt of the DVD as prepared by students at Weston College – this is now expected within the next three weeks.
- Ward Observation Visits continue to be very positive, however it has been noted that not all Doctors introduce themselves. CP acknowledged this comment adding that the Trust is pushing the usage of "Hello, my name is ..." as raised recently at the Junior Doctors Forum.
- Concern has been raised in respect of the discharge of patients during the evening. NW advised that there has been no breach in discharges after 11.00 pm. AGM added that instructions have been sent to all clinical staff in respect of the discharging of patients.

TE wished to note the planned withdrawal of the Number 5 bus service. In acknowledging this as a concern for both visitors and patients, SF agreed to raise at the next meeting of the Green Travel Plan. MB also noted this as a major concern by the Patients' Council. NW proposed that we await feedback following the Green Travel Plan Meeting prior to the Trust taking a more formal approach.

Action:

Withdrawal of the Number 5 bus service to be raised at the next meeting of the Green Travel Plan.

By Whom:

Director of Human Resources

The Board were pleased to learn that the Patients' Council and Patient Advice and Liaison Service are now working alongside each other within the main foyer of the Hospital.

PC, on behalf of the Board, extended his thanks to MB and the Patients' Council.

Resolution:

The Trust Board **RECEIVED** the:

- Approved Minutes of the Patients' Council Meetings held on Thursday 17 April and Thursday 5 June 2014; and
- Update provided in respect of the Council's work.

ANY OTHER BUSINESS

946.14 QUESTIONS FROM MEMBERS OF THE PUBLIC

There were no questions from members of the public.

DATE OF NEXT TRUST BOARD MEETING:

Tuesday 4 November 2014 at 10.00 am in the Executive Board Room.

PC moved a motion to exclude the public from the 'Open' Session and this was approved.

The **Trust Board in Public Meeting** closed at 11.20 am.