

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on
Tuesday 2 October 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 Grahame Paine	Non Executive Director (V)
Dr George Reah	Non Executive Director (V)
Mr Ian Turner	Non Executive Director (V)
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)
Mr Nick Wood	Chief Operating Officer (V)
Dr Patricia Woodhead	Director of Patient Safety
Mrs Andrea Hunt	Associate Director of Governance and Assurance

(V) denotes Voting Director

In Attendance:

Mrs Julie Fisher	Executive Personal Assistant (Minute-Taker)
Mrs Sheridan Flavin	Interim Director of Human Resources
Mrs Caroline Welch	Head of Communications

780.12 WELCOME AND APOLOGIES

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

Mr Roger Lloyd Non Executive Director

Mr Creswick welcomed Mrs Sheridan Flavin as Interim Director of Human Resources. Mrs Flavin replaces Mrs Alison Kingscott, who leaves the Trust this Friday, 5 October 2012. The Board extended their appreciation and best wishes to Mrs Kingscott.

A welcome was also extended to Mrs Margaret Blackmore, Mr Stephen Buswell, Mrs Lorna Cryer, Mr Nick Horne, Mrs Delyth Lloyd-Evans and Mr Alan Richardson.

DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest.

781.12 CONSENT AGENDA

Minutes and Matters Arising from the Meeting held on Tuesday 4 September 2012

Resolution:

The Minutes of the September 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 4 September 2012 had been reviewed with the progress and completion data duly updated.

782.12 BOARD MEMBERS' ATTENDANCE AT TRUST BOARD AND COMMITTEE MEETINGS – APRIL TO SEPTEMBER 2012

Mr Creswick introduced the report which shows the attendance record of Board Members at Trust Board and Committee Meetings for the period April to September 2012. Mr Creswick added that this is the first time this detail has been presented to the Board, and is deemed as good corporate governance practice.

Mr Paine confirmed that he is not a member of the Quality and Governance Committee Meeting. It was also noted that Ms Tanya Beale is not a member of either the Quality and Governance Committee and Audit and Assurance Committee Meeting, and therefore these summaries should be amended accordingly.

Action:

Board Members Attendance Summaries to be amended removing Mr Paine and Ms Beale as members of the Quality and Governance and Audit and Assurance Committee Meetings.

By Whom:

Associate Director of Governance and Assurance

Resolution:

The Trust Board **NOTED** Board Members' Attendance at Trust Board and Committee Meetings for the period April to September 2012.

Mr Colclough presented his Chief Executive's Report providing a further update in respect of the Interim Appointments of Local Area Team Directors in the South West. Reference was particularly drawn to the Bristol, North Somerset and South Gloucestershire area, and the interviews for the substantive post which are to take place on Wednesday 3 October 2012.

The Board was pleased to note the Trust's recent success in achieving compliance against the NHS Library Quality Assurance Framework, congratulating all those involved.

Resolution:

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

Section 1 – Executive Summary

Mr Wood introduced the Integrated Performance Report for September 2012, focusing on the improvements in patient flow which have ensured that the Trust has been able to continue to achieve the 4 hour Emergency Department target for the sixth consecutive month (as September's target has now been delivered). This does however come at cost, and is likely to impact on the Trust's financial target as we move into the second part of the year.

Mr Wood drew the Board's attention to the Monitor Scorecard, which shows a favourable position, and in particular noted the positive trends relating to the Performance Indicators on Cancers and RTT.

Section 2 - Quality and Patient Safety

Mrs Gray introduced the Quality and Patient Safety section of the report, the key headlines for which are included within the Executive Summary.

Mrs Gray reported that the severity of pressure ulcers has remained low with one Grade 3 ulcer reported. Although the intensified actions are not receiving the overall reduction in numbers of pressure ulcers, the severity of pressure ulcers has reduced significantly.

There were five Serious Incidents reported in August 2012, as detailed within the report. There has been a slight reduction in the number of inpatient falls during August 2012, with 33 inpatients sustaining a total of 40 falls. Overall this figure does continue to remain high. Mrs Gray advised that the "Footwear Trial" as previously reported, has now commenced on Cheddar Ward and will

be reported back to the Board in November 2012. However, early results have demonstrated a reduction in falls.

The Trust received a total of 18 complaints during August 2012 which, although marginally higher than the same period last year, is significantly lower than the number of complaints received the previous month. Mrs Gray added that one new case was referred to the Ombudsman who has also confirmed that the five cases previously reported will not be investigated.

Exit Card survey results are now being summarised Trust-wide as one of the Trust's CQUIN commitments, with feedback from 135 patients having been received in August, showing reasonably good responses. In particular Mrs Gray drew the Board's attention to the percentage of patients who would recommend the Hospital to family and friends as under 70% on Harptree East and Berrow Ward, leading to an overall reduction from 90% to 87%. Mrs Gray advised that the Matrons for these two areas are actively working with the Ward Sisters to ensure an improved patient experience. An initial assessment of the Trust's readiness to introduce the national "Friends and Family Test" methodology has been undertaken and further work in this area is progressing in consultation with the Patient's Council.

Dr Woodhead was disappointed to see that the August data pertaining to Venous Thromboembolism (VTE) Risk Assessment Compliance had not been included within the report. Dr Woodhead added that the risk assessment for VTE is consistently exceeding the 90% target, and to sustain the continued improvement all junior medical staff have received a presentation on the need to undertake assessment for every patient. This is also being supported by a review of hospital acquired VTE by a Team of Junior Doctors to ensure rapid learning from any missed cases.

Mr Gallegos confirmed that the Trust's mortality rates remain reassuringly below that expected.

The Board were pleased to note that actions taken within the Maternity Services to improve breast feeding initiation rates have led to the achievement of the 78% target in August 2012.

Mr Paine referred back to the Patient Survey results and was disappointed to note that only 70% of patients had felt their discharge home had been planned well. Mrs Gray confirmed that this is due to delays generally, and is part of the work currently being undertaken by Newton Europe. Mr Wood added that the TTO ("To Take Away") process is currently being reviewed, which will take into account transport home from hospital. In terms of an integrated approach, Mrs Lloyd-Evans offered continued support from the North Somerset Community Partnership.

Section 3 - Operational Performance

In presenting the Operational Performance for the Trust, Mr Wood drew the Board's attention to the fall in emergency attendances in August in line with expected seasonal changes in demand. However, despite this reduction the Trust is continuing to experience a level of attendances that is 8% above contracted levels, and the acuity of patients remains high with 21% of patients converting from attendance to admission. Mr Wood added that performance for the number of ambulances offloaded under 45 minutes has continued to improve in August 2012 with 99.1% compared to 98.4% the previous month.

Mr Wood provided an update on the Theatre utilisation work which the Trust is currently working on with Newton Europe, and as detailed within Appendix A of the report. Mr Wood added that the Project Team will be undertaking robust testing of the Theatre Performance Tool over the next two to three weeks to ensure that all the calculations and data feeds are correct. This data will then be included within the Performance Scorecard next month. In terms of "late starts", Mr Wood confirmed that these have now fallen below 5% subsequently resulting in prompt "finish times".

Mr Gallegos requested that data pertaining to named individuals is anonymised within any future reporting. He also added that the Theatre Performance Tool would be used as part of the Performance Review process in the fullness of time.

Mr Paine drew reference to the "95th percentile of times from arrival at ED to admission, transfer or discharge", and the measurement of time. Mr Wood gave reassurance that the year to-date of 03:59 is accurate.

In response to a question raised by Dr Reah, Mr Wood confirmed that bed occupancy is a proportion of funded beds.

Finance Report

Mr Little presented the Finance Report for Month 5, with the key headlines as shown within the report.

- The financial position at Month 5 is that the Trust is reporting a year to-date surplus of £513k, which is in line with the plan;
- Overall, income is £435k above plan at the end of August 2012;
- Overall, expenditure is £436k over plan at the end of Month 5.

Mr Little added that the fluctuating activity pressures in attendances within the Emergency Department has led to higher admissions than the Commissioners have planned for.

The Board noted that the Trust's Service Improvement Programme (SIP) delivered £148k in August against a target of £375k. In addition, Mr Little confirmed that £816k has been delivered year to-date, with the run rate down to £148k in August 2012. In total, the SIP savings and non-recurrent savings have achieved £410k in August, a £35k overachievement for the month.

Mr Little was pleased to report that the Trust has recently made the penultimate payment against the loan repayment, adding that he remains confident in achievement of the final instalment of the loan repayment by the end of the financial year.

The discussion in relation to the Savings Plans prompted Mr Creswick to suggest that this forms a focus at the forthcoming meeting of the Finance Committee, which was acknowledged by Mr Paine as Chair of the Committee. Mr Little added that the fortnightly meetings held with the Divisions will also feed into these discussions.

Mr Turner drew reference to the sentence on Page 32 "the pay and non pay overspends have been offset by the use of an additional £149k of reserves in month, the total for the year is now £790k", again suggesting that this is discussed in more detail at the October meeting of the Finance Committee.

Mr Paine referred back to the £262k which is reported as non-recurrent savings, and questioned why this has not been spent. Mr Little explained that this is a safeguard that the Trust can deliver the plan.

Human Resources

Mrs Kingscott introduced the Human Resources section of the report, with the key headlines as shown.

Focusing on Workforce, Mrs Kingscott advised that the decrease in temporary staffing costs in August was mainly attributed to the decrease in medical locum expenditure, with an overall reduction of £40k. Extra capacity (unfunded beds) have continued to play a significant factor to the overall bank and agency usage, even though the amount of additional capacity used in month has decreased.

The position reported for Statutory/Mandatory Training has seen an increase from 70.93% in July to 72.86%, which continues to remain unsatisfactory. Mrs Kingscott advised that assurance is now being sought from each of the Divisions in terms of achieving 90% compliance by the end of November 2012.

Mrs Kingscott drew the Board's attention to the Staff Survey Action Plan which is shown as Appendix G. The Board acknowledged the update on the key findings of the 2011 Staff Survey, and in particular Ms Ferguson asked that the Trust continues to focus on the areas of concern as highlighted within the report.

Resolution:

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

Reducing Unfunded Bed Capacity

Mr Wood presented a report which highlights how the Trust will aim to operate within its funded bed base through the coming months in order to ensure quality care and efficient utilisation of services, adding that as at today there are no unfunded additional beds open within the Trust.

With the increasing activity levels and changes in the acuity and demographics of patients, Mr Wood talked through the potential structural changes to patient flow which are being developed to provide a higher quality and effective service:

- Development of Discharge Lounge
- Purchase of Nursing Home Beds
- Introduction of a Surgical Admissions Unit (SAU) and a Medical Assessment Unit (MAU)
- Ambulatory Care Centre (ACC)
- Emergency Department Social Care Planner

The introduction of a daily senior division review of wards from 2.00 pm, along with the development of a new operational report which allows for the better management of patient flow, were acknowledged by the Board, along with the review of a new Escalation Policy.

Mr Turner questioned whether St Monica Trust had been considered in regard to the purchase of Nursing Home Beds. This was acknowledged by Mr Wood who agreed to review further.

Action:

To consider St Monica Trust as part of the work around the purchase of Nursing Home Beds.

By Whom:

Chief Operating Officer

Following a comment raised by Mr Paine, Mr Wood confirmed that the Day Case Unit has been removed from our escalation facilities.

Resolution:

The Trust Board **NOTED** the report on Reducing Unfunded Bed Capacity.

785.12 RESEARCH AND DEVELOPMENT ANNUAL REPORT 2011/2012

Mr Gallegos presented the Research and Development Annual Report for 2011/2012, advising that as a Trust we should be proud of the work achieved by our Research and Development Department.

Mr Creswick recognised the key achievements during 2011/2012, and extended the Board's congratulations to the Research and Development Department.

The Board were asked to note the Research and Development Presentation Day which is to be held on Friday 1 March 2013 in the North Somerset Academy.

Resolution:

The Trust Board **NOTED** the activities undertaken by the Research and Development Department during the period 2011/2012, along with the challenges for the future.

786.12 ANY OTHER BUSINESS**Hospital Discharge**

Mrs Cryer, as a member of the public, addressed the Board in relation to recent experience following her husband's discharge. The points raised by Mrs Cryer were acknowledged.

Mrs Cryer also asked whether the Theatre Reporting Tool, as referred to earlier in the meeting, took into consideration the time taken for Surgeons to change into theatre scrubs. Mr Gallegos responded, advising that this time is kept separate to the detail recorded.

Doctor Revalidation

Mr Gallegos was pleased to advise the Board that systems are now in place to deliver the first wave of Revalidation for Doctors, which will be effective from 1 April 2013. Mr Creswick expressed the Board's gratitude to Mr Gallegos.

787.12

DATE OF NEXT TRUST BOARD MEETING:

Tuesday 6 November 2012 at 11.00 am in the Board Room

The **Trust Board in Public Meeting** closed at 12.30 pm
