

Agenda Item 3

Meeting of the 'Open' Session of the Trust Board

Held on Tuesday 5 July 2011 at 10.00 am
in the Board Room

Minutes

Present:	Non-Executive Directors	Executive Directors (including Board members) (‘v’ denotes Voting Executive)
	Mr Chris Creswick (Chair) Ms Jude Ferguson Mr Grahame Paine Dr George Reah	Mrs Lorene Read (v) Mrs Alison Kingscott Ms Bronwen Bishop (v) Mr Nick Gallegos (v) Mr Rob Little (v) Mr Ian Bramley (v) Mr Eric Gatling
Apologies:	Mrs Chris Bryant, Mr Ian Turner, Ms Claire Leandro	
In Attendance:	Mr Mike Lyall (Community Services Committee/NHS North Somerset), Mrs Margaret Blackmore (Crossroads), Mr Stephen Buswell (LINK), Mrs Sally Moores, Mrs Caroline Welch, Mrs Sue Palmer	

The meeting commenced at 10.00am.

Actions

608.11

Declarations of Interest

There were no declarations of interest.

Mr Creswick congratulated Mrs Lorene Read on her recent appointment as Chief Executive of Kettering General Hospital NHS Foundation Trust, with effect from 1 September 2011.

609.11

Minutes and Matters Arising from the Meeting held on Tuesday 7 June 2011

The minutes were agreed as a correct record.

Mr Creswick thanked Mrs Sally Moores for her contribution to the Trust Board Meetings, as she was leaving the Trust shortly.

Matters Arising	<u>Actions</u>
Minute 602.11 - Performance Report	EG
Mr Gatling advised that the Annual Performance Dashboard should be posted on the Trust website within days, and confirmed that he would notify Board colleagues when it was live.	
Minute 598.11 – Patient Safety First Report	AK/CW
Mrs Blackmore and Mr Lyall advised that they did not receive a copy of the 'Volunteer Voices'. Mrs Kingscott explained that currently the publication was only provided in hard copy format to volunteers, however she agreed to liaise with Mrs Welch regarding electronic circulation to Board colleagues and other interested individuals.	
Minute 603.11 – Annual Report and Accounts 2010/2011	
Mr Little informed the Board that the Trust had now received a letter from the Auditors confirming the financial statements within the year-end accounts.	
610.11 Schedule of Tracked Matters Arising	
Mr Paine queried the submission of an updated Patient Safety Review Action Plan to the Board, which he believed to have been due some months ago. Mrs Kingscott reminded colleagues that the closing date for the Patient Safety Staff Survey had been extended and therefore a report would be brought to Board in September. It was agreed that the matter should be added back into the Schedule of Tracked Matters Arising.	SP
Mr Bramley confirmed that the July Board papers contained a paper on Lay Membership and it was agreed that this matter could be removed from the Schedule of Tracked Matters Arising.	SP
611.11 Topical Issues	
Mr Creswick thanked all those who were involved with the digital scanner launch last week, and in particular Mr Gallegos, Mr Bramley, Mrs Bryant, Ms Bishop, Mrs Read and Mrs Kingscott. Special thanks were paid to Mrs Welch who had organised and run the event on the evening.	

Actions

The Board noted that it had been a very enjoyable and worthwhile evening attended by both voluntary groups and individuals, with the new facilities being well received locally.

The Board noted that Ms Ferguson had recently deputised for Mr Creswick at a Strategic Health Authority event on tobacco control. Ms Ferguson commented that the event had been very positive and that the definition of health was now being defined in positive and comprehensive terms of wellbeing, not simply the absence of illness and infirmity. Ms Ferguson agreed to pass a copy of the presentations on to Board colleagues, and it was suggested that the topic be discussed further at a Board Seminar.

JF

Mrs Read updated the Board during which the following points were noted:

- The 'Listening Exercise' around GP commissioning being run by the Government had now been completed and has recommended enhancement of clinical involvement. The detail has yet to be determined. The implications will be discussed at a future Board Seminar in the context of ongoing NHS changes.
- Other key issues remain centred on the delivery of performance and value for money.
- The implications for the Trust in relation to timescales for changes, and especially for provider development, were still currently speculative and there was no solid basis for public debate at the moment in relation to the Trust.
- There is great media interest in the Tripartite Agreement agreed with the South West Strategic Health Authority and NHS North Somerset, however the Trust has not yet heard back from the Department of Health. Mrs Read confirmed that the final document would go into the public domain.
- Unfortunately there would be no 'Patient Story' this month as the patient was unable to attend the meeting.
- This week was national 'Dementia Week' and the Trust was holding a series of presentations and demonstrations throughout the Hospital.

Actions

- This week is also national 'Transplant Week' and there are adverts and promotions around the Hospital in relation to the issue. Mrs Kingscott confirmed that Dr Hosdурго, Consultant Anaesthetist, was the Trust's Clinical Champion on this topic.

During further discussion on dementia, Mr Bramley confirmed that additional work had been carried out on the Trust's Restraint Policy to refresh and strengthen it and that training had been sourced for both staff and security.

Mr Paine advised that he would be attending the NHS Trust Confederation Conference, and it was suggested that matters of interest arising there from could be covered at a future Board Seminar.

The Board noted the verbal updates from the Chairman and Chief Executive.

612.11 Clinical Quality Report

Mr Bramley presented the Clinical Quality Report during which the following points were noted:

- There had been two meetings of the Patient and Public Involvement Group which had been well attended, with the Lay Members setting the agenda.
- Standing agenda items for discussion at future meetings included:
 - Managing vulnerability
 - Dignity
 - Care issues
 - Communication
 - Patient and public involvement
- Lay Members had been recruited by both direct approach and via advertisement in the local paper.
- The last paragraph on page 2 should read 'The SSkin Bundle is still **to be** fully embedded'.
- The rise in detection of grade 1 pressure ulcers correlated with a significant decrease in grade 2 ulcers, confirming that many more incidents of pressure damage were being picked up and preventative care plans were being implemented before development of grade 2 damage, characterised by a break in the skin.

Actions

- The figures in the report related to hospital acquired pressure ulcers only, as community acquired ulcers were being picked up on admission.
- Pressure ulcers were a CQUIN measure.
- Further queries in relation to pressure ulcers should be made direct to Mr Bramley.
- A further care plan audit this month had achieved 90% and confirmed the sustained hard work by all staff. An audit of nursing documentation had achieved 87%.

The Board noted the Clinical Quality Report.

613.11

Patient Safety First Report

Mr Bramley presented the Patient Safety Report, during which the following points were noted:

- The purpose of the paper was to give focus to the work and to ensure that patient safety was embedded in practice.
- Mr Bramley and Mrs Read had attended the South West Quality and Patient Safety Programme Leadership Forum last week where there was concern expressed over how the programme would be taken forward and sustained nationally.
- Ian Cumming OBE, Chief Executive of NHS West Midlands, has been asked to identify a model for the whole of the UK.
- The Patient Safety Steering Group will oversee the work within the action plan and will provide accountability within the governance structure up to Board.
- Patient Safety Walkarounds (carried out by both Executive and Non-Executive Directors) are now diarised up to September, with the Strategic Health Authority confirming that the Trust is doing better than most of its peers in this regard.
- At the request of Dr Reah, Mr Bramley agreed to provide Non Executive Directors with information on the focus of the walkarounds and the target areas which have been identified.

IB

Actions

- The Board noted that Executive Directors also carried out walkarounds as part of their normal day to day business.

Mr Creswick commented on the good progress that has been made over the past year in relation to the Patient Safety Programme.

The Board noted the Patient Safety Report.

614.11 Stakeholder Engagement Communication Strategy/GP Audit

Mrs Welch presented the Stakeholder Engagement Project Progress Report, during which the following points were noted:

- The Trust had carried out its first 'Communications Audit', undertaken by members of the Communications Network.
- More than 20% of total staff were surveyed.
- The results provided clear information on staff preferences on how they wished to receive information, showing clearly the value to staff of face-to-face communications.
- Staff had not been categorised by group.
- Mrs Welch agreed to provide the following details in the next Progress Report:
 - The total scope of the Engagement Project
 - A list of the stakeholders involved in the project
 - A copy of the project plan
- The new Trust website would be the next big piece of work to be undertaken, with a proposed 'go-live' date of the end of December 2011.

CW

The Board noted that the new Mayor of Weston-super-Mare had visited the Trust twice in the last two weeks and was becoming familiar with the work being undertaken.

The Board noted the Stakeholder Engagement Project Progress Report.

Mrs Kingscott presented the Staff Survey Action Plan, during which the following points were noted:

- The Trust continued to meet with the Staff Experience Group on a regular basis.
- The Staff Survey gave results which could be months old when analysed, however the Staff Experience Group provided 'real time' information on many ongoing issues. Actions could be taken speedily to address the negative experiences and build upon the positive ones.
- It was acknowledged that workforce change was seen as negative by many members of staff.
- The Trust will continue to monitor the situation. The staff survey and Trust values may be addressed at a future Board Seminar.

The Board noted the Staff Survey Action Plan.

Mr Gatling presented the Performance Report, during which the following points were noted:

- There has been a general continuance of good performance over recent months, with notable areas of excellence including infection control and falls.
- The key area for focus remains A&E where the Trust has now been below standard performance for some months.
- A programme of work is being undertaken to address the situation.
- It was proposed that the Exception Report be updated to include an actual target date for the August Board.
- Mrs Read advised that the cancer figures for May were much better than April.
- The waiting list in endoscopy, in terms of diagnostic performance, has improved dramatically with the backlog cleared.

EG

Actions

- NHS Elect recently visited the Trust, by invitation, and suggested that endoscopy were operating at 'gold standard level', however written confirmation of their analysis is awaited.
- Capacity across the South West to pick up the additional colorectal work due to the DoH advertising campaign is almost non-existent.
- Mr Gatling agreed to find out whether lines 52 and 53 (Discharge Letters) could be monitored on a monthly basis.
- Mrs Read advised that a 'Length of Stay' initiative was to be launched throughout the Trust tomorrow with the fundamental purpose of improving the A&E figures, and the subsequent impact upon the QIPP programme. The Trust has appointed a social worker to assist with the initiative.
- A continued period of sickness absence in relation to a Consultant was affecting the care of the frail and elderly, and subsequently their length of stay.
- The Board noted that medicines management and discharge were to be discussed at the next Board Seminar.
- Dr Reah thanked Mr Gallegos and his team for their superb work in relation to fractured neck of femur, which had culminated in nearly 6 months of hitting the 100% target.

EG

The Board recognised the many positive results within the Performance Report considering the pressures on beds within the hospital during recent months, not least in relation to Norovirus and its impact.

A&E Clinical Quality Indicators

Mr Gatling presented the paper on A&E Quality Indicators, during which the following points were noted:

- The paper had been written to ensure that the Board were fully aware of the new clinical quality indicators, which were part of the operating framework for the year.

Actions

- The measures will be in shadow form for the first quarter, going live from 1 July 2011. From this date these indicators will become nationally performance managed targets and the Trust will be required to publish data monthly. The final format and timescale for publication is still awaited but it may be that the data is published ahead of Board Meetings, in which case a copy will be sent to Board Members at the same time.
- Mr Gatling confirmed that each Trust would be able to comment on their own data with explanations.
- The data contained within the report is real data, however some figures look unreasonable as it does not contain a full months data. Concern was expressed that the incomplete data was in the public domain without an explanation.
- The National Emergency Care Intensive Support Team have been working with the Trust, by request, in relation to the A&E Department.
- The team spent a day within the organisation on 23 June and feedback is due later this week, after which a community action plan will be developed with the PCT. The Support Team will then work with the Trust to implement the plan and assist in improving performance within A&E.
- The Support Team will also assist the Trust to fully comprehend the new clinical quality indicators.
- It was agreed that Mrs Welch would produce a 'Laymans Guide' to the new indicators which would be published with the figures to prevent any distortion of the results and to prevent damage to the Trust's reputation and staff morale. Mrs Welch confirmed that further guidance was expected from the Department of Health shortly.

CW

Pathology Review

Mr Gatling presented an update paper on the Bristol Pathology Service Review, which had been produced by Dr Andrew Day, during which the following points were noted:

- The paper provided an update on the service review and importantly, showed the summary of phases of activity on page 8.

Actions

- Further work is required to fully comprehend what will be provided and what will change.
- There is a proposal for a lead provider which is currently out for discussion, however it is clear that the Trust has no facilities or resources to support this function.
- The Board noted that the Trust required a 24/7 service, but that how this was to be delivered was yet to be worked through.

The Board Noted the Performance Report, Summary of the A&E Clinical Quality Indicators and Pathology Service Review Update.

617.11

Finance Report

Mr Little presented the Finance Report for Month 2, during which the following points were noted:

- The overall position is that the Trust is reporting a year to date surplus of £240k, achieved due to non-recurrent pay and non-pay underspends.
- Concern remains around the QIPP programme and recurrent savings, however the Trust has delivered improved figures this month.
- Bed capacity pressures, including the impact of infection outbreaks, were continuing to result in unfunded beds being open.
- The Board noted a 23% increase in A&E attendance figures above contract predictions, recognising that the Primary Care Trust had envisaged reduced activity to reflect changes in community provisions, but this has not happened.

Detailed discussion took place in relation to recurrent budget savings being recognised as QIPP savings, which Mr Little will consider, together with the outcome of the Finance Committee's discussions in July.

The Board noted the contents of the Finance Report.

Ms Bishop presented the CQC Compliance Update Report in relation to the outcome of the self assessment for Children's Services, during which the following points were noted:

- Evidence currently available demonstrates registration compliance against each of the 16 essential standards for Children's Services provided at Drove Road, Weston and The Barn, Clevedon.
- Two areas for improvement are identified as a minor concern however the overall outcome standards are assessed as compliant.
- An action plan has been developed and is being monitored by the Clinical Governance and Quality and Governance Committees.

Mr Creswick asked that thanks were passed to Children's Services for the excellent work undertaken in relation to governance issues.

It was agreed that Non-Executive Directors and other Board Members who were available would visit Drove Road and The Barn. This would be arranged through a Divisional Director and Mr Gallegos agreed to make initial contact with the relevant Divisional Director to discuss.

NG

The Board noted the outcome of the self-assessment for Children's Services and progress against work plan to date.

12.55 pm - Mr Lyall left the meeting.

The Board noted that no Committee had yet met in recent weeks so there were no matters to bring to this meeting for urgent discussion. (Minutes of Committee Meetings would continue to be tabled once confirmed).

There have been no sealed documents since the previous report to the Board on 7 June 2011.

The Board received and noted the report on the Register of Sealed Documents.

Mr Creswick moved a motion to exclude the public from the 'Closed' session and this was approved.

The Meeting concluded at 12.55 pm.

DATE OF NEXT MEETING

Tuesday 2 August 2011 at 10.00 am in the Board Room

DRAFT