

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on
Tuesday 5 November 2013 at 10.00 am in the Board Room, Weston General Hospital**

Present:

Mr Peter Carr	(PC)	Chairman (V)
Mr Nick Wood	(NW)	Chief Executive (V)
Ms Bronwen Bishop	(BB)	Director of Strategic Development (V)
Mrs Sheridan Flavin	(SF)	Director of Human Resources
Mr Nick Gallegos	(NG)	Medical Director (V)
Mrs Gill Hoskins	(GH)	Associate Director of Governance and Patient Experience
Mr Rob Little	(RL)	Director of Finance (V)
Mr Roger Lloyd	(RLL)	Non Executive Director (V)
Mrs Brigid Musselwhite	(BM)	Non Executive Director (V)
Mr Grahame Paine	(GP)	Non Executive Director (V)
Mrs Chris Perry	(CP)	Director of Nursing (V)
Dr George Reah	(GRR)	Non Executive Director (V)
Mr Ian Turner	(IT)	Non Executive Director (V)
Dr Patricia Woodhead	(PW)	Director for Patient Safety

(V) Denotes Voting Director

In Attendance:

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

887.13 WELCOME AND APOLOGIES FOR ABSENCE

PC extended a welcome to Mr Tim Evans (TE) as the new Healthwatch Representative for the Trust.

PC noted the following apologies for absence:

Mrs Karen Croker	Director of Operations
Mr Nathan Meager	Chair, Patients' Council
Mr Colin Bevan	Interim Chair, Hospital Medical Advisory Committee
Mr Alan Richardson	Patient Representative

DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest.

CONSENT AGENDA

888.13 MINUTES AND MATTERS ARISING FOLLOWING THE MEETING HELD ON TUESDAY 3 SEPTEMBER 2013

The Minutes of the meeting held on Tuesday 3 September 2013 were agreed as a true and accurate record subject to the following amendments.

Page 1 / Present

A '(V)' denoting Voting Director to be included against Mr Nick Gallegos as Medical Director.

Page 1 / Minute Reference 876.13 – Welcome and Apologies for Absence

A '(V)' denoting Voting Director to be included against Ms Bronwen Bishop as Director of Strategic Development.

Resolution:

The Minutes of the September 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 3 September 2013, the following update was provided:

Minute Reference 817.13 – Estates Strategy (Update)

A discussion on 'Estates/Commercial Development' is scheduled at the Trust Board Seminar to be held on Tuesday 3 December 2013, following which the Board will take a decision in terms of the need for any further meeting/dialogue with the Uphill Village Society. It was noted that there has been no further communication from any members of the Uphill Village Society since the beginning of 2013.

Minute Reference 866.13 – Nurse Staffing Review and Progress on Implementation of Staff Changes

A Six Monthly Update of the Nurse Staffing Review is included under Agenda Item 893.13 at the 'Open Session' Trust Board Meeting today, Tuesday 5 November 2013, with a more detailed review of Nurse Staffing to be presented to the Trust Board in January 2014.

Minute Reference 878.13 – National Leadership Academy Programmes

An update in relation to the National Leadership Academy Programmes is provided within the Table of Matters Arising. GRR requested a list of the names of those members of staff who have been successful in achieving places, which SF agreed to provide separately and outside of the meeting.

Minute Reference 879.13 – Integrated Performance Report

(Section 2 – Quality and Patient Safety)

An Update Report on the Mortality Review is included under Agenda Item CB478.13 within the 'Closed Session' Trust Board Meeting today, Tuesday 5 November 2013.

(Section 3 – Operational Performance)

Commentary on 'Choose and Book' now included within the Integrated Performance Report.

(Section 4 – Human Resources)

Detail in relation to Exit Interviews is included within the Staff Engagement Report which is being presented to the Board under Agenda Item 894.13 at the 'Open Session' Trust Board Meeting today, Tuesday 5 November 2013.

Minute Reference 881.13 – Theatre Transformation Programme

An update on the Theatre Transformation Programme was provided at the Finance Committee Meeting held on Tuesday 22 October 2013.

Minute Reference 886.13 – Trust's Website

The Trust is now working with an external IT contractor to upload content on to the Intranet, with the IM&T Team providing additional support to keep the system running at a required level of service. Work is also being undertaken to ensure that all clinical data is up-to-date.

889.13

BOARD MEMBERS' ATTENDANCE AT TRUST BOARD AND COMMITTEE MEETINGS – APRIL TO SEPTEMBER 2013

Resolution:

The Trust Board **NOTED** Board Members' Attendance at Trust Board and Committee Meetings for the period April to September 2013, and acknowledged further work and review prior to submission of future attendance records.

QUALITY, PATIENT SAFETY AND PERFORMANCE

890.13

CHIEF EXECUTIVE'S REPORT

In presenting his Chief Executive's Report NW provided further detail in relation to the allocation of Winter Monies noting that considerable surges in activity over the last two weekends has put the Trust at significant risk. NW expressed his confidence of a much more robust Winter Plan in place this year to address these issues. Further details in relation to all of the proposed schemes would be provided at the Trust Board Seminar in December 2013.

BB provided a further update in relation to the West of England Academic Health Science Network.

NW advised that the Care Quality Commission 'Intelligent Monitoring Report' had been tabled at the Executive Management Group Meeting held on Thursday 31 October 2013. It had been noted that the risk assessment was largely based on historical data and progress made since by the Trust should improve future risk ratings.

GH drew reference to the recent report published by Ann Clwyd MP into the review of NHS Hospitals' Complaints Systems 'Putting Patients Back in the Picture', which should be combined within our own review of reporting and presented through the Quality and Governance Committee.

Resolution:

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

891.13

INTEGRATED PERFORMANCE REPORT

Section 1 – Executive Summary

NW introduced the Executive Summary, drawing the Board's attention to the key headlines:

- Within the first six months of the year the Trust has strived to improve the quality, performance and value for money of the services provided to the local population with the investment of £1.7 million in additional Nurses across the Trust's inpatient wards. Along with the introduction of 'Ward Wednesday' the Trust has delivered a reduction in Pressure Ulcers from 33 to 11 and Falls from 5.1 to 3.1 per 1,000 bed days.
- The level of complaints compared to the previous year has reduced by 52 and compliments have increased by 148 within this financial year demonstrating increased satisfaction with the care provided.
- The learning taken from the visits by the Care Quality Commission in April and June 2013 has continued with the Trust undertaking an internal Keogh Review to inform areas requiring further improvement, along with the introduction of a Quality Hub to support the Clinical Teams, as presented at last month's Trust Board Seminar.
- The Trust has continued achievement against the Referral to Treatment (RTT) and Cancer targets in the first six months despite the odd deviation in performance as a result of the small numbers of patients treated or short-term capacity constraints.
- Performance against the four hour Emergency Department standard has significantly improved with the Trust achieving Quarter 2 with 95.20%. The Trust is aiming to continue to achieve the target during the winter months despite the expected increase in activity.

- October 2013 saw the relaunch of the Staff Engagement Strategy including Team Brief.
- The Trust continues to remain on target to deliver the financial plan with actions in place to mitigate the risk of not fully delivering the efficiency programme and the over performance against contract.

Section 2 - Quality and Patient Safety

CP introduced the Quality and Patient Safety section of the report, with the key headlines as included within the Executive Summary. In addition the following points were noted:

- The overall number of reported cases of Clostridium Difficile is four against a trajectory of six.
- The Situation Report (SitRep) as introduced by the Governance Team in October 2013 is expected to report daily with effect from January 2014.
- The Trust continues to focus on Grade 3 and Grade 4 Pressure Ulcers as detailed within the Action Plan.
- A total of 66 medication incidents were reported in August and September 2013.

Reference was drawn to the Table 7 on Page 35 which compares the Trust's Family and Friends Test response rate and net promoter score with the average scores for NHS acute services across England. The data highlights that overall our response rate is comparable to the national average, however CP advised that continuous improvement in service delivery and patient experience are necessary to improve our net promoter performance.

The Board noted the increase in reported staff incidents in September 2013 reflecting a continuous increase in incidents involving violence against staff. CP and GH provided an update in relation to the ongoing focus on violence/aggression against staff including additional de-escalation techniques and immediate support to staff involved in such incidents.

NG drew the Board's attention to the Summary Hospital Level Mortality Indicator (SHMI) which illustrates the mortality data for the period April 2012 to March 2013 and shows an improvement once again from the previous value of 1.03 to the current value of 1.01 which is the best for the Trust since the indicator was first developed.

NG noted that the In Hospital SHMI data shown is for the period ending December 2012 and not 2013 as stated within the report. RL was disappointed to learn that the data provided is therefore 11 months out of date, and on behalf of the Board requested that CHKS data is provided and reported going forward. This was acknowledged, with NG agreeing to provide a breakdown by diagnostic category for the SHMI for the next Trust Board Meeting.

Action:

To provide a breakdown by diagnostic category for the SHMI for the Trust Board Meeting on Tuesday 7 January 2014.

By Whom:

NG

Section 3 - Operational Performance

NW presented the Operational Performance section, with the key headlines as reported within the Executive Summary.

NW was disappointed to report that the Trust had not achieved the 96% National target for Choose and Book slot availability target in August and September 2013. NW advised that current performance is caused by demand outstripping contracted capacity in a number of specialties and the use of Choose and Book by GPs. A number of actions are now in place to address these issues and hopefully improve performance.

GRR noted a very significant increase in the number of cancelled elective care operations, the vast majority of which NW confirmed were in April 2013, although August and September 2013 have both seen significant pressure on beds with inevitably some theatre cancellations. This detail is now included as part of the Programme of Improvement which sits within the Winter Plan.

Section 4 - Human Resources

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

Recruitment activity continues to be a priority to ensure the Trust provides appropriate staffing levels and to decrease temporary staffing usage, which is evident in Figures 35 and 36 of the Integrated Performance Report.

Recruitment amongst medical staff continues to be a challenge with the main areas being Dermatology, Care of the Elderly, Respiratory and Community Paediatrics. SF advised that the Trust is currently advertising through the British Medical Journal and working with agencies to help recruit into these vacancies and subsequently reduce the risk.

Although the Trust would appear to be keeping pace with recruitment, GP felt that this was not reflected within the report. SF acknowledged GP's comment advising that she would endeavour to present a more balanced report in the future.

Analysis shows that both short term and long term sickness within month has increased, with a number of very serious and complex long term sickness issues. Sickness in general has increased in month to 4.06% which is higher than this time last year.

The latest rate of compliance for Statutory/Mandatory Training in October 2013 is 81.32% which is an increase from the 76.92% in September 2013. SF expressed her confidence that the Trust will achieve the 90% compliance rate by the end of the financial year.

The Appraisal rate continues to increase, with the Trust committed to achieve the 85% target by the end of the financial year (March 2014). This target and commitment is fully supported by the Chief Executive.

Take up of the Flu Vaccination currently stands at circa 20% of front-line staff vaccinated within the first three weeks of the campaign.

Section 5 - Finance Report

RL presented the Finance Report for Month 6, with the Trust reporting a year to-date deficit of £1,705k which is in line with the plan. The Trust's plan for the year is a deficit budget of £4.95m.

The Board was pleased to learn that the application to the Independent Trust Financing Facility Committee for £4,950k Permanent Dividend Capital (PDC) Revenue Support has been approved.

RL provided an update in respect of the ongoing discussions with North Somerset Clinical Commissioning Group to recover funds due to the over performance, which remains a major concern for the Trust.

Resolution:

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

892.13

BUDGET SETTING 2014/15

RL presented a report which asks the Trust Board to note the Outline Budget Setting process for 2014/15 and the key principles and assumptions as set out within the paper.

GRR noted his discontent that all recurrent non delivered savings from previous years will be carried forward at divisional/departmental level.

Resolution:

The Trust Board **NOTED** the process, key principles and assumptions for the 2014/15 Budget Setting process and welcomed approval of the 2014/15 Budgets at a 'special' Trust Board Meeting on Tuesday 1 April 2014.

893.13

NURSE STAFFING REVIEW – SIX MONTHLY UPDATE

CP presented a six monthly update on Nurse Staffing with a detailed Review Paper to be provided at the Trust Board Meeting in January 2014.

The Board's attention was drawn to the table showing the number of WTE nursing vacancies which has decreased from 41.78 in April 2013 to 11.84 in September 2013 as a result of the ongoing recruitment activity.

Resolution:

The Trust Board **NOTED** the update on Nurse Staffing and welcomed a detailed Review Paper at the Trust Board Meeting in January 2014, and then six monthly thereafter.

894.13

STAFF ENGAGEMENT REPORT

Mrs Sandy Jackson (SJ), HR Manager, was welcomed to the meeting to present a report which provides assurance to the Board that the work being undertaken through the Staff Survey Action Plan does address staff concerns and will have a positive impact on increasing and improving staff morale and engagement levels.

The Board's attention was drawn to Appendix 1 which includes feedback from the Staff Engagement Survey, Staff Listening Events and Staff Exit Interviews and correlates against the action taken from the Staff Survey Action Plan.

Attendance at Staff Listening Events was disappointing with only 48 staff attending. A further series of events are planned for the New Year which will be held in staff areas. NW noted the relaunch of Team Brief last month; which had seen a welcomed level of attendance.

SF drew reference to an outstanding Matter Arising which had asked that details in relation to Exit Interviews is presented to the Trust Board, and which has been subsequently included within Section 5 'Staff Turnover' of the Staff Engagement Report.

In discussing the 2013 NHS Annual Staff Survey, NW was disappointed to note the current response rate of 22% against our own target of 65%, with further reminders to be sent out to staff this week.

PC on behalf of the Board thanked SJ for attending to provide the Board with an update on progress within the Staff Engagement Report.

Resolution:

The Trust Board **NOTED** the Staff Engagement Report and **ENDORSED** the actions that have been taken to-date and the further work that will be carried out once results from the 2013 Annual Staff Survey have been published.

895.13

PAEDIATRIC REVIEW

NG presented a paper which updates the Board on the actions and progress being taken to address deficiencies in the emergency care pathway for paediatrics as highlighted by the Royal College of Paediatrics and Child Health during their invited visit in August 2013.

NG provided the background information to the Review along with the achievements taken to-date following regular review and monitoring of the Action Plans:

- A review has been undertaken of the status of nursing and medical training for paediatrics, with a plan now in place to address the gap in training ensuring that 100% of Doctors and Nurses will have received the appropriate training by March 2014.
- Changes to the clinical pathway with the introduction of a new triage tool and PEWs (Paediatric Early Warning Score) to be used within Emergency Department triage. Emergency Paediatric Nurses are also being recruited to the Emergency Department to support the recommendation for 24/7 trained Paediatric Nurse presence.
- A sub-group has been developed to look at the environment recommendations and children have been invited to walk the pathway during half term so that their opinion can be sought.
- A process has been implemented for other agencies to flag 'at risk' children to the Emergency Department. A named Nurse for Safeguarding is now in post and training for Level 3 will resume in November 2013. A proposal is also being submitted for Weston to network with Taunton and Somerset NHS Foundation Trust for paediatric safeguarding and child protection support from 1 November 2013.

In reviewing the Training Recommendations, NW sought reassurance that our Emergency Department Medical staff will have received the required level of training by the end of January 2014 (the timeline stipulated by the Royal College of Paediatrics and Child Health), as the figures against 'Training Booked' would suggest that there is still some way to go to achieve 100% compliance. NG acknowledged the comments raised, confirming that currently five out of six Emergency Department Staff Grades are APLS (Advanced Paediatric Life Support) trained and one Staff Grade does not currently hold a valid APLS accreditation. Of a total of six Emergency Department Consultants, only one is currently APLS accredited and three Consultants are booked to attend an APLS course in October and November 2013. The two remaining Consultants and one remaining Staff Grade will book onto the next available locally run APLS course. NG was unable to provide absolute assurance that all Medical Staff would receive the required level of training by the January timeline.

NW responded advising that there are a number of actions which can be taken to assure both the Board and our patients that we can deliver a safe model of care for the future provision of Paediatric Services in North Somerset.

In concluding, PC requested that by Friday 8 November 2013, NW is provided with a full update in relation to the outstanding training requirements and actions to be taken. It was also agreed that the report received from the Royal College of Paediatrics and Child Health would be circulated post meeting.

Action:

Update in relation to the outstanding training requirements and actions to be taken to be provided to the Chief Executive by Friday 8 November 2013. It was also agreed that the reports received from the Royal College of Paediatrics and Child Health would be circulated post meeting.

By Whom:

NG

Resolution:

The Trust Board **NOTED** progress to-date by way of the Paediatric Review and the need to determine a model for the future provision of Paediatric Services in North Somerset, which will be carried out in conjunction with the local health economy via the Steering Group.

896.13

NATIONAL CANCER PATIENT EXPERIENCE SURVEY 2012/13

CP presented a paper which summarises the results of the 2012/13 Cancer Patient Experience Survey.

230 patients responded to the National Cancer Patient Experience Survey for 2012/13. For the 70 questions about the Cancer journey, from GP through diagnosis, inpatient and outpatient treatment, to 'after hospital' care, the Trust scored in the top 20% for 27 questions and in the bottom 20% for only three questions.

CP added that individual Cancer Multi-Disciplinary Teams will review the overall and specific results and will include actions to address any areas of concern in their development plans, progress of which will be reviewed as part of the Cancer Peer Review process. Improving communication of test results will be added to the Cancer Strategy Priorities for 2013/14, with implementation and progress to be monitored through Cancer Strategy Group Meetings.

Resolution:

The Trust Board **NOTED** the results of the 2012/13 Cancer Patient Experience Survey and the actions being taken.

ANY OTHER BUSINESS

897.13 QUESTIONS FROM MEMBERS OF THE PUBLIC

Mr Douglas Pearce, as a member of the public, addressed the Board in relation to the apparent lack of beds available within the Hospital and in particular drawing on the experience of his mother back in April/May of this year. NW responded advising that the Trust is running at 90% capacity and is seeking funding for additional capacity. NW stressed the aim of the Trust is to ensure the best possible delivery of care to all our patients.

Mr Pearce also noted the closure of the League of Friends Shop and questioned the opening of Costa Coffee. NW explained the plans for the redevelopment of the Front Entrance which will include the reopening of the League of Friends Shop. NW remarked on the success of Costa Coffee up and down the country which is likely to provide additional income for the Hospital. PW also commented on the improved information services and facilities for patients and visitors.

Finally, Mr Pearce remarked on the car parking costs for regular attendance at the Hospital which would seem rather expensive. NW explained that the car parking tariff will be reviewed in the new financial year, however advised of the car parking concessions which are available for long stay visiting, along with entitlements for travel costs which are available to some patients and their escorts, the details of which are available on the Trust's website.

There were no further items of business.

DATE OF NEXT TRUST BOARD MEETING:

Tuesday 7 January 2014 at 10.00 am in the 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 12.10 pm.