

Held on Tuesday 6 December 2011 at
10.00 am in the Lecture Theatre

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 Mr Ian Turner | Mr Peter Colclough (v) Ms Bronwen Bishop (v) Mr Ian Bramley (v) Mr Nick Gallegos (v) Mrs Alison Kingscott Mr Rob Little (v) Mr Nick Wood |
| Apologies: | Mrs Chris Bryant, Mr Roger Lloyd | |
| In Attendance: | Mrs Margaret Blackmore, Mr Stephen Buswell (LINK), Mrs Julie Fisher, Mrs Delyth Lloyd-Evans (Chair, North Somerset CIC), Ms Julia Stroud, Mrs Caroline Welch | |

The Meeting commenced at 10.02 am

Actions

Mr Creswick welcomed Mr and Mrs Fisher, local residents and members of the Uphill Village Society, to the December Meeting of the Trust Board. A further welcome was extended to Mr Nick Wood, appointed as Chief Operating Officer for Weston Area Health NHS Trust, to his first Board Meeting.

680.11 Declarations of Interest

There were no declarations of interest.

681.11 Minutes and Matters Arising from the Meeting held on Tuesday 1 November 2011

The minutes were agreed as a correct record subject to the following amendments:

674.11 – Finance Report – The seventh paragraph (second sentence) has been amended to reflect correct discussion held at the Trust Board Meeting, to read as follows:

Mr Little acknowledged the £2m-plus gap, but felt that with continued intensive effort by the two major operational Divisions and all other parts of the Trust, we would still be able to *reduce this gap, but not significantly*.

Matters Arising

Clinical Quality Report – Infection Prevention and Control

A further progress report has been included within the Clinical Quality Report presented to this month's Trust Board.

Charitable Funds Board

A paper seeking the Board's agreement to extend the membership of the Charitable Funds Board was to be tabled for further discussion under 'Any Other Business'.

682.11 Schedule of Tracked Matters Arising

The Schedule of Tracked Matters Arising was reviewed, with the following points noted:

Minute Reference 641.11 - Mr Bramley and Mr Paine are working on a review of Patient Safety, linking results of the Patient Safety Review held last year with the ongoing National Staff Survey. This will be published when available.

Minute Reference 669.11 – Item covered within the Chief Executive's Report being presented to the December Trust Board (Agenda Item 5 refers).

Minute Reference 671.11 – Item covered within the Clinical Quality Report being presented to the December Trust Board (Agenda Item 6 refers).

683.11 Mr Creswick welcomed Mr and Mrs Fisher from the Uphill Village Society. Mrs Lloyd-Evans expressed a declaration of interest, as a resident and member of the Society.

Mrs Fisher addressed the Board, stating that the parking situation in Uphill has not changed and is if anything worse. A number of bus services have now been suspended, which has impacted on the elderly and disabled residents.

Mrs Fisher made reference to her letter which had recently been published within the Weston Mercury, passing a copy of this, along with photographs illustrating the difficulties

described, to the Chairman. Mrs Fisher asked the Board to reconsider its decision on staff car parking charges.

Actions

Mr Creswick recapped on the actions which had been taken by the Trust thus far in seeking to address the concerns raised by the residents, acknowledging that long-stay parking seems to be the key issue. He noted that the Trust had no powers beyond its own premises and pointed out that the problems predate the introduction of staff parking charges. He reminded the meeting of the constraints surrounding parking charges and car travel for the Trust.

Mr Creswick assured Mr and Mrs Fisher that he would endeavour to make further progress with relevant external organisations in order to resolve the continuing problem, and that he would also welcome the opportunity to meet with Mr Castle as Chair of the Village Society in the near future.

CC

Thanks were extended to Mr and Mrs Fisher for attending the meeting.

684.11 Chief Executive's Report

Mr Colclough presented his Chief Executive's Report, welcoming the arrival of Mr Nick Wood as Chief Operating Officer for the Trust.

Mr Colclough was pleased to inform the Board that Ms Julia Stroud would be overseeing the areas of responsibility of the Director of Nursing during the three week period between Mr Bramley leaving and Mrs Gray joining the Trust.

The inclusion of Re-Procurement of NPfIT Systems within the Chief Executive's Report is an early warning as to the judgement which the Board will need to make in due course. Dr Reah raised concern in relation to the potential cost for change, with Mr Creswick suggesting that it is fair to remind ourselves that previous decisions taken were out of our hands but that this seems likely to require full local appraisal. Mr Colclough added that Millennium had been heavily demonised in many locations within the NHS, in some cases unfairly so, with significant progress and benefits reported in other cases.

The Board noted that the quality of data has changed which would suggest that the detail included within the recently published NHS Reference Costs for English Trusts is a more accurate measure of our status. Mr Turner asked that further detail is returned to the Board in due course. Mr Colclough made reference to the Integration Portfolio within which this, along with other priority issues, will feature. Mr Little also

noted that Service Line Reporting is included within the agenda for the Finance Committee Meeting to be held in January 2012.

685.11

Topical Issues

Actions

Mr Creswick drew reference to the recent circulation of the Operating Framework for the NHS in England 2012/2012.

Mr Creswick had attended the Launch Event for 'Promoting Positive Behaviour at Work Week' on Monday 28 November 2011, which had proved extremely interesting and had raised a number of questions for the HR function to pursue with the Trust's professional leadership and line management.

686.11

Clinical Quality Report to include Quarterly Patient Experience Report

Mr Creswick welcomed the new style of the Clinical Quality Report which had been produced for the December Meeting of the Trust Board. Mr Gallegos provided the Board with a brief in relation to implementation and the sources of data used for the report, suggesting that he, along with his colleagues, would be happy to tailor the report to the Board's requirements.

Commencing discussion, Mr Paine felt there to be a lot of information included within the report, and was unsure after reading, as to what is most important. Mr Bramley drew attention to the Quality Scorecard as shown on Page 2, which as it is developed will help the Board to understand the most important indicators for the Trust.

Ms Ferguson commented on the importance of the benchmarking data included within the report, with Mr Colclough suggesting that the Board should be reviewing, on a quarterly basis, the data produced by the Strategic Health Authority and how the Trust is performing within the patch.

Discussion was focussed to the work of the Quality and Governance Committee in scrutinising and monitoring the detail included within the Clinical Quality Report, along with the elements required for discussion by the Board. Mr Creswick added that Board reporting has improved significantly over recent years, but one point that we all recognise is the need for economy of effort in capturing the most relevant data and avoiding duplication. Mr Creswick suggested to the Board that the format and content of the Report remains work in progress between Mr Colclough and the Executive Directors.

Actions

Dr Reah was surprised to read that eligibility for CQUIN payments is determined by passage through a structured gateway process consisting of key performance indicators these had still not been agreed with the Primary Care Trust.

Mr Bramley acknowledged this had been a problem, advising that the Trust has been working with the Primary Care Trust to agree targets based on the data which was collected during Quarter 1. He recognised that targets not set in advance may lack credibility and objectivity.

The Board noted the Clinical Quality Report.

On a separate but related point, Mr Creswick advised the Board of letters which had recently been received from The Patients Association and the Editor in Chief of the Nursing Standard, asking that the Chairman, along with the Chief Executive, Director of Nursing and Medical Director, sign up to the Care Challenge quoting their letter of 29 November 2011. Confident that the Trust is already making successful efforts to ensure communication with compassion, dignity in care, the relief of pain and adequate nutrition. Mr Creswick advised that he would sign the declaration and send an accompanying letter reflecting the Board's position as a whole. This was agreed.

CC

687.11 Performance Report

The Performance Report was taken as read, with Mr Wood providing an overview of his expectations for the next three to four months, the key points being:

- As an Operational Team we need to move ahead against some key indicators, ie 4 Hour Wait. We have now started to achieve the National target, however the major issues within the Performance Report are centred on the Emergency Department, coupled with a high level of Length of Stay and a number of discharge issues, to which we need to pay particular attention.
- Discussions and negotiations will need to be held with the Primary Care Trust in relation to those patients waiting over 23 weeks and how this target can be delivered prior to the year end.

- The first iteration of a new Integrated Performance Report would be brought to the February Meeting of the Trust Board, with Mr Wood agreeing to speak to members of the Board individually in advance of its introduction and public presentation.

Actions

Mr Creswick welcomed further work in relation to the staffing issues which had been previously raised, and the direct linkage of those issues to the financial performance of the Trust.

Reference was drawn to the Exception Report and in particular to the 'Rates for Clostridium Difficile'. The Board were disappointed to learn that since publication of the report the Trust now has 16 reported cases, which is our annual target.

Mr Bramley said that the increase in reported cases of Clostridium Difficile is a regional trend. The Trust has undertaken a lot of work in investigating each case and working with staff to drive forward the awareness campaign. He noted that the annual target this year was always seen to be very challenging, reflecting the big drop in 2010/2011.

Mr Turner noted improvements generally, however he questioned the 'Delayed Transfers of Care'. Mr Colclough advised of a meeting between the Trust and Health Partners which is taking place this Thursday, to explore how patient flow can be improved and where changes in how our organisations work together could make substantial improvements to Length of Stay. An update will be reported to the January Meeting of the Trust Board.

The Board noted the Performance Report.

688.11 Finance Report

Mr Little presented the Finance Report for Month 7 (April to October 2011), drawing the Board's attention to the graph on Page 18, which shows that the run rate for expenditure has improved for October from the September position. Although this is a move in the right direction, Mr Little reiterated that the Trust remains at risk of not achieving the Financial Plan.

Year to-date the Trust has been able to achieve the Plan, which is primarily due to the use of contingency reserves and the back loading of QIPP.

Mr Little advised of a number of Invest to Save Schemes

linked within the Capital Plan, some of which will deliver benefits although the majority will not come through until the next financial year.

Actions

Mr Creswick observed that pressures seem to remain within now-familiar areas. Mr Colclough agreed but added that the recent closure of Uphill Ward has proved a very important step forward for the Trust, with savings in the region of £100k per month. A paper developed by Mr Bramley and Mrs Kingscott describing the impact of the closure of Uphill Ward on the levels of bank and agency staff would be shared with the Board during the 'Closed' Session Meeting.

Following the question of welfare for our staff, Mr Bramley reiterated that a number of the staff on Uphill Ward had been temporarily moved to that area and subsequently are now back working within their original environment.

In summarising Mr Creswick noted the requirement by the Trust to achieve the surplus target over the next three months without compromising care standings. Mr Colclough added that this year would see the last opportunity of financial support from the Strategic Health Authority, and therefore we must as an organisation do everything in our power to achieve the financial target.

The Board noted the Finance Report.

689.11 Winter Plan

Mr Wood presented the Winter Plan which reports on the actions underway to prepare the organisation for the anticipated increase in activity during the winter period of November 2011 to March 2012.

Mr Colclough commented on Section 3.3 'Capacity and Demand Arrangements' and the need to build on some of the foundations following recent work with external colleagues.

Mrs Lloyd-Evans confirmed that the North Somerset Community Partnership do follow a similar approach for winter planning, noting the issue of carers who are unwell over this time, which then impacts on services further.

Mr Paine asked whether any lessons had been learnt from last year's Winter Plan. Reference was drawn to Section 3.5

‘Evidence of Learning from Previous Winters’ and ‘Service Improvement’, with Mr Bramley adding that the BNSSG do have an Escalation Plan to which this Plan links.

**690.11 Trust’s Emergency Preparedness and Business Actions
Continuity Update**

Ms Bishop presented a report updating the Board on activities relating to emergency preparedness and business continuity since April 2011, and providing assurance that actions continue to be undertaken by the Trust to ensure that it is able to meet the requirement of the Civil Contingencies Act 2004.

Mr Paine was pleased to note that external training is available to staff. Ms Bishop added that a rolling programme of Command and Control Training has continued during the last 12 months to ensure that all On-Call Managers and Site Team staff are aware of the requirements of operating as a Bronze Commander during a major incident.

Mr Creswick, on behalf of the Board, was encouraged to learn how this work was progressing and thanked Ms Bishop for the detail provided and the careful work behind it.

The Board noted the Trust’s Emergency Preparedness and Business Continuity Update Report.

691.11 Board Committees’ Exception Updates

There were no updates for reporting by Committee Chairs.

Mr Turner drew reference to the first meeting of the South West Audit Committee Chairs Network, held on 2 December 2011, and to which he unfortunately was unable to attend. Mr Turner is however now included within the circulation for this group and will endeavour to attend future meetings.

692.11 Any Other Business

Charitable Funds Board

Mr Creswick referred to the report to the Trust Board which had been tabled, which seeks the Board’s agreement to extend the membership of the Charitable Funds Board to include a representative of the League of Friends of Weston

General Hospital, and to confirm related issues of quoracy and voting arrangements.

The Board acknowledged the progress in the management of the Charitable Funds Board over recent years and agreed the proposal as a further measure in ensuring that the benefits of the funds are maximised.

Safeguarding Adult Referrals and Activity

Actions

Mr Bramley tabled a paper which has been produced in response to a request for further information regarding the numbers of safeguarding adult referrals reported to the Trust Board in November.

The Board acknowledged and thanked Mr Bramley for the information provided, suggesting that there should be a Non Executive Director link to Safeguarding. Mr Creswick asked that this point be carried over with an action for him to discuss further with Non Executive Directors.

CC

NHS Confederation – South West Regional Meeting and Annual Conference and Exhibition

Mr Creswick advised the Board that he is now in receipt of dates from the NHS Confederation, the details of which will be forwarded to Non Executive Directors.

CC

Consent Agenda

Mr Creswick confirmed that the information circulated previously in relation to the Consent Agenda will be introduced in January 2012. This action will be facilitated by the changes in other Board Papers and their presentation.

As a further point, Mr Creswick advised the Board that himself and Mr Colclough are in discussion with a potential candidate to fulfil the role of a Board Secretary within the Trust at least on an interim basis. Mr Colclough agreed to circulate a short paper to the Board outlining the role of the Board Secretary.

PC

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

The Meeting concluded at 12.10 pm

DATE OF NEXT MEETING

Tuesday 10 January 2012 at 10.00 am in the Board Room

