

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on
Tuesday 7 August 2012 at 11.30 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 Roger Lloyd	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 Caroline Welch	Head of Communications

765.12 WELCOME AND APOLOGIES

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

Mr Grahame Paine	Non Executive Director
Mrs Delyth Lloyd-Evans	Chair, North Somerset Community Partnership

Mr Creswick welcomed Mr Buswell, Mrs Blackmore and Mr Richardson, apologising for the delayed start to the Public Meeting.

DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest.

Minutes and Matters Arising from the Meeting held on Tuesday 3 July 2012**Resolution:**

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

Several comments had been raised in relation to the Table of Matters Arising following the meeting held on Tuesday 3 July 2012, which Mrs Hunt confirmed would be responded to separately by way of a short summary from Mr Wood.

In relation to Minute Reference 736.12, Mrs Gray confirmed that the Trust has now received notification of acceptance to participate in the national roll-out of the Quality Mark for Elder-Friendly Hospital Wards. Although this is not expected to come to fruition until January 2013, Mrs Gray advised that a Working Group would be convened to be led by Matron Debra Parsons.

Mr Creswick thanked Mrs Gray for the update provided, suggesting that the Board would be pleased to receive a further update at some time in the future, to be determined by Mrs Gray.

Action:

A further update on the Quality Mark for Elder-Friendly Hospital Wards to be returned to the Board at some point in the future, to be determined by Mrs Gray.

By:

Director of Nursing

In relation to Minute References 753.12 and 761.12, Mr Wood confirmed that two separate papers on "Theatre Productivity" and "Performance Assurance Framework" have been included within the Board Papers.

Mr Wood alluded to the "ED Clinical Quality Indicators" as detailed on Page 25 of the Integrated Performance Report, which includes data pertaining to the number of patients who leave the Emergency Department before being seen. Dr Reah asked whether there was any data available to support how many patients leave the department post Waiting Room Triage. Mr Wood confirmed that this level of detail is currently not available.

Replacement Pages 5 to 12 of the Integrated Performance Report were tabled.

It was agreed that the query raised by Dr Reah in respect of Ambulance turnaround times, should be discussed separately and outside of this meeting.

Action:

A separate discussion to take place in respect of Ambulance turnaround times.

By:

Chief Operating Officer / Dr George Reah

767.12 CHIEF EXECUTIVE'S REPORT

In presenting a verbal update to the Board, Mr Colclough referred to the recent Joint Statement from North Bristol NHS Trust and the University Hospitals Bristol NHS Foundation Trust who have agreed to establish a joint project to take forward detailed planning for the potential integration of both organisations and the establishment of a new single Foundation Trust with its own identity and vision.

Mr Colclough advised the Board of a recent letter received from the Chairman of the Great Western Ambulance Service NHS Trust (GWAS) providing an update on the future of services currently provided by GWAS. The Secretary of State is expected to give final approval for the dissolution of GWAS and the transfer of all staff and assets of GWAS to the South Western Ambulance Service NHS Foundation Trust (SWASFT) in early 2013.

The Board will be aware of the recent appointment of Dr Mary Backhouse as the Clinical Accountable Officer Designate for the Clinical Commissioning Group. Mr Colclough was pleased to confirm that Mrs Kathy Headdon and Mr Graham Nix have now been appointed as the Lay Chair and Lay Member with responsibility for Governance and Audit respectively. He added that the Board may wish to invite Dr Backhouse and Mrs Headdon to a future Board Meeting.

Action:

Dr Mary Backhouse and Mrs Kathy Headdon to be invited by Mr Creswick to a future meeting of the Trust Board.

By:

Chairman

Mr Colclough advised the Board of a recent letter received from the Audit Commission confirming the appointment of Grant Thornton UK LLP as External Auditor to audit the accounts of Weston Area Health NHS Trust for a period of five years from 1 September 2012.

Resolution:

The Trust Board **NOTED** the verbal update provided by the Chief

768.12 INTEGRATED PERFORMANCE REPORT

Section 1 – Executive Summary

Mr Wood introduced the Integrated Performance Report for July 2012, referring to the replacement Pages 5 to 12 which had been previously tabled.

Mr Wood drew the Board's attention to the continued levels of improvement in performance, as detailed within the Executive Summary. The target for Clostridium Difficile remains challenging, and although currently reporting as "red", performance for the first half of the year remains good.

The Trust has continued to experience a rise in the number of Emergency Department attendances, reporting 700 above plan for June. However, despite the pressure this has placed on the department and the Hospital's bed base, the Trust has continued to achieve the national four hour target in June. Mr Wood was also pleased to report that the Trust had recently been named within the Health Service Journal as one of the few Trusts to have sustained significant improvement since April 2012.

Mr Wood reported that all of the key operational targets have been achieved in June including all eight of the national cancer targets, the national six week diagnostic access target and the five national referral to treatment (RTT) targets.

Mr Creswick noted the mismatch between Items 6 and 7 of the "Patient Experience" section of the Summary Scorecard which had been queried previously, welcoming further review. Mrs Gray advised that further detail explaining the apparent contradiction is provided on Page 18 of the Integrated Performance Report.

Section 2 - Quality and Patient Safety

Mrs Gray introduced the Quality and Patient Safety section of the report.

Mrs Gray referred to the recent Ofsted/Care Quality Commission Inspection, advising that the final report is due to be published on 24 August 2012, following which the Board will receive a full report on the outcomes of the Inspection.

Action:

A report on the outcomes following the Ofsted/Care Quality Commission Inspection to be brought to the September meeting of the Trust Board.

From the 80 reported patient incidents that may result in a personal injury, 65 were attributed to patient related slips, trips and falls. Although there has been an increase from the previous month's total of 48, Mrs Gray advised that the Trust remains a good performer in relation to Patient Falls. Furthermore she added that new footwear is now being trialled for one month on the wards. All incidents continue to be monitored and reviewed as part of the SUI process.

The number of reported SUIs is now starting to reduce, as a result of the revised documentation now in place for pressure ulcer risk assessment and pressure ulcer prevention practice and the general standard as set by the Nursing and Midwifery Strategy. Mrs Gray drew the Board's attention to the graph detailed on Page 16 which shows a decrease in reported pressure ulcers from 27 in May to 18 in June, the majority of which are community acquired.

The Board were pleased to note that the complaint response time in June had improved with 91% of complaints responded to within the required timescale, exceeding the Trust's target of 80%.

Mrs Gray confirmed Mrs Perry as Executive Lead for CQUINs. Updates on progress with delivery of the CQUIN will be received by the Quality and Governance Committee bi-monthly, with the Board to receive a progress briefing as part of the Integrated Performance Report.

Dr Woodhead reported on VTE risk assessment which has been sustained with 96.24% compliance recorded in June 2012, against a target of 90%. Work remains ongoing with the VTE Committee reinvigorated to improve compliance.

As detailed within the graph on Page 19, Mr Gallegos confirmed that mortality within the Trust lies within the expected limits given the population of patients admitted to the Hospital.

Mr Lloyd questioned the Trust's ability to consistently meet the "Mothers Initiating Breastfeeding in Hospital" target. Mrs Gray advised that every opportunity is used to outline the risks to mothers and influence change and this remains an area of focus. Mr Wood added that due to the small number of births within the Hospital the percentage can vary considerably.

Mr Turner commended Mrs Gray and the Executive Team for the marked improved in respect of Complaint Response Times and the work of the Patient Advice and Liaison Service.

Mrs Gray provided the Board with a brief update following the Patients Council Seminar held on Saturday 14 July 2012, which had welcomed over 50 attendees. A further Seminar is to be held this Saturday, 11 August 2012, as part of the interview/selection process, with the inaugural meeting expected to take place during early September.

Section 3 - Operational Performance

In presenting the Operational Performance for the Trust, Mr Wood drew the Board's attention to the ED Clinical Quality Indicators for June 2012 as shown on Page 25. The Trust continues to struggle around the number of unplanned reattendances with 7.09% of patients reattending the department within seven days of their original attendance. Mr Creswick noted a much lower percentage in previous months. Mr Colclough acknowledged a continued concern around the availability of Primary Care, drawing reference to a meeting which has been convened with key individuals this Thursday, 9 August 2012.

Mr Wood was able to confirm that a total of 1,650 patients had reattended the Emergency Department more than twice, although it is worth noting that Length of Stay and conditions do vary considerably. The Trust continues to experience an unprecedented and continuous rise in the level of attendances since the beginning of the financial year 2012/2013.

An important aspect of ensuring good patient flow is the level of discharges throughout the day and at the weekends, which Mr Wood acknowledged as work in progress.

Finance Report

Mr Little presented the Finance Report for Month 3, with the key headlines as shown within the report.

- The Trust is reporting a year to-date surplus of £214k which is in line with the plan;
- Overall income is £4k above plan at the end of June;
- Overall expenditure is £4k over plan at the end of Month 3;
- Pay and non pay expenditure is £150k above plan at the end of May;
- In total the Savings Plan (SIP) savings and non-recurrent savings delivered in Month 3 are £313k and £833k for the year to the end of June, which is a shortfall of £292k.

Mr Little drew the Board's attention to the Staff Pay Bill as shown on Page 42, which indicates that the temporary staffing cost was 9.05% of our total pay bill

in June compared to May when the cost was 6.85%. This increase is attributed to the number of additional unfunded beds which have been open during June. Mr Colclough drew a reminder to a detailed report focusing on the strategy for "Deployment of a Temporary Workforce" which will be presented to the Board in September 2012.

Mr Wood drew the Board's attention to the Length of Stay data which he confirmed is currently inaccurate. Mr Wood confirmed that this data will be updated in time for next month's Integrated Performance Report.

Human Resources

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

- The sickness rate has decreased this month and is down to 3.30% in month.
- The increase for Statutory/Mandatory Training to 76.98% in June is less than anticipated and work continues to take place to increase training compliance.
- The Appraisal rate increased to 85.48% in June which shows the positive steps taken to ensure that the Trust's target continues to be achieved. However, work remains ongoing to ensure that the compliance rate is further increased.

Mr Creswick recognised the improving picture in regard to Sickness Absence rates and Appraisal Training, and the ongoing work to further strengthen and increase training compliance. He also noted that the content and format of the Integrated Performance Report would be reviewed following the October meeting of the Trust Board.

Action:

Meeting to be held to review the content and format of the Integrated Performance Report following the October meeting of the Trust Board.

By:

Associate Director of Governance and Assurance

Resolution:

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

PERFORMANCE ASSURANCE FRAMEWORK

Mr Wood presented a paper detailing the results of the implementation of the Performance Assurance Framework which has now been running for a full half year. The Performance Assurance Framework was introduced to

establish a performance management structure which aimed to deliver sustainable performance improvement across the four key performance elements – Operational, Quality, Workforce and Finance.

At the end of Quarter One the Trust's overall position is Amber with one Division shown as Red, one as Amber and two as Green as detailed within the matrix on Page 2. Mr Wood drew the Board's attention to the significant and sustained improvement in performance across all Divisions over the last six months, with two Divisions expected to move to earned autonomy in August assuming their current performance is maintained.

Mr Colclough welcomed the inclusion of this paper, which he said is a valuable management tool and demonstrates a rigorous performance monitoring regime to establish improvements and provide assurance to the Board.

Mr Creswick thanked Mr Wood for the report provided, suggesting that the Board would not wish to request any further detail at this time.

Resolution:

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

THEATRE PRODUCTIVITY

Mr Wood presented a paper detailing the work on establishing a baseline for Theatre Productivity and the work the Trust is undertaking with Newton Europe around improving productivity and utilisation of capacity.

Mr Wood acknowledged the discussion which had taken place in previous Board Meetings in relation to cancelled Theatre sessions, advising that:

- The amount of actual cancelled electives is very small;
- There has been insufficient robust data to evidence Theatre efficiency;
- Elective activity is covered within the work currently being undertaken by Newton Europe Limited.

He advised that a further report would be returned to the Board once clear and accurate data is available.

Action:

A further report on cancelled Theatre sessions to be returned to the Board once clear and accurate data is available.

By:
Chief Operating Officer

Referring back to his report, Mr Wood drew the Board's attention to the recent analysis compared to data available from the Trust's 'OPERA' Theatre Management System, which confirms efficiencies averaging 61%, reflecting the effects of late starts and late finishes, along with the poor scheduling of lists.

Recognising the importance of utilising Theatre time and acknowledging the ongoing work with Newton Europe to deliver the improvements, Mr Creswick welcomed an update report to the Board at the appropriate time.

Action:

An update report on the work currently being undertaken with Newton Europe around improving productivity and utilisation of capacity, to be returned to the Board at the appropriate time.

By:

Chief Operating Officer

Resolution:

The Trust Board **NOTED** the report on Theatre Productivity.

769.12 BOARD COMMITTEES' EXCEPTION REPORTS

Finance Committee Meeting

In the absence of Mr Paine, Mr Turner provided a brief update following the Finance Committee Meeting held on Tuesday 24 July 2012. Much of the meeting had been spent looking at the Capital Programme and the challenges which this brings. The ongoing work with Newton Europe was recognised as providing a great opportunity in respect of the Savings Programme.

There were no further Board Committee's Exception Reports to note.

770.12 ANY OTHER BUSINESS

Integrated Care Programme

Mr Buswell requested an update on the Integrated Care Programme, which Mr Colclough was happy to provide. The Integrated Business Plan and Long Term Financial Model had been sent to the South of England Strategic Health Authority on 2 July 2012. A meeting with Sir Ian Carruthers and colleagues is expected to take place on Friday 31 August 2012, following which Mr

Colclough would be in a position to provide the Board with a further update in terms of a clear way forward.

Observation – NHS Direct

Having recently had cause to visit the Emergency Department with a colleague following a six hour ring back time given by NHS Direct, Mr Richardson suggested this to be a contributing factor to our increased numbers visiting the department.

Mr Creswick thanked Mr Richardson for a point well made, and which is perhaps a reflection of what is going on in the wider NHS.

**771.12 PAPER FOR INFORMATION –
SUPERVISORS OF MIDWIVES ANNUAL REPORT TO THE SOUTH WEST
LSA 2011/2012**

Resolution:

The Trust Board **NOTED** the Supervisors of Midwives Annual Report to the South West LSA 2011/2012.

772.12 DATE OF NEXT TRUST BOARD MEETING:

Tuesday 4 September 2012 at 11.00 am in the Board Room

The **Trust Board in Public Meeting** closed at 13.05 pm