

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on
Tuesday 11 June 2013 at 10.00 am in the Board Room, Weston General Hospital**

Present:

Mr Chris Creswick	(CC)	Chairman (V)
Mr Nick Wood	(NW)	Chief Executive (V)
Ms Bronwen Bishop	(BB)	Director of Strategic Development and Governance
Mrs Karen Croker	(KC)	Director of Operations
Dr David Crossley	(DC)	Chair of the Hospital Medical Advisory Committee
Mrs Sheridan Flavin	(SF)	Director of Human Resources
Mr Rob Little	(RL)	Director of Finance (V)
Mr Roger Lloyd	(RLL)	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)

(V) Denotes Voting Director

In Attendance:

Mrs Julie Fisher	(JEF)	Executive Personal Assistant (Minute-Taker)
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855.13 WELCOME AND APOLOGIES FOR ABSENCE

CC welcomed Dr David Crossley (DC) as Chair of the Hospital Medical Advisory Committee.

CC noted the following apologies for absence:

Mrs Margaret Blackmore	Vice Chair, Patients' Council
Ms Jude Ferguson	Non Executive Director
Mr Nick Gallegos	Medical Director
Mrs Delyth Lloyd-Evans	Chair, North Somerset Community Partnership
Mr Nathan Meager	Chair, Patients' Council
Mr Ian Turner	Non Executive Director

DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest.

CONSENT AGENDA

856.13 MINUTES AND MATTERS ARISING FOLLOWING THE MEETING HELD ON TUESDAY 7 MAY 2013

The Minutes of the meeting held on Tuesday 7 May 2013 were agreed as a true and accurate record.

Resolution:

The Minutes of the May 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 7 May 2013 had been reviewed with the progress and completion of actions duly updated.

QUALITY, PATIENT SAFETY AND PERFORMANCE

857.13 CHIEF EXECUTIVE'S REPORT

NW presented his Chief Executive's Report and in addition covered the following points:

- Further details in relation to the West of England Academic Health Science Network will be provided at the July meeting of the Trust Board.
- In relation to the item regarding a complaint on BBC Points West on the previous evening, NW confirmed that the complaint is now being investigated and we remain confident that there are no major concerns in terms of the care provided – details following the investigation will be reported through the complaints process. At this time the Trust can only extend its condolences to the family.

CC referred to two recent articles circulated in respect of Emergency Departments and the pressures on access and quality of care being faced regionally and nationally. He noted that waiting times within the Emergency Department had improved significantly since Easter but concern remains in terms of both the Trust's ability to consistently meet the required standard and the continuing high level of occupancy on our wards. NW added that 40 Trusts had missed the Four Hour target during April reflecting the scale of the problem across the NHS. CC said that as a Trust we need to main focussed discussions with our Commissioners although the ongoing pressures are not unique to Weston. KC advised the Board of a number of schemes which are being progressed with the Clinical Commissioning Group, and which should be in place within the next 10 to 16 weeks.

CC said that the Board would wish to recognise the ongoing pressures and the extraordinary amount of hard work which has been taken to retrieve the situation, at all levels of management and by clinical staff.

Resolution:

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

SF joined the meeting at 10.20 am

858.13

INTEGRATED PERFORMANCE REPORT

In response to GRR's previous requests and following the meeting held to review the content and presentation of the Integrated Performance Report, NW advised that the quality of data now produced within the report is of a very high standard, focusing on accuracy and commentary. KC noted that we have now also incorporated comments from the Patients' Council. There remains a challenge around the Scorecard in view of the Trust Development Authority Framework requirement, however KC confirmed that the Trust would benchmark well on our current reporting.

In summarising CC said that until further notice the Board will not be expecting a revised report but welcomes ongoing improvements within the current level of reporting, provided they do not result in duplication from section to section.

Section 1 – Executive Summary

NW introduced the Integrated Performance Report for May 2013 which despite the pressure on the Emergency Department shows that the Trust has continued to perform well operationally with all three of the 18 week referral to treatment targets achieved in April, and all eight of the cancer targets achieved for the previous financial year. This demonstrates the robust clinical pathways which are in place and the Trust's drive to provide high quality and efficient services to its patients.

Mr Matthew Hill of the BBC, accompanied by a camera man, joined the meeting at 10.35 am

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.

CP noted that the report of the Care Quality Commission's findings following their unannounced visit to the Trust in April 2013 is expected tomorrow. In terms of the measures which have been taken, CP referred to the Ward Sponsorship Programme which the Executive Leadership Team have implemented which focuses on delivery of the Fifteen Steps Challenge. The Trust has also engaged the help of an experienced ex-Director of Nursing to undertake a 'Mystery Shopper Exercise' on wards.

The Board were disappointed to learn that the incidence of hospital acquired pressure ulcers had increased in April 2013 with 33 reported, two of which were Grade 3 – 4 and have been investigated as serious incidents. CP referred to the recent Nursing Strategy Meeting wherein pressure ulcer reduction featured high on the agenda and will continue to do so for the next two years. Tissue Viability Nurses are also ensuring compliance with documentation and that correct processes are in place for the prevention of deterioration of these ulcers, both hospital and community acquired.

CP referred to the nine Serious Incidents as tabled on Page 17, and wished to reassure the Board that no specific themes had emerged.

The number of falls per 1,000 bed days decreased to 5.1, which remains above the Trust's target of 4.7. Although disappointing, CP confirmed that the Trust continues to focus provision of care on safe pathway planning for vulnerable adults once they have been assessed to be at risk of falls.

CC referred to the demographics of the locality the Trust services, which suggests that the Trust cares for a higher than average elderly population and which may well thus have a direct bearing on the number of patient falls experienced within the Trust. CC felt it would be interesting to see if we could relate the incidence of falls to the age of the inpatient population over time, or seek comparative data to relate the issue to risks.

The timely response rate of 43% achieved by the Trust to complaints was below the standard required for April 2013 compared to 68% in March 2013. The Board was pleased to learn that Mrs Irene Gray has been commissioned to undertake a review of the Complaints Process to address any issues and improve the service.

GP questioned the trend of complaints within the Emergency Department as highlighted within Figure 9, for which CP agreed to provide further details.

Action:

Further details to be provided in relation to the trend of complaints within the Emergency Department as highlighted within Figure 9 of the Integrated Performance Report.

By Whom:

CP

CP drew attention to the Integrated Performance Report noting that in April 2013 the Trust had no women giving birth who smoked and those who had previously smoked had stopped prior to delivery which was a positive position. Further, she noted that the breast feeding initiation rate is the highest it has been for two years, with 91% in April 2013, which shows the true commitment of Midwives in promoting health initiatives within the Trust such as "Baby Friendly". CP also wished to acknowledge to the Board the work of our Midwifery Matron and Supervisor of Midwives, Ms Belinda Cox, with RLL extending his praise and appreciation for the work undertaken, as evidenced to the Quality and Governance Committee.

The Board was pleased to receive reassurance and learn of the re-establishment of the Venous Thrombo-Embolism (VTE) Committee in April 2013 which has been without a Chair for 18 months. DC noted the significant progress which has been made over the last month.

CC formally welcomed Mr Matthew Hill and colleague to the meeting.

Section 3 - Operational Performance

KC presented the Operational Performance section, reporting:

- The first two weeks in April 2013 had proved very challenging, with the four hour Emergency Department standard not being achieved for the seventh consecutive month. Bed occupancy has now reduced slightly.
- In April 2013 the Trust had 97 readmissions within 14 days which gives a 3.9% readmission rate, an improvement on 4.2% in March 2013 and significantly better performance than our peer Trust's readmission rate of 6.1%.
- The Trust continued to achieve all the 18 week Referral to Treatment Targets in April 2013.

CC requested a summarisation on bed occupancy which has fallen slightly, noting that it had previously been suggested that we would wish to run at 90%. KC reported on the work being undertaken in respect of patient flow and the launch of 'Bounce Back to Green', which was aimed at bringing occupancy back to sustainable levels.

CC was pleased to learn of the positive moves being taken.

Section 4 - Human Resources

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

SF provided the Board with an update in respect of the overseas recruitment work in Madrid last week. The team had interviewed over 100 applicants with 44 positions offered. The first cohort of Nurses (15) are expected into the Trust on 15 July 2013 to commence a period of induction, following which they will be allocated to Harptree, MAU, ACC, Berrow and Hutton Wards. The second and third cohorts have also been identified to commence in August and September 2013. SF wished to extend her thanks to Mr Stephen Penfold, Ms Kate Rimmer, Ms Louise Carman and Ms Melody Potdar.

The sickness rate within the Trust has continued to decrease from 4% to 3.67% in month. April saw the new Trust target of 3% come into force, which reflects the commitment of the Divisions to ensure this is achieved.

Statutory Mandatory Training has decreased for the second month, however it is hoped that the decrease in sickness will impact positively going forward. SF noted that despite this decrease the number of staff actually attending training had increased.

RLL noted the turnover of staff within the Trust which is edging towards 12%. SF advised that all leavers are asked to attend a 'face to face' exit interview to ensure that any themes are identified, further details of which could be provided to the Board as required.

CC on behalf of the Board wished to endorse the thanks to the Team who had recently visited Madrid and welcomed further progress on the overseas recruitment campaign over the coming months. CC also asked that we give thought as to how we communicate the introduction of a significant number of Spanish nurses to the wider public.

Action:

Further progress on the overseas recruitment campaign to be reported to the Board over the coming months.

Thought to be given as to how the introduction of the new Spanish nurses can be communicated to the wider public.

Analysis of staff turnover to be prepared for presentation to the Board in due course.

By Whom:

SF

Section 5 - Finance Report

RL presented the Finance Report for Month 1, with the Trust reporting a year to-date deficit of £292k which is in line with the plan. The Trust's plan for the year is a deficit budget of £4.95m, which has reduced from a £6m planned deficit at budget approval stage.

Overall income is £374k above plan and expenditure £374k over plan at the end of Month 1.

RL drew the Board's attention to the Cash Plan for 2013/14 which is to hold a cash balance of £303k at 31 March 2014 to be delivered through the management of cash and working balances. The cash balance of £428k as at 30 April 2013 is £188k lower than the planned position of £616k.

In reviewing the Trust's expenditure position, RL advised that a major pressure continues to relate to high and fluctuating activity levels and the impact on capacity and staffing for the Trust. An extra 24 beds of funded capacity over the 2012/13 funded level are available in the new financial year and have been in use for all of April. RL noted the additional capacity which has been open in the Day Case Unit and Ambulatory Care Centre for several days throughout the month. The cost of these additional unfunded beds in April was £73k.

The Trust's savings target for the year is £4,500k which represents 5% of turnover. RL confirmed that once Divisions deliver their 2013/14 savings requirement they will also be required to identify additional savings to recover their shortfall of recurrent savings delivery in 2012/13, which totals £2,215k, which is clearly challenging.

Overall patient activity income has been assessed at £310k above plan at the end of April 2013. RL confirmed the main points regarding activity as:

- Income related to the North Somerset Clinical Commissioning Group contract is £218k over plan;
- Income related to the North Somerset contract is £95k over plan;
- Income related to other patient care activities is £3k under plan.

Resolution:

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

859.13

DRAFT QUALITY ACCOUNTS 2012/13

BB confirmed that the draft Quality Accounts for 2012/13 have been produced after close review of the Regulations and in discussion with the Auditors. The draft has also been reviewed by Executive Directors prior to submission to the Audit and Assurance Committee on Wednesday 5 June 2013.

BB confirmed that statements have also now been received from the Clinical Commissioning Group, Patients' Council and Healthwatch, all of which were tabled for the Board's attention. The statements recognise the improvements to the Quality Accounts and provide some very helpful comments in terms of future reporting. All organisations have confirmed commitment to their continued working with the Trust.

CC asked that the Board approve the draft Quality Accounts for 2012/13 along with the statements tabled. GRR sought clarification that Page 63 would be amended to reflect the statements received, which was agreed.

Resolution:

The Trust Board **APPROVED** the draft Quality Accounts for 2012/13.

860.13 2012 STAFF SURVEY – ACTION PLAN

Sandy Jackson was welcomed to the meeting to provide an introduction to the 2012 Staff Survey Action Plan.

The Board had received a report on the Survey in April 2013, following which an Action Plan was developed in conjunction with the Trust's Staff Experience Group. SF advised on the purpose of the Action Plan, along with the key issues, noting a number of actions which are now rated 'green'. SF added that the actions also feature within the HR Action Plan.

GP noted his disappointment in terms of the poor response rate of staff, but wished to confirm his support for the continued work and actions. CC noted that the report was methodical and clearly addressed the issues raised by the Survey's negatives. In terms of the future of the organisation CC recognised the value of the Board spending time in a session dedicated to the Staff Survey, which he felt reflected both immediate pressures and long-standing issues. NW stressed the importance of this being taken forward over the next two to three months, with SF acknowledging the appointment of the Head of Communications who will play a vital part in progressing this work.

DC commented on the concerns of the Consultant body in terms of medical staffing vacancies and recruitment, which NW agreed to discuss further at the Hospital Medical Advisory Committee Meeting to be held on Tuesday 25 June 2013. CC welcomed the informal but informative discussion with Divisional Directors on this topic which had taken place at the Extraordinary Trust Board Seminar held last Wednesday.

Resolution:

The Trust Board **APPROVED** the 2012 Staff Survey Action Plan.

ANY OTHER BUSINESS**861.13 QUESTIONS FROM MEMBERS OF THE PUBLIC**

There were no other items of business.

DATE OF NEXT TRUST BOARD MEETING:

Tuesday 2 July 2013 at 10.00 am in the Board Room

CC moved a motion to exclude the public from the 'Open' Session and this was approved.

The **Trust Board in Public Meeting** closed at 11.30 am.