

United Lincolnshire Hospitals 
NHS Trust

Minutes of the Public Trust Board Meeting

Held on 7 June 2016

Training Room 1, Grantham Hospital.

Present

Voting Members

Professor Dean Fathers, Chair
Mr Jason Burn, Interim Director of Finance and Corporate Affairs
Dr Paul Grassby, Non-Executive Director
Mr Geoff Hayward, Non-Executive Director
Dr Suneil Kapadia, Medical Director
Mrs Penny Owston, Non-Executive Director
Mrs Gill Ponder, Non-Executive Director
Mrs Michelle Rhodes, Director of Nursing
Mr Jan Sobieraj, Chief Executive
Mr Tim Staniland, Non-Executive Director
Mr Kevin Turner, Deputy Chief Executive

Non Voting Members

Mr Paul Boocock, Director of Estates and Facilities
Mr Mark Brassington, Chief Operating Officer
Mr Keith Darwin, Associate Non-Executive Director
Mr Ian Warren, Director of Human Resources and Organisational Development

In Attendance

Miss Lucy Ettridge, Associate Director of Communications
Mrs Jennie Negus, Deputy Chief Nurse (Pilgrim)
Mr Ahmed Othman, Consultant Orthopaedics (item 7 only)
Mrs Jayne Warner, Trust Secretary (minutes)
Mr Preston Keeling, Healthwatch

Apologies

Mr David Pratt, Director of Finance and Corporate Affairs
Mrs Kate Truscott, Non-Executive Director

325/16 **ITEM 1. INTRODUCTION**

The following matters were noted in the Chair's opening remarks.

Stakeholder Meetings The Chairman had continued with stakeholder meetings including the Chamber of Commerce, Grantham College, the Vice Chancellor of the University of Lincoln and other collaborative partners.

Royal College of Nursing The Chairman had attended an event at St Botolph to celebrate 100 years of the Royal College of Nursing

Induction The Chairman had visited the Estates and Facilities department, Pathlinks the Lincolnshire Heart Centre and had observed a meeting of the Finance, Service Improvement and Delivery Assurance Committee and

attended a meeting with the Grantham Staffside.

Non Executive Director The Chairman announced that the Board would be welcoming a new Non Executive when Mrs Sarah Dunnnett joined in July.

ITEM 2. APOLOGIES FOR ABSENCE RECEIVED

Apologies were received from Mrs Kate Truscott, Non-Executive Director and Mr David Pratt, Director of Finance and Corporate Affairs.

326/16 **ITEM 3. DECLARATIONS OF INTEREST**

There were no interests declared in respect of the agenda items.

327/16 **ITEM 4. MINUTES OF THE MEETING HELD ON 5 MAY 2016**

The minutes of the meeting held on 5 May 2016 were approved as a true and accurate record.

328/16 **ITEM 5. MATTERS ARISING/ACTION LOG**

There were no new matters arising.

Item 309/16 Mrs Owston highlighted that this query had related to the length of some episodes of sickness and noted that Workforce and OD were focusing on this area.

Item 105/16 Feedback on patient experience information included in the board report. This was now complete.

Item 258/16 Patient Story feedback from Healthwatch. Mr Keeling and Mrs Negus would discuss outside the meeting. This was now complete.

Item 632/15 The Board were advised that data had been collected on the impact of retirement on the workforce and that this would be part of the discussion at the board development session on workforce reporting.

329/16 **ITEM 6. CHIEF EXECUTIVE'S UPDATE AND ENVIRONMENTAL SCAN**

Healthcare Safety Investigation Branch The Chief Executive reported on the formation of a new body to support local investigations in to incidents and carry out nationally led investigations.

Junior Doctors The Board were advised that the results of the next ballot of junior doctors would be known on 6 July. Work to implement existing contract had been stalled and the Trust awaited further guidance.

Workforce Race Equality Standard submission The Board were advised that the Trust had made its submission. The return had highlighted the work still needed by the Trust.

Queens Speech The Board noted that the Queens speech had confirmed the continued commitment to 7 day working in the NHS. The Trust progress

towards this continued to be limited through lack of available resource.

Sustainability and Transformation Plan Work continued to complete the necessary work ahead of the 30 June submission deadline.

Annual Accounts The Board were advised that the Trust annual accounts had been audited and signed to plan and the Chief Executive expressed thanks on behalf of the Board to the Assistant Director of Finance and his team for their efforts to achieve this.

Executive Director Posts Adverts had been placed for the Director of Nursing and Director of Human Resources and OD posts. The Board were advised that Mr Jason Burn who had supported the Trust in the Interim role of Director of Finance would leave the Trust at the end of June. Interim support for the period following Mr Burn departure was being sought. The Board thanked Mr Burn for his work in achieving the 2015/16 financial control total.

330/16 **ITEM 7. Patient Experience**

Item 7.1 Patient Experience at Trust Board

Mrs Jennie Negus, Deputy Chief Nurse and Mr Ahmed Othman Orthopaedic Consultant joined the meeting for this item.

331/16 The Deputy Chief Nurse introduced the patient experience report.

332/16 The Deputy Chief Nurse advised that the Trust was alerting on the timeliness of responses made to complaints. The Board were advised that the Trust continued to make efforts to streamline the process for dealing with complaints. Additional resource had been given to complaints. The training provided to the complaints case managers was also being refined.

333/16 Mrs Owston noted the level of complaints which included issues with communication. Mrs Owston queried whether this was as a result of carers having greater awareness and expectations. The Deputy Chief Nurse advised that work continued now to explore ways to increase learning from the areas that were alerting in the complaints data. The Board were advised that greater detail was being provided to business units on the data and the information was being considered at the Patient Safety Committee and hospital management groups.

334/16 The Deputy Chief Executive asked whether Trust friends and family data could be compared nationally. The Deputy Chief Nurse agreed to include this in the report.

Action: Deputy Chief Nurse 5 July 2016

335/16 Mrs Ponder questioned whether those patients who responded to the friends and family stating that they would not recommend the Trust were followed up. The Deputy Chief Nurse advised that those patients would receive a follow on telephone call. The monthly data for this could be shared.

336/16 Mr Keeling advised that often the information which patients shared with Healthwatch was more detailed. Mr Keeling would discuss with the Deputy Chief Nurse ways in which this could be shared. The Chair stated that this would be a good way to ensure that the patient experience data could be triangulated.

337/16 Mr Darwin sought assurance that any systemic problems could be identified rather than just individual events. The Chair added that the findings should be discussed more widely, perhaps at locality forums.

338/16 Mr Othman Orthopaedic Consultant presented a patient story relating to orthopaedic care at Grantham Hospital. The Board discussed how the complaint could have been avoided and asked Mr Othman for actions that could be taken corporately to support better patient care. Mr Othman suggested that improvements to clinic planning could eradicate a number of issues.

The Medical Director advised that the Trust wide outpatient transformation project should lead to improvements.

339/16 **RESOLVED**

The Board agreed that

- more national benchmarking and a headline summary were needed.
- Details of evidence of learning should be included in the report.
- Further discussions around patient experience should be planned at a Board development session
- Wider discussion of data could be introduced at locality forums.

340/16 **Item 7.2 Quality Report**

The Medical Director introduced the Quality report. The Board noted that the HSMR and SHMI data had been transposed. HSMR for the Trust was less than 100. Sepsis assessments were down and had fallen behind improvement trajectories

341/16 The Medical Director advised that the falls with harm data was showing improvement. The Board were advised that it had been identified that previous data had been overstated.

342/16 The Medical Director advised that maternity metrics were now required. The Quality Governance Assurance Committee would consider this data in detail.

343/16 Mrs Ponder highlighted that Duty of Candour compliance was at 17% and asked for assurance that the Trust was meeting its duty. The Medical Director advised that it was clear that the conversations with patients were taking place, but it was recording of the formal correspondence which the Trust had to work

harder to meet.

344/16 **RESOLVED**

The Board noted the quality report.

345/16 **ITEM 8. STRATEGIC ITEMS**

Item 8.1 Lincolnshire Health and Care (LHAC)

The Chief Executive advised that the LHAC process was closely linked with the work to produce a Lincolnshire Sustainability and Transformation Plan (STP). The dates relating to the LHAC process continued to be pushed back. A further event to discuss options had been arranged for July. The latest date for the proposed public consultation was the end of 2016.

346/16 The Board were advised that the Trust Clinical Strategy Implementation Group continued to drive towards the Trust strategy, but the delays within the LHAC process meant that nothing had yet been agreed in the community.

Mr Keeling advised the Board that Healthwatch had written to LHAC highlighting their concerns and seeking assurances. He stated that they had a genuine concern that continued delays led to circulation of misinformation.

347/16 **RESOLVED**

The Board noted the update in respect of LHAC.

348/16 **Item 8.3 Sustainability and Transformation Plan Update**

The Deputy Chief Executive provided the Board with an update on the progress towards producing a joined up Lincolnshire Sustainability and Transformation Plan (STP).

349/16 The report to the Board had been authored for all Trust's to share with their Boards.

350/16 The Board was advised that since the last Board meeting it had been agreed that following the submission at the end of June 2016 there would be a period of three months for refinement of the document.

351/16 The Board were advised that an additional meeting of the Board may be required ahead of submission to ask for the Board to support the direction of travel. An event had been planned for June to allow Boards to consider the proposed plans.

The Deputy Chief Executive asked that provisional dates be planned to allow the Board to review the STP

Action: Trust Secretary 7 June 2016

352/16 **RESOLVED**

The Board noted the process and progress made to date in delivering a STP for Lincolnshire.

ITEM 9. GOVERNANCE

353/16 **Item 9.1 Integrated Performance Report**

The Chief Operating Officer presented the Integrated Performance Report to the Board for the period to 30 April 2016.

354/16 The Board was advised that performance for April was below the A&E 4 hour waiting time target at 80.54% but met the Trust STF trajectory. The Finance Service Improvement and Delivery Committee had discussed the considerable risks to achieving the trajectory going forward. Improvement plans were in place for all sites which were subject to monitoring.

355/16 The Board was advised that the Trust had achieved the required performance for referral to treatment for April, however there were risks to achievement going forward.

356/16 The Trust reported meeting 2 of the 9 cancer standards in March 2016. The Chief Operating Officer advised that the indications were that the Trust would not have met the STF trajectory for April. Work continued on the cancer improvement plans. Mr Keeling shared the concerns of Healthwatch over the cancer performance.

357/16 Dr Grassby asked if the Trust could quantify the effect of reduction in length of stay on other areas of performance. The Chief Operating Officer advised that the Trust still had high bed occupancy and high levels of admissions.

358/16 Mr Staniland stated that the Finance Service Improvement and Delivery Committee were monitoring performance closely and highlighted that the appointment of substantive staff continued to be a real issue in achieving the cancer performance. Mr Staniland reiterated the need for support from other partner organisations in Lincolnshire to reduce the number of patients attending A&E. The Chief Operating Officer advised that the contracting process for 2016/17 had made this issue the responsibility of the Lincolnshire wide health system.

The Chair questioned whether staffing could be resolved through collaboration with other Trusts. The Chief Operating Officer advised that whilst this was being explored other local Trusts were experiencing similar staffing issues.

359/16 **RESOLVED**

The Board noted the Trust Performance Report.

360/16 **Finance Performance Report**

The Interim Director of Finance and Corporate Affairs presented the Month 1 financial performance.

361/16 The Board was advised that the Trust had agreed a control total deficit of £47.9m for 2016/17 including the STF. The month 1 position was a deficit of £4.0m against a planned deficit of £4.1m. The Board were advised that contingency of £340,000 had been released to offset the estimated effect of the Grantham fire, the junior doctors strike.

362/16 The Trust has not yet received formal confirmation of the CRL and EFL for 2016/17.

363/16 Mr Hayward asked for assurance on efficiency plans. Mr Staniland responded that the Finance Service Improvement and Delivery Committee had recognised the challenge made to the efficiency plans so far but asked for further assurance for the next meeting. The Interim Director of Finance and Corporate Affairs stated that this would be presented to the FSID meeting in June.

364/16 **RESOLVED**

The Board noted the Month 1 financial position.

365/16 **Human Resources Performance Report**

The Director of Human Resources and Organisational Development presented the Human Resources Performance Report.

366/16 The Board was advised that the Trust had seen an improvement in staff turnover and the sickness rate had also fallen.

367/16 The report highlighted that appraisals were still an issue and hotspots were being targeted and core learning remained static.

368/16 A paper on the international recruitment process was planned for the FSID Committee in July.

369/16 The Director of HR and OD advised that analysis of exit data had highlighted some areas where leavers could have been retained by the organisation.

370/16 **RESOLVED**

The Board noted the Human Resources Performance Report.

Item 9.1 Monthly Nurse Staffing

371/16

The Director of Nursing presented the monthly nursing and midwifery staffing levels for April 2016. The report detailed the monthly review of planned and actual staffing in inpatient areas and was publicly available on the NHS Choices website.

372/16

The report detailed that in April the Trust had an average fill rate of 90.7% for registered nurses and 103% for care staff. Fill rates for day and night had improved.

The Board were advised that the Director of Nursing was reviewing the use of red flags and how they were used operationally.

373/16

The Board were advised that the revised report allowed more detail by site to be provided and could be used operationally. The Chief Operating Officer questioned what actions were taken if a hotspot area was identified. The Director of Nursing stated that those hotspot wards would be the subject of a risk summit, however it was also important that clinical judgement was maintained about actions needed.

374/16

The Director of Nursing advised that in some areas non registered staff would be used to support vacancies for example where there were enhanced care needs for some patients.

The Chair questioned whether future projections and ambitions for staffing could be included within the report. The Director of Nursing advised that the report continued to evolve.

RESOLVED

The Trust Board noted the nurse staffing monthly report.

375/16

Item 9.3 Confirmation of 2016/17 Budget

The Interim Director of Finance and Corporate Affairs reported to the Board the final budget for 2016/17. The budget was within the control total of £47.9m as previously agreed by the Board.

376/16

The Chief Executive advised that business units had been fully engaged with the process and had signed up to the budget.

Mr Hayward asked for assurance on delivering the full capital programme. The Deputy Chief Executive stated that the planning process had been improved and that FSID would receive regular reports.

RESOLVED

The Trust Board agreed the 2016/17 budget.

377/16

Item 9.4 Quality Governance Committee Assurance Report

Mrs Owston reported the Quality Governance Committee Assurance Report from the meeting held on 31 May 2016.

Mrs Owston highlighted delays in the production of the Quality Account which required submission by 30 June. The Board were asked to agree that the Mrs Owston could sign off the Quality Account if the submission did not meet the Quality Governance Committee timetable. This was agreed. The Board asked that the process commence earlier in 2016/17.

378/16 **RESOLVED**

The Trust Board noted the Quality Governance Committee Assurance Report and agreed that approval of the Quality Account could be given by Mrs Owston on behalf of the committee.

379/16 **Item 9.5 Finance Performance and Investment Assurance Committee**

Mr Staniland presented the Finance, Performance and Investment Committee Assurance Report from the meeting held on 31 May 2016.

380/16 Mr Staniland reiterated the concerns raised by the Committee in terms of assurance around the efficiency programme, the level of contingency reserves which had been committed and the performance trajectories for cancer.

381/16 **RESOLVED**

The Trust Board noted the Finance, Performance and Investment Committee Assurance Report.

382/16 **Item 9.6 Audit Committee Assurance Report**

Mr Hayward presented the Audit Committee Assurance Report from the meeting held on 31 May 2016.

383/16 The Board noted the approval of the annual accounts.

384/16 **RESOLVED**

The Trust Board noted the Audit Committee Assurance Report.

Item 9.7 Workforce and OD Committee Assurance Report

385/16 Mrs Owston reported the Workforce and OD Committee Assurance Report from the meeting held on 10 May 2016.

The Board were advised of the health and wellbeing strategy being under resourced and a request was made for support to develop further. The Committee continued to be hampered with attendance issues. This would be picked up by the Chair and Trust Secretary.

Action: Trust Secretary 5 July 2016

386/16 **Item 9.8 Board Committee Terms of Reference**

The terms of reference for all Board committees were presented for ratification. Mr Hayward asked for further elements to be included within the Audit Committee terms of reference. This would be picked up by the Committee when it met in July.

The Chair recommended that it would be beneficial for all committee chairs to meet to review the read across in responsibilities.

RESOLVED

The terms of reference would be brought back following a meeting of committee chairs.

Item 9.9 Development of Risk Management

387/16

The Deputy Chief Executive introduced a report to update the Board on the plans to improve and embed strategic risk management in the Trust.

The Board were advised that as the process progressed a further Board development session would be held to consider the Board approach to risk appetite.

The Chair highlighted that it was essential that the process included plans for if a major risk was identified which would not be able to flow through the usual system and how this would be escalated.

The plans were for a strategic risk committee which would ensure that the Audit Committee received adequate assurance on risk.

RESOLVED

The Board supported the plans and noted progress.

Item 9.10 Staff Awards Proposal 2016/17

388/16

The Associate Director of Communications presented a proposal for the 2016/17 staff awards.

The proposals included amended categories, increased attendees and an invitation to previous winners to attend.

RESOLVED

The Board supported the revised categories and an increased attendance.

389/16 **Item 9.11 Risk to escalate to Risk Register**

The Board had no further risks to escalate to the risk register.

390/16 **ITEM 10 ITEMS FOR MEETING 7 June 2016**

Members Council

391/16 **ITEM 11. ANY OTHER BUSINESS**

There were no further items of business.

392/16 **ITEM 12. DATE, VENUE AND TIME OF NEXT MEETING**

The next meeting will take place on Tuesday 5 July 2016 in the Boardroom, Lincoln County Hospital.

EXCLUSION OF THE PUBLIC

In accordance with Standing Order 3:1 and Section 1(2) of the Public Bodies (Admission to Meetings) Act 1960: To resolve that representatives of the press and other members of the public be excluded from this part of the meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.

Signed as a true record _____ **Chairman**

Date _____

Attendance

Voting Members	6 Oct 2015	3 Nov 2015	1 Dec 2015	2 Feb 2016	1 Mar 2016	5 April 2016	5 May 2016	7 June 2016
Prof Dean Fathers						X	X	X
Ron Buchanan	X	X	X	X	X			
Dr Paul Grassby	A	X	X	X	X	A	X	X
Geoff Hayward	X	X	X	X	X	X	A	X
Penny Owston	X	X	X	X	X	A	X	X
Gill Ponder	X	X	X	X	A	X	X	X
Kate Truscott	X	X	X	X	X	X	X	A
Tim Staniland	X	X	X	X	X	X	X	X
Jan Sobieraj				X	X	X	X	X
Dr Suneil Kapadia	X	X	X	X	X	X	X	X
David Pratt	A	A	A	A	A	A	A	A
Peter Hollinshead/ Jason Burn (Interim Directors of Finance)		X	X	X	X	X	X	X
Michelle Rhodes	X	X	A	X	X	A	X	X
Pauleen Pratt	A	X	X					
Kevin Turner	X	X	X	X	A	X	X	X

X In attendance
A Apologies given