

United Lincolnshire Hospitals 
NHS Trust

Minutes of the Public Trust Board Meeting

Held on 1 November 2016

Committee Room 1, Pilgrim Hospital, Boston.

Present

Voting Members

Professor Dean Fathers, Chair
Mr John Barber, Interim Director of
Finance and Corporate Affairs
Mrs Sarah Dunnett, Non- Executive
Director
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
Mrs Kate Truscott, Non-Executive Director
Mr Kevin Turner, Deputy Chief Executive

Non Voting Members

Mr Mark Brassington, Chief Operating
Officer
Mr Martin Rayson, Director of Human
Resources and Organisational Development

In Attendance

Miss Lucy Ettridge, Associate Director of
Communications
Mr Preston Keeling, Healthwatch
Mrs Jennie Negus, Deputy Chief Nurse
(Pilgrim)
Mrs Sarah Ward, Lead Cancer Nurse
Mrs Jayne Warner, Trust Secretary
(minutes)

Apologies

Mr Paul Boocock, Director of Estates and
Facilities

733/16 **ITEM 1. INTRODUCTION**

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

Meetings with local MPs The Chair advised that he had met with Matt Warman MP, Sir Edward Leigh MP and Nick Boles MP. He wished Mr Boles a speedy recovery from his recent illness.

Fighting for Grantham Hospital The Chair commented that he had met with representatives for the group and had a really productive discussion. He thanked Councillor Wootten for his comments and considerations. He thanked the group for acknowledging the feelings of staff in the Trust and for

the dignity and respect with which they had conducted themselves.

Internal Visits The Chairman had attended a meeting with the Grantham MAC, the opening of the Grantham Energy Centre, visited Burton Ward, the chaplaincy service and an induction session for new starters.

734/16 **ITEM 2. APOLOGIES FOR ABSENCE RECEIVED**

Apologies were received from Mr Paul Boocock Director of Estates and Facilities.

735/16 **ITEM 3. DECLARATIONS OF INTEREST**

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

736/16 **ITEM 4. MINUTES OF THE MEETING HELD ON 4 OCTOBER 2016**

The minutes of the meeting held on 4 October 2016 were approved as a true and accurate record with the addition of the word agency to minute 719/16 which read "There had been difficulty recruiting nursing staff so the Trust had started to block book agency staff for this area".

737/16 **ITEM 5. MATTERS ARISING/ACTION LOG**

There were no new matters arising.

738/16 **ITEM 6. CHIEF EXECUTIVE'S UPDATE AND ENVIRONMENTAL SCAN**

Single Oversight Framework The Chief Executive advised that the Single Oversight Framework had been introduced from the 1 October 2016 with Trusts being assessed against their potential support needs. The Trust had been placed in the level 3 category out of 4 categories. The Chief Executive advised that it was unclear at this stage what the support provided would look like. The Trust had already agreed a financial improvement plan.

Cold Weather Plan The Board noted that the NHSI and NHSE plan had been published. Local plans were in place for Lincolnshire.

GMC East Midlands Review of Training The Board were advised that the GMC would visit the Trust during November. It was anticipated that the review would be testing for the Trust.

Local CCGs The Board noted that the CCGs locally were under significant financial pressure and the Trust continued to work with them. At the clinical leadership meeting there had been discussions on reviewing treatments which could not be shown to have any value for the patient.

CQC Inspection The Board were informed that the CQC had completed their return visits to Grantham A&E and Lincoln Surgical Departments. The Trust was still awaiting the feedback from the visits.

IT Incident The Chief Operating Officer advised the Board that the Trust had been impacted following a large scale cyber attack on a neighbouring Trust.

The Trust shared four clinical systems with the affected Trust and made the decision to protect the integrity of the Trust servers to close the links. There were four areas where this impacted on the Trust. Ordering and processing of tests, ability to view historical tests, blood transfusions and e-observations were not able to continue. The Trust had put business continuity plans in place. The impact for patients had been delays in all three A&E departments and outpatients, a number of non urgent operations were cancelled for those requiring blood transfusions. The Trust would continue with daily briefings and were in contact with the affected Trust. The Trust had communicated with staff and patients and had reminded staff of the exposure to risk from cyber attack.

739/16 **ITEM 7. Emergency Care Update**

The Medical Director presented a report updating the Trust Board on the provision of emergency care at the Trust hospitals.

740/16 The Medical Director advised that since the 17 August the Trust had received 16 expressions of interest in the middle grade vacancies but this had not resulted in any appointments. A further two middle grade doctors were leaving the Trust. The Trust continued with the intent to achieve 21 middle grades in post by February. The Board were advised that this was predicated on the successful completion of the external employment checks.

741/16 The Board were advised that the contribution that the staff from Grantham had made to supporting the Lincoln A&E department was significant.

742/16 The Board were advised that admission data overall remained unchanged. The Medical Director highlighted that the Trust were considering issues raised by the ambulance service. The data provided by them showed no change overall but a decrease in the number of conveyances to Grantham. Handover times had been shown to have increased at Lincoln and Pilgrim however it wasn't possible to demonstrate that this was a result of the Grantham overnight closure.

743/16 The Board were informed that the Clinical Management Board had considered the latest position at their meeting and recommended that the closure should be extended for a further three months with monthly updates during that period.

744/16 The Chair stated that the paper presented the Board members with four options to consider

- To reopen the A&E department at Grantham 24hours per day
- To extend the opening hours from the current arrangements
- To continue with the existing arrangements
- To reduce the hours further from the existing arrangements

745/16 Mrs Truscott questioned whether nurse staffing numbers had fallen for urgent care. The Director of Nursing advised that the Trust had vacancies but that the Trust always attracted applicants when nursing posts were advertised for A&E departments.

- 746/16 Mrs Owston stated that whilst Board members were keen to see the Grantham A&E department open again 24 hours a day, the paper demonstrated why it was still not possible to take this decision.
- 747/16 The Chair posed to the Board the challenge which had been made to him by Councillor Wootten. What would it take for the A&E department to be opened again. The Medical Director advised that the three sites could not all be safely staffed overnight with the existing staff. The Director of Nursing added that the sites were not able to obtain the level of cover even with the use of locums and it was important that long term certainty of cover was achieved. The Chief Operating Officer stated that the Trust had not turned down agency staff despite the requirement for the Trust to meet the agency cap.
- 748/16 Mrs Ponder noted that the re-opening was predicated on when additional staff could be put in post and asked whether there was the prospect of any further staff beyond 1 February 2017. The Medical Director advised that there were no further staff but that the Trust continued to pursue those which it had already identified and efforts to recruit continued.
- 749/16 The Board considered how the Trust could support the efforts to attract applicants. It was noted that the benefits of working in Lincolnshire needed to be highlighted and that the Trust had shared with MPs the issues which were encountered when attempting to recruit staff. The Trust had been active recruiting at the Royal College of Emergency Medicine and also the British Medical Journal Fair and were following up on expressions of interest.
- 750/16 Mr Staniland asked for assurance on the quality impact of the changes and that this data would be analysed. The Board were informed that the ambulance service were reporting that some patients were declining transport when they were advised that the ambulance would not take them to Grantham Hospital.
- 751/16 The Medical Director responded that the Trust recognised that Grantham residents being taken to hospital in Lincoln was not a good solution, but that it was the safest option which the Trust had available. In response to Mr Staniland the Medical Director advised that Dr Foster was tracking several GP surgeries for patient information from August. The Trust continued to review the risk management system for any issues which were flagging as well as the complaints system and they continued to meet with A&E staff.
- 752/16 The Board were advised that the procedure had been changed for when children were present in the A&E after it had closed. When this occurred the consultant would stay with the patient until transfer occurred.
- 753/16 Mr Keeling observed that Healthwatch understood the information on which the Trust was basing decisions and continued to share the info with members.
- 754/16 The Deputy Chief Executive commented that the winter period was referred to in the paper and that the review of the data needed to take in to account that all A&E departments become busier over the winter months.

- 755/16 The Chair highlighted to the Board considerations which had been raised by the Fighting for Grantham group. The group had highlighted
- transport issues between Grantham and Lincoln using Lindum Hill during the winter months
 - The equality impact for a service user with two disabled children when one required hospital treatment
 - The weaknesses in the public transport structure
 - Long waits for GP appointments
- 756/16 The Board noted the concerns whilst recognising that these issues would need to be picked up with the relevant authorities.
- 757/16 The Board noted that concerns had been raised by the Police and Crime Commissioner and the Trust would be meeting him in November.
- 758/16 Non Executives commented that feedback from locality forums suggested that there may not be enough awareness of the other local services available outside the A&E service.
- 759/16 Mrs Owston questioned whether the service provided at Grantham could be extended to 08:00 to 20:00. The Board debated this but concluded that an extension would reduce the availability to safely staff the two other A&E departments impacting on rota pattern.
- 760/16 The Chief Executive highlighted that the Trust continued to operate with risks at both the Lincoln and Pilgrim A&E departments. Performance in A&E was an issue which resulted in risk for patients attending. The risks were being managed by the Trust as well as they could be and the current position was the best which could be achieved with the available staff.
- 761/16 The Chief Executive stated that NHS Improvement was encouraging the Trust not to make further changes during the busiest winter period and to provide certainty about the services provided for staff and the public. The Chief Executive reiterated the Trust's commitment to work to reopen the department. The Trust would review the position on a monthly basis during this period.

RESOLVED

- 762/16 The Board agreed that
- Further reduction in A&E opening hours was not being considered
 - For the safety of the service provided the Trust could not reopen the A&E 24 hours per day.
 - Staffing levels would not allow the extension of the opening hours beyond those operating
 - Opening hours would remain 09:00 to 18:30 until the end of February 2017.

763/16 **ITEM 8. Patient Experience**

Item 8.1 Patient Experience at Trust Board

Mrs Jennie Negus, Deputy Chief Nurse joined the meeting for this item. The Deputy Chief Nurse was joined by Mrs Sarah Ward, Macmillan Lead Cancer Nurse.

764/16 The Board heard the patient story of Mrs Barbara Jones. Mrs Jones described in a short film her experiences whilst a patient being treated for cancer in the Trust and how small changes could have led to a much better experience. The Board asked for their thanks to be passed to Mrs Jones for taking the time to support the Trust in improving patient experience and her commitment to work with the Trust going forward. Mrs Ward described how the experiences described were being used as a learning tool for staff.

765/16 The Deputy Chief Nurse introduced the patient experience report.

766/16 The Deputy Chief Nurse advised the Board that the backlog of overdue complaints had been cleared. The Trust was now taking forward national work to trial a complainant survey. This would allow the Trust to make contact after the final response and would allow for benchmarking and analysis.

767/16 The Board were advised that the Trust had seen an increase in contacts through the PALS service.

768/16 Mrs Dunnett noted that the Trust was behind on answering complaints within the agreed targets. The Deputy Chief Nurse advised that the Trust was aiming to achieve 80% during October. Mrs Dunnett asked how assurance was sought on the quality of the complaints responses. The Deputy Chief Nurse explained that all complaints were signed off at Executive Director level. Complaints which were returned for further work were reviewed. There were now negligible numbers which required a second response.

RESOLVED

769/16 The Board noted the patient experience report.

770/16 **Item 8.2 Volunteers Strategy**

The Deputy Chief Nurse presented a draft volunteers strategy setting out the vision for the Trust voluntary services for endorsement.

771/16 Mr Keeling commented that he was delighted to see the Trust taking a serious approach to volunteers.

772/16 Mrs Dunnett asked for assurance on the resources being available to support the plans. The Deputy Chief Nurse stated that the resource implications would become clearer as the work progressed but plans were for a volunteer hub on each site. Mrs Dunnett volunteered to become the Non Executive Champion for volunteers.

RESOLVED

773/16 The Trust Board endorsed the strategy for volunteers.

774/16 Item 8.3 Quality Report

The Medical Director introduced the Quality Report.

775/16 The Board were advised that the validated HSMR figure for 2015/16 would be 101. Most recent data for the Trust is showing 88.

776/16 The Medical Director reported that Sepsis levels had been normal for the last three months

777/16 Falls with harm were lower but now appeared static.

778/16 Medication errors at Louth were no longer elevated.

779/16 Mrs Dunnett stated that Pilgrim appeared to be an outlier in some of the quality areas. The Medical Director confirmed that this was being reviewed and would be considered at the next Quality Governance Committee.

RESOLVED

780/16 The Board noted the quality report.

781/16 ITEM 9. STRATEGIC ITEMS

Item 9.1 Lincolnshire Health and Care (LHAC)

The Chief Executive shared the vision document with the Board. The documents had been seen before but provided a formal record of the framework.

782/16 Mr Keeling observed that the documents whilst carefully worded were open to misinterpretation. The Board were advised that there was still no public bus service on to the Spalding hospital site and pressure continued to be applied.

783/16 Mrs Truscott raised the issue of neighbourhood teams. The Chief Executive observed that the principle was sound but there was still a need for detailed evaluation and assurance that patients could access the service.

RESOLVED

784/16 The Board noted the update in respect of LHAC.

Item 9.2 Two Year Planning Process

785/16 The Interim Director of Finance and Corporate Affairs introduced a report detailing the development of the Trust two year operational plan for 2017-2019.

786/16 The Board were advised that the update was being provided as the Trust would be required to submit a draft plan ahead of the December Board by the

24 November 2016. The Board agreed that there Board Development session on the 15 November would be used to consider the draft in detail. The Board were informed that the Trust had received the offer for the Sustainability and Transformation Funding for the next two years and the Trusts expected control total from NHS Improvement. The Board would be asked to sign up to these.

787/16 The Interim Director of Finance and Corporate Affairs advised that the control total was deliverable based on the financial plan however the Board were advised that contract offers from the CCG were not yet available. The Board were advised that the CCGs financial position was strained.

788/16 Mr Hayward expressed concern that the Board should not sign up to any control total which it did not consider it would achieve. The Interim Director of Finance advised that the risk would be in the scale of the efficiency savings. The Board also acknowledged that as a Trust with one of the highest financial deficits it would need to take responsibility and action.

789/16 The Deputy Chief Executive stated that there was an expectation from the Broader system that the Trust would need to make improvements but the limiting factor was contract income. It was anticipated that more certainty around this would be able to be provided by the session on the 15th.

RESOLVED

790/16

The Board agreed

- Acceptance of the STF and control totals for 2017-2019
- That it would give consideration of the plan at the Board Development session and authorise it for submission with it being brought back for endorsement at the meeting in December.

791/16

Item 10.1 Integrated Performance Report

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

792/16

The Board noted the Trust performance against the four priority deliverables within the Sustainable Transformation Fund.

793/16

The Board were advised that the Trust had seen further deterioration against the RTT standard. The Trust had recovery plans in place for eight specialties which were subject to confirm and challenge from the CCGs before submission to NHSI and NHSE. The Board were advised that recovery was reliant on treating and completing 1000 additional pathways.

794/16

The Trust continued to experience significant pressure within urgent care. Performance against the A&E four hour wait was at 78.4% Grantham was regularly achieving the standard. The Pilgrim site had seen improved performance but was still challenged. Lincoln remained in a challenged position.

- 795/16 The Trust did not achieve the 6 week diagnostic standard for September. The Trust continued to see delays in ECGs. Plans were in place which would recover performance for diagnostics by November.
- 796/16 The Trust had only achieved 4 of the 9 cancer standards for August. It was planning to achieve 6 of the 9 standards by September, but at that stage would still not be able to meet the cancer 62 day standard. The cancer plans were being considered in an Executive Team meeting.
- 797/16 The Director of Nursing highlighted an error on the report. Nurse staffing levels should still be RED the report incorrectly showed them as GREEN.
- 798/16 Mrs Dunnett noted the report did not highlight delayed transfers of care and questioned whether the Trust had an issue. The Director of Operations advised that this data was being worked through.
- 799/16 Mrs Truscott expressed concern at cancer performance and asked for further assurance. The Director of Operations advised that the signs were that the plans were bringing improvement. The Deputy Chief Executive advised that EMRAD system was now stable and the back log was now being addressed.

RESOLVED

- 800/16 The Board noted the Trust Performance Report.
- 801/16 **Finance Performance Report**
- The Interim Director of Finance and Corporate Affairs presented the Month 6 financial performance.
- 802/16 The Board was advised that the Trust had agreed a control total deficit of £47.9m for 2016/17 including the STF. The month 6 position was slightly worse than plan with a year to date deficit of £25.7m.
- 803/16 The Board was advised that the Trust was finding it difficult to maintain the control total as a result of underperformance on income, behind on efficiency programme and delivery of the Q3 performance to deliver the STF.
- 804/16 The Board were given assurance as to how the risks were being mitigated. The Trust considered it could make a case for mitigation in respect of A&E and RTT. This was linked to referrals, demand the fire at Grantham and the junior doctors strikes. The Trust would continue to drive the efficiency programme working with RSM but the position was challenging.
- 805/16 The Trust was behind on the delivery of the capital programme as there had been a wait for the full EFL allocation. This was now resolved.

RESOLVED

806/16 The Board noted the Month 6 financial position.

807/16 **Human Resources Performance Report**

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

808/16 The Board were advised that the new chair of the Workforce and OD Assurance Committee would be holding a workshop in November to focus on the committee work plan and terms of reference. The Committee would then consider the performance data being presented.

809/16 The Board were advised of new indicators being presented and the work being completed to get more information from those leaving the organisation.

810/16 Sickness levels continued to be targeted. The take up of flu jabs was good.

811/16 Mrs Ponder noted that the Trust appeared to lose a number of nurses during their first year. The Director of Human Resources and OD advised that this was a concern and that exit interviews were not completed, so it was not always possible to get further information.

812/16 Mr Hayward questioned the adequacy of budget setting as establishments were down but budgets were overspent. The Interim Director of Human Resources and OD would pick this up outside the meeting.

RESOLVED

813/16 The Board noted the performance report.

814/16 **Item 10.2 Nurse Staffing Monthly Report**

The Director of Nursing presented the nursing workforce report.

815/16 The fill rates across the Trust remained static. The Board were alerted to three wards with lower fill rates AMU, 5B and the Bostonian. It appeared that this affected the quality indicators for those areas.

816/16 The Board were advised that the Trust had been successful in its bid to become a pilot site for associate nurses. The Trust was also offering incentive packages for bank working.

817/16 Mrs Truscott confirmed that the Workforce and OD Committee had sought assurance on international recruitment exercises and it was considered necessary to reforecast the timeline for the arrival of the nursing staff from the Philippines.

RESOLVED

818/16 The Board noted the monthly nurse staffing report.

- 819/16 **Item 10.3 Strengthening Clinical Leadership**
- The Chief Executive presented a paper outlining the changes to the business management arrangements for the Trust to strengthen clinical leadership.
- 820/16 The paper described the role of the Clinical Management Board, Clinical Executive Committee and 2021 Programme Board.
- RESOLVED**
- 821/16 The Board noted the revised arrangements.
- 822/16 **Item 10.4 Quality Governance Committee Assurance Report**
- Mrs Owston reported the Quality Governance Committee Assurance Report from the meeting held on 26 October 2016.
- 823/16 The Board were advised that an offer had been made to appoint a microbiologist. The Trust was also recruiting two sepsis nurses to support improvements.
- 824/16 The Committee had asked for further assurances relating to water quality.
- 825/16 The Committee had considered the risk register and whilst recognising the work done were still concerned with the information being presented.
- 826/16 **RESOLVED**
- The Trust Board noted the Quality Governance Committee Assurance Report.
- 827/16 **Item 10.5 Finance, Service Improvement and Delivery Committee**
- Mr Staniland presented the Finance, Service Improvement and Delivery Committee Assurance Report from the meeting held on 26 October 2016.
- 828/16 The Committee had escalated concerns relating to the delays in consultation on the STP and the resulting impact on staff and planning. The Board were alerted to the continued failure to deliver access targets. The Committee had asked for further assurance in respect of estates statutory compliance.
- 829/16 **RESOLVED**
- The Trust Board noted the Finance, Service Improvement and Delivery Committee Assurance Report.
- 830/16 **Item 10.6 Workforce and OD Assurance Committee**
- Mrs Truscott presented the Workforce and OD Committee Assurance Report

from the meeting held on 11 October 2016.

831/16 The Committee had requested further assurances in relation to overseas recruitment.

832/16 The Committee had highlighted the representation on the Committee.

833/16 The Committee had agreed to focus on consideration of the detail of the workforce plans at future meetings.

RESOLVED

834/16 The Board noted the Workforce and OD Committee Assurance report.

835/16 **Item 10.7 Audit Committee**

Mr Hayward presented the Audit Committee Assurance Report from the meeting held on 13 October 2016.

836/16 The Committee had considered in detail cyber security with external experts and internal teams.

837/16 The Committee had been updated on the continuing progress with Risk Management.

838/16 Consideration had been given to areas for inclusion in the 2017/18 internal audit plan and support was requested from the Executive Team on tightening the response to outstanding audit recommendations.

RESOLVED

839/16 The Board noted the report from the Audit Committee.

840/16 **Item 10.8 Risk to escalate to Risk Register**

There were no further risks to escalate from the assurance committees. The Board recognised that the validation of the corporate risks continued. The Board asked the Committees to consider whether the Grantham A&E issues should be escalated from the corporative to the strategic risk registers.

841/16 Board members asked if the ICT issues which had been discussed during the meeting featured on the corporate risk register. The Deputy Chief Executive confirmed this.

RESOLVED

842/16 The Board considered the latest strategic risk register and BAF.

843/16 **Item 10.9 Trust Innovation**

The Associate Director of Communications shared with the Board the State of the Art Energy Centre at Grantham.

844/16 The Board placed on record support for the innovative scheme and congratulated those involved.

RESOLVED

845/16 The Board celebrated the success of the new centre.

ITEM 11 For Approval

846/16 The Director of Human Resources and OD presented the armed forces covenant for approval.

847/16 The Board supported the initiative further work would be completed to understand the implications and actions.

848/16 **ITEM 12. ANY OTHER BUSINESS**

There were no further items of business.

849/16 **ITEM 13. DATE, VENUE AND TIME OF NEXT MEETING**

The next meeting will take place on Tuesday 6 December 2016 in the Training Room 1 Grantham Hospital.

850/16 **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	1 Mar 2016	5 April 2016	5 May 2016	7 June 2016	5 July 2016	2 Aug 2016	6 Sept 2016	4 Oct 2016	1 Nov 2016
Prof Dean Fathers		X	X	X	X	X	X	X	X
Dr Paul Grassby	X	A	X	X	X	A	X	X	X
Geoff Hayward	X	X	A	X	X	X	A	X	X
Penny Owston	X	A	X	X	X	A	X	X	X
Gill Ponder	A	X	X	X	X	X	X	X	X
Kate Truscott	X	X	X	A	X	X	X	X	X
Tim Staniland	X	X	X	X	X	X	X	X	X
Jan Sobieraj	X	X	X	X	X	X	X	X	X
Dr Suneil Kapadia	X	X	X	X	X	X	A	X	X
David Pratt	A	A	A	A	A	A	A	A	A
Peter Hollinshead/ Jason Burn/ John Barber (Interim Directors of Finance)	X	X	X	X	X	X	X	X	X
Michelle Rhodes	X	A	X	X	X	A	X	X	X
Kevin Turner	A	X	X	X	X	A	X	X	X
Sarah Dunnett,						X	X	X	X

X In attendance

A Apologies given