

United Lincolnshire Hospitals 
NHS Trust

Minutes of the Public Trust Board Meeting

Held on 7 February 2017

Trust Boardroom, Lincoln County Hospital.

Present

Voting Members

Professor Dean Fathers, Chair
Mrs Sarah Dunnett, Non- Executive Director
Dr Paul Grassby, Non-Executive Director
Mr Geoff Hayward, Non-Executive Director
Mr Peter Hollinshead, Interim Director of Finance and Corporate Affairs
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 Jayne Warner, Trust Secretary (minutes)
Mrs Blanche Lentz, General Manager Lincolnshire, East Midlands Ambulance Service NHS Trust (item 8 only)
Mrs Sarah Ward Macmillan Lead Cancer Nurse (Item 9 only)
Mrs Marie Beck Matron for Cancer Services (Item 9 only)

Apologies

Mr Paul Boocock, Director of Estates and Facilities

001/17 **ITEM 1. INTRODUCTION**

The Chair welcomed the members of the public to the meeting. The Chair also welcomed Mrs Blanche Lentz representing East Midlands Ambulance Service NHS Trust to the meeting.

002/17 The Chair highlighted to the Board the stakeholder events which he had attended since the last meeting. Including meetings with the new Minister of

State for Health Philip Dunne and the Chairs of NHS Improvement and the Care Quality Commission.

003/17 The Chair informed the Board that he had observed the shortlisting process for the staff awards and had been delighted and heartened by the volume and quality of nominations for the 2017 awards.

004/17 **ITEM 2. QUESTIONS**

The meeting paused for questions from members of the public relating to the agenda.

005/17 **ITEM 3. APOLOGIES FOR ABSENCE RECEIVED**

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

006/17 **ITEM 4. DECLARATIONS OF INTEREST**

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

007/17 **ITEM 5. MINUTES OF THE MEETING HELD ON 6 DECEMBER 2016**

The minutes of the meeting held on 6 December 2016 were approved as a true and accurate record with the exception of minute 867/16. This should have read Lincoln Emergency Department and 868/16 which had been incorrectly numbered.

008/17 **ITEM 6. MATTERS ARISING/ACTION LOG**

There were no new matters arising.

Minute 877/16 – This was to be considered through Quality Governance Committee.

009/17 **ITEM 7. CHIEF EXECUTIVE'S UPDATE AND ENVIRONMENTAL SCAN**

Brexit Update The Chief Executive highlighted that there were some developments nationally which may start to impact on the Trust. The Trust relied heavily on staff members from the EU. Particularly the potential new rules for immigration. The impact in respect of procurement policy. Research and Innovation and how to access EU funding and access to EU medicines and devices.

Winter Pressures The Chief Executive highlighted the continued impact that winter pressures were having across the NHS and that NHS Improvement were understanding of the issues in primary and social care which were impacting on the Trust.

Sustainability and Transformation Plans STPs had been reaffirmed as the model for healthcare going forward. NHS Improvement were re-orientating the way they work around the STPs.

Nursing Bursaries The Board were advised that the media were suggesting that the removal of nursing bursaries would have a negative impact on attracting student nurses. This could result in additional problems for the Trust.

Nurse Associates The Trust was part of a national pilot for nurse associates. It was confirmed that the NMC will be the regulator for the role.

Centre for Rural Care Symposium The first meeting had been held with great support. Focus on seeking better care for dispersed populations.

010/17 **ITEM 8. Emergency Care Update**

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

011/17 The Board were presented with activity performance and staffing including actions being taken to make substantive appointments to vacant posts.

The Trust continued to work with the LMC and was continuing to place adverts for the posts. The Trust had made one substantive appointment of a middle grade at Lincoln and one at Boston. The number of consultants had increased to 15 but the Trust had received a further consultant resignation.

012/17 The Board noted the significant role played by trainees in the departments. The Trust currently had 10 trainees in the department at Lincoln, 8 of these from the deanery and 2 funded by the Trust. The Board were advised that the deanery posts would drop to 5 and the Trust would need to fund the additional posts.

The number of middle grades was expected to improve to 18.6 by March.

013/17 The Medical Director reported the impact of the reduced opening hours. Attendances across the A&E departments had been unchanged since August 2016. Attendances from Grantham and Sleaford had increased by 8 during the period.

014/17 Admissions had increased from October to December 2016 which was considered to be reflective of the time of year. The overall admissions from the Grantham and Sleaford areas had remained unchanged.

015/17 The Board noted that there had been an increase in out of hours discharges to NG postcodes since the changes were made in August.

016/17 The Board were advised that there had been no apparent impact on length of stay or HSMR.

017/17 The Board were advised that following the introduction of the reduced hours the staff data and the Friends and Family Test data had improved.

018/17 The Board noted that the data from the East Midlands Ambulance Service NHS Trust was included within the report and thanked Mrs Lentz for agreeing to attend for the discussions on this item. The report acknowledged the

increase in the average ambulance handover.

- 019/17 The Medical Director advised the Trust Board that LCHS had provided a statement relating to the use of the Out of Hours service since the changes. Attendances remain down; this service could previously be accessed through the A&E department.
- 020/17 Lincolnshire Police had also provided a statement recording additional hours spent at hospitals other than Grantham, but this could not be broken down to travelling hours.
- 021/17 The Medical Director advised that the A&E staff continued to support getting the department reopen but recognised the staffing issues.
- 022/17 The latest position had been taken for discussion at the clinical management board. The conclusion from the clinicians at this meeting was that it was not possible to reopen the department at Grantham 24 hours a day. There were also concerns about extending the opening hour for 12 hours a day. The group were supportive of an increase of one hour each day. This would mean that the department would open from 8am. This additional hour was significant in relation to the concerns raised about the access to other services during the 8am to 9am period. The extension, if agreed, could commence from the end of March. With a review in early March to confirm that there had been no change in circumstance which would prevent the increase.
- 023/17 Mrs Ponder questioned the technology being used for interviews if this resulted in missed opportunities. The Medical Director advised that it had not been an issue with technology.
- 024/17 Mrs Ponder asked when the Trust were likely to see more appointment resulting from the regular rolling advert placed for staff. The Medical Director confirmed that the posts continued to be advertised but that the level of appointments made were beyond the control of the Trust. Some applicants were failing the English language test.
- 025/17 Mr Keeling commented that it was possible that some Grantham patients were accessing services in Nottinghamshire. The Chief Operating Officer responded that Nottingham Trusts were reporting 2 additional attendances per day.
- 026/17 Mrs Owston commented that the staff from A&E and consultant staff saw the optimal opening hours as 8am until 8pm and questioned what it would take to achieve an extension to these hours. The Medical Director advised that this had been debated and discussed. Whilst it was acknowledged that opening until 8pm would be desirable it would mean that the department would need to be staffed until 11pm to allow all patients to be cared for and the department cleared. This option had been discussed with A&E staff but it put the other departments under undue pressure and it was not certain that the service could be sustained for those hours. What the Trust did not want to do was extend the opening and then find that it had to reduce the hours again because it was unsustainable.

- 027/17 The Medical Director advised that the Trust was working with the ambulance service to establish a process whereby frail and elderly patients could be admitted directly to the MAU. Avoiding a transfer to Lincoln. Work to get this in place was continuing with EMAS. Mrs Lentz advised that this direct access to MAU would be supportive for EMAS as the main impact for them was transfer times.
- 028/17 Mrs Truscott recounted her experience as a panel member for the recruitment of a consultant for emergency medicine. The Trust had one candidate who subsequently withdrew from the process. The Director of HR and OD advised the Board that the Trust continued to review its approach to recruiting and noted that more progress was needed.
- 029/17 Mr Grassby asked whether any evidence had been received which showed direct impacts on individual patients. The Medical Director advised that no incidents had been reported on the datix system. During engagement activities one patient had come forward. Mr Grassby stated that it was important that the Board whilst recognising the anxiety and concern of the people of Grantham, made sure that the community were assured that the actual direct impact on patients had been small.
- 030/17 Mr Staniland questioned why there was a reduction in the number of trainees coming through. The Medical Director advised that this was being seen in a range of specialties. More trainees were going to primary care and there was a different emphasis to training.
- 031/17 **RESOLVED**
- The Board agreed with regret the recommendation to
- Continue with the current overnight closure and review in three months
 - Increase the opening hours of Grantham A&E to 0800h to 1830h providing medical staffing numbers enable this
 - Implement the increase from 27 March 2017
 - Reassess the decision at the March Trust Board meeting.
- 032/17 **ITEM 9. Patient Experience**
- Item 9.1 Patient Experience at Trust Board**
- The Director of Nursing introduced the patient experience report.
- 033/17 The Board were advised that the Trust had seen a rise in the number of complaints received during December. This was not unusual following a CQC visit. The Director of Nursing advised that further work was being completed to analyse the top theme of complaints which was communication.
- 034/17 The Board were informed that the Trust had received the report from the review of complaints by LSE. The findings would be considered in more detail by the Lessons Learned Forum.
- 035/17 The Director of Nursing highlighted the Lessons Learned Forum report which was appended to the patient experience report. This was still a work in

progress.

036/17 Despite December being very busy the Trust had still received a high number of compliments.

037/17 The Trust had received lots of additional applications from people interested in volunteering.

038/17 Mrs Dunnett asked if it was possible to include in the report assurance on what was being done to improve in some of the areas where complaints had been received

Action: Deputy Chief Nurse 7 March 2017

039/17 Mrs Owston questioned whether the Trust had a target audience for the customer care training and would staff be directed to this at appraisal. The Director of Nursing stated that she would ask for some more detail for the Quality Governance Committee.

Action: Deputy Chief Nurse 28 February 2017

040/17 Mrs Ponder raised the communication issues highlighted by complainants and asked what else could be done to address this. The Director of Nursing advised that the Executive Directors see every complaint and follow up issues raised. The Chief Executive added that the Trust was introducing a new suite of management training which would set expectations and were aimed at achieving the desired culture in the organisation.

041/17 Mr Hayward noted the issues with literacy in the County and residents with multiple languages and asked whether this was given consideration in communications with patients. The Director of Nursing confirmed that this was acknowledged but that there was much more that could be done.

042/17 Mrs Sarah Ward Lead Macmillan Cancer Nurse and Mrs Marie Beck Matron for Cancer Services joined the meeting to present the patient story. The Board heard a follow up to the story of patient Barbara Jones. Since the Board had first heard of Mrs Jones experience as a patient in the Trust she had sadly passed away. Despite having a less than positive experience of cancer treatment with the Trust Mrs Jones had been willing to support the cancer team in learning from her experience. The board were advised of the changes already made and the further work planned to address those issues which Mrs Jones had raised.

043/17 The Chairman thanked the team for bringing an update to the Board and offered condolences to Mrs Jones family and expressed the Boards pleasure at hearing that positive changes that had been brought about as a result of the learning.

044/17 **RESOLVED**

The Board noted the patient experience report.

045/17 **ITEM 10. STRATEGIC ITEMS**

Item 10.1 Lincolnshire Health and Care (LHAC)/ Sustainability and Transformation Plan

The Board noted that following the release of the STP in December there had been a significant amount of work on operationalising the framework. The bulk of the framework was about providing better care to people in their own homes. This would impact on the future of district general hospitals with new models to drive the changes and the scope of what was provided by the Trust was likely to reduce as care moved to peoples homes.

046/17 The Chief Executive acknowledged that the plans were challenging and ambitious. The right change management would need to be put in place to give capacity at system level.

047/17 The Chief Executive highlighted that the Trust would need to be first in the queue for the capital that would be needed to achieve the plans.

048/17 Mrs Owston questioned what enabling mechanisms would be put in place centrally to deal with contracting and pulling the whole piece together. The Chief Executive explained that there would be a control total for Lincolnshire.

049/17 Mrs Truscott noted that some national vanguard sites are doing work on secondary care teams working with the community. The Chief Executive advised that the Trust was close to the vanguard projects and were looking at what was working.

050/17 Mr Staniland questioned where the accountability sat for the delivery of key milestones. The Chief Executive explained that this would be monitored through the System Executive Team and each organisation. The Deputy Chief Executive added that the Trust objectives linked to the STP and were aligned across all organisations.

051/17 The next step would be a project plan. The Trust would continue to focus on its 2021 programme with a positive plan for the future.

052/17 **RESOLVED**

The Board noted the STP update.

053/17 **Item 11.1 Integrated Performance Report**

The Chief Operating Officer presented the Integrated Performance Report to the Board for the period to 31 December 2016.

054/17 The Board noted the Trust performance against the four priority deliverables within the Sustainable Transformation Fund.

055/17 The Board were advised that there was a continued decline in performance against the 18 week RTT. Waiting lists were falling but there had been an increase in the number of long waiters. The Trust had made plans to see fewer patients during December as part of the planning for Winter pressures.

- 056/17 Actions to recover the position was focussed on additional activity. An exercise of clinical validation of the waiting lists had commenced to confirm that patients still required the appointment.
- 057/17 The Trust had achieved the diagnostic standard in December and further capacity was scheduled for January.
- 058/17 The Trust continued to meet 5 of the 9 cancer standards. It was not anticipated that the position would have improved during January.
- 059/17 The position against the A&E target had fallen in December. Attendances were as expected but the acuity of the patients who had attended had increased. This is difficult to predict and continued to challenge performance.
- 060/17 Delayed Transfers of Care were at 5% nationally the figure was 4.8% Work continued to improve this with new ambulance handover policies. Ambulatory emergency care had moved and a rapid assessment area had been introduced. The Trust had introduced two new projects to address delays across all three sites.
- 061/17 Mrs Dunnett noted the balanced scorecard for the Trust but questioned whether any of the sites would be alerting if they were shown individually in the report. The Chief Operating Officer advised that they would.
- 062/17 Mrs Dunnett noted that there were a small number of breaches each month against the 62 day cancer standard and questioned whether these could be turned around. The Chief Operating Officer confirmed that all breaches were subject to analysis each month.
- 063/17 Mrs Dunnett suggested that it would be helpful to consider the demand and referral mechanisms at one of the assurance committees. The Chief Operating Officer confirmed that where there had been a growth in demand and referral these were examined to confirm that they were appropriate referrals.
- 064/17 Mrs Dunnett asked what plans were in place to get back to trajectory for the A&E standard. The Chief Operating Officer advised that the red to green project was one of the actions which was aimed at improving flow to allow delivery of the A&E standard. The A&E delivery Board also provided pre hospital and outflow confirm and challenge.
- 065/17 Mrs Dunnett asked whether future reports could give a sense of what actions were working and whether more detail could be considered within the committees. The Medical Director commented that it was not always possible to tease out from the individual actions which were having the impact.
- 066/17 Mr Keeling asked whether the recovery plan for neurology could be shared. The Chief Operating Officer agreed. The Board were advised that the Trust continued to see urgent neurology referrals and were seeing more than had

been anticipated which meant that the back log was not being addressed. Therefore the service would not be able to reopen in April.

Action: Chief Operating Officer 7 March 2017

067/17 **RESOLVED**

The Board noted the Trust Integrated Performance Report.

068/17 **Finance Performance Report**

The Interim Director of Finance and Corporate Affairs presented the Month 9 financial performance.

069/17 The Board was advised that the Trust had agreed a control total deficit of £47.9m for 2016/17 including the STF. The month 9 position was £900,000 worse than plan with a year to date deficit of £37.8m.

070/17 The Interim Director of Finance and Corporate Affairs advised that the Trust was at risk of not achieving the control total. The Trust had appealed against the shortfall in the STF based on the A&E and RTT performance. If this appeal were successful then this would bring additional funding of £1.5m. A response to the appeal was still awaited.

071/17 The Trust had delivered £12.7m of the financial efficiency programme against an original plan of £12.6m.

072/17 The Trust cash position was in line with plan. The Trust had drawn the maximum against the revolving working capital facility. The Interim Director of Finance and Corporate Affairs advised that a working capital strategy would be taken to FSID detailing how the Trust planned to manage cash to the year end.

073/17 Mr Staniland confirmed that FSID continued to review the Trusts financial performance. They had sought assurance that the recovery plans were sensible.

074/17 Mrs Owston queried the assumptions being made around the outcome of the STF appeal process. The Interim Director of Finance and Corporate Affairs advised that the appeal body was NHSI and that the Trust had received verbal assurance.

075/17 Mrs Dunnett commented that the use of non-recurrent money to achieve the financial target for 2016/17 made the challenge greater in 2017/18. The Board were advised that the 2017/18 plan would be taken to FSID in February and brought to Trust Board in March.

076/17 **RESOLVED**

The Board noted the Month 9 financial position

077/17 **Item 11.2 Nurse Staffing Monthly Report**

The Director of Nursing presented the nursing workforce report.

078/17 The fill rates across the Trust were 92.52% for registered and 93.81% unregistered. The trust had 348 vacancies for registered nurses and 120 for non-registered.

079/17 The Director of Nursing advised that fill rates were generally consistent. The Trust had a couple of hotspots which had been considered at the Quality Governance Committee. The vacancy position continued to be a concern with agency being used.

080/17 The Director of Nursing advised that following the decision to leave the EU a number of the Trust European nurses had left the Trust. The Trust continued to try and support European staff but it was not always possible to allay their concerns.

081/17 Mrs Ponder asked whether the Board could be assured that the concern over fill rates would not lead to a lowering of standards in the nurses recruited. The Director of Nursing responded that the Trust was very clear that this should not be the case.

082/17 Mrs Truscott asked how the Trust was linking in to wider Lincolnshire recruitment initiatives. The Director of Nursing advised that the data for HCSW posts needed to be updated as a number of posts had been offered. Mrs Truscott agreed to look at this in more detail at the Workforce and OD Committee.

Action: Director of Nursing 31 March 2017

083/17 **RESOLVED**

The Board noted the monthly nurse staffing report.

084/17 **Item 11.3 Quality Governance Committee Assurance Report**

Mrs Owston reported the Quality Governance Committee Assurance Report from the meeting held on 31 January 2017.

085/17 The Committee had reviewed the delayed assessment of a 17 month old child at Grantham. The delay had arisen following a paediatric arrest on a ward. The child had not come to harm and actions in response to the incident had been addressed.

086/17 The Committee were not assured that the duty of candour requirements were being met.

087/17 The Trust continued to highlight the lack of microbiology support. The Trust

has asked for assurance from NLAG NHS Trust and await a response. Other options were also being explored.

088/17 **RESOLVED**

The Trust Board noted the Quality Governance Committee Assurance Report.

089/17 **Item 11.4 Finance, Service Improvement and Delivery Assurance Committee**

Mr Staniland presented the Finance, Service Improvement and Delivery Committee Assurance Report from the meeting held on 31 January 2016.

090/17 The Committee had highlighted their concerns around lack of progress in some areas of the LHAC/ STP.

The Committee had asked for further assurance on management of contracts.

The Committee would consider in greater detail the 2017/18 financial plan at its meeting on February.

091/17 **RESOLVED**

The Trust Board noted the Finance, Service Improvement and Delivery Committee Assurance Report.

092/17 **Item 11.5 Workforce and OD Committee Assurance Report**

Mrs Truscott presented the Workforce and OD Committee Assurance Report from the meeting held on 24 January 2016.

093/17 The Committee had requested a value for money review be completed on the recruitment of international nurses.

094/17 Further assurance had been sought from the Committee on the workforce planning across the Trust.

095/17 The Committee had highlighted the issue of consultant job plans being put in place for all staff.

096/17 **RESOLVED**

The Trust Board noted the Workforce and OD Committee Assurance Report.

097/17 **Item 11.6 Workforce and OD Committee Terms of Reference**

Mrs Truscott presented the updated terms of reference for the committee for Board approval

098/17 **RESOLVED**

The Board approved the Workforce and OD Committee terms of reference.

099/17 **Item 11.7 Audit Committee**

Mr Hayward presented the Audit Committee Assurance Report from the meeting held on 12 January 2016.

100/17 The Committee were concerned about the pace of the improvements being made to support risk management and the datix system.

101/17 Mr Hayward highlighted to the Board the risk of limited assurance in the head of internal audit opinion statement at the year end and the need to focus on risk management and completing agreed internal audit actions.

102/17 The Committee had commenced work with Internal Audit on the Internal Audit plan for 2017/18.

103/17 **RESOLVED**

The Board noted the Audit Committee assurance report.

104/17 **Item 11.8 Strategic Risk Management Report**

The Deputy Chief Executive presented a progress report on the improvement plan for risk management and the monthly updated Integrated Strategic Risk Register and Board Assurance Framework.

105/17 The Board were advised that the cleansing and validation of the Corporate Risk Register continued. It was acknowledged that this was taking longer than had been anticipated.

106/17 The Deputy Chief Executive commented that the issues which had been picked up during the Board meeting which should be considered for inclusion in the register were the split of staffing between agency and substantive. The issues which had been highlighted in performance and finance. The failure of the Trust to meet the Duty of Candour requirements and contract management.

107/17 The Deputy Chief Executive stated that the Executive Directors were continuing to work on the mitigating actions for the strategic risk register.

108/17 The Board were advised of the issues being experienced with the functionality of the datix risk system and the strategy in place to improve the system and upgrade it.

109/17 The Chairman asked whether there were any further risks to be considered. There were no further contributions.

110/17 **RESOLVED**

The Board considered the latest strategic risk register and BAF.

111/17 **Item 11.9 Trust Innovation**

The Associate Director of Communications shared with the Board the innovative work which had been recognised at the national Fab awards.

112/17 **RESOLVED**

The Board placed on record support for the projects and congratulated those involved.

113/17 **ITEM 13. ANY OTHER BUSINESS**

There were no further items of business.

114/17 **ITEM 14. DATE, VENUE AND TIME OF NEXT MEETING**

The next meeting will take place at 9.15am on Tuesday 7 March in the Conference Room, The Reservation, Sleaford.

115/17 **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	5 April 2016	5 May 2016	7 June 2016	5 July 2016	2 Aug 2016	6 Sept 2016	4 Oct 2016	1 Nov 2016	6 Dec 2016	7 Feb 2017
Prof Dean Fathers	X	X	X	X	X	X	X	X	A	X
Dr Paul Grassby	A	X	X	X	A	X	X	X	X	X
Geoff Hayward	X	A	X	X	X	A	X	X	X	X
Penny Owston	A	X	X	X	A	X	X	X	X	X
Gill Ponder	X	X	X	X	X	X	X	X	X	X
Kate Truscott	X	X	A	X	X	X	X	X	X	X
Tim Staniland	X	X	X	X	X	X	X	X	X	X
Jan Sobieraj	X	X	X	X	X	X	X	X	X	X

Dr Suneil Kapadia	X	X	X	X	X	A	X	X	X	X
Peter Hollinshead/ Jason Burn/ John Barber (Interim Directors of Finance)	X	X	X	X	X	X	X	X	X	X
Michelle Rhodes	A	X	X	X	A	X	X	X	X	X
Kevin Turner	X	X	X	X	A	X	X	X	X	X
Sarah Dunnett,					X	X	X	X	X	X

X In attendance
A Apologies given