

**United Lincolnshire Hospitals**   
NHS Trust

Minutes of the Public Trust Board Meeting

Held on 5 April 2016

Boardroom, Lincoln County Hospital.

**Present**

**Voting Members**

Professor Dean Fathers, Chair  
Mr Jason Burn, Interim Director of Finance and Corporate Affairs  
Mr Geoff Hayward, Non-Executive Director  
Dr Suneil Kapadia, Medical Director  
Mrs Gill Ponder, Non-Executive Director  
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 Paul Boocock, Director of Estates and Facilities  
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)  
Mrs Jayne Warner, Trust Secretary (minutes)  
Alison Amelia, Hospital Chaplain  
Pamela Beattie, Hospital Chaplain  
Dr Mark Turner, Consultant Anaesthetist

**Apologies**

Mr Mark Brassington, Chief Operating Officer  
Dr Paul Grassby, Non-Executive Director  
Mrs Penny Owston, Non-Executive Director  
Mr David Pratt, Director of Finance and Corporate Affairs  
Mrs Michelle Rhodes, Director of Nursing

177/16 **ITEM 1. APOLOGIES FOR ABSENCE RECEIVED**

Apologies were received from Mr Mark Brassington, Chief Operating Officer, Dr Paul Grassby, Non Executive Director, Mrs Penny Owston, Non Executive Director, Mr David Pratt, Director of Finance and Corporate Affairs and Mrs Michelle Rhodes, Director of Nursing.

178/16 **DECLARATIONS OF INTEREST**

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

179/16 **ITEM 2. MINUTES OF THE MEETING HELD ON 1 MARCH 2016**

The minutes of the meeting held on 1 March 2016 were approved as a true and accurate record.

180/16 **ITEM 3. MATTERS ARISING/ACTION LOG**

There were no new matters arising.

Item 540/15 Complaints numbers as a percentage of patient attendances was now available and would be included in the Quality Report for the May meeting.

181/16 **ITEM 4. CHAIR'S UPDATE**

The Chair welcomed Board members to his first Board meeting as Chair. The Board was advised that the Chair had already met many staff and patients on each of the Trust sites and was in the process of meeting key stakeholders as part of his induction process.

182/16 The Chair noted that the Trust had submitted data in respect of the Workforce Race Equality Standards and was not an outlier for this area.

183/16 The Board was advised that Trust data had also been published in the learning from mistakes league which identified level of openness and transparency in NHS and Foundation Trusts. The Trust recognised that there was still some way to go with this work.

The Chair noted that the Staff Awards event would take place on 14 April 2016.

184/16 **ITEM 5. CHIEF EXECUTIVE'S UPDATE AND ENVIRONMENTAL SCAN**

**Sustainability and Transformation Plans (STP)** – The Chief Executive reported that guidance continued to be received relating to the production of the five year plan. It was noted that submission of this plan would be completed ahead of the Lincolnshire Health and Care (LHAC) Programme. The Trust Board would receive a first draft of the plan in its June meeting but final details would not be agreed until after this. The Chief Executive advised that the requirement to produce a system wide STP was ensuring that the Lincolnshire system focussed on working together. The lead for Lincolnshire was Mr Allan Kitt.

**National Maternity Review** – The Chief Executive stated that, ahead of the publication of the National Maternity Review, the author Baroness Cumberlege had visited Pilgrim maternity services. The Board was advised that the Head of Midwifery was considering how the proposals aligned with Trust services and whether these would be met by the options being considered within the LHAC programme.

**Junior Doctors Contract** – The Board was advised that the Trust continued to plan for the further strike action planned by junior doctors. Cancellations resulting from strikes had so far been low in the Trust but the next planned action was likely to have greater impact. Guidance in respect of the new contracts had been issued and was to be implemented from 1 August 2016. The Chief Executive advised the Board that he continued to meet with junior doctors working in the Trust.

**Freedom to Speak Guardian** – The Board was advised that the Office of the National Guardian was live from April and that, within the draft NHS contract, providers were being asked to appoint a Freedom to Speak Guardian. The Trust was currently working on proposals to meet the requirement and these would be brought back in front of the Board at a later date.

185/16 **ITEM 6. Quality & Patient Experience**

**Item 6.1 Patient Story**

Alison Amelia and Pamela Beattie, Hospital Chaplains attended the meeting to present this item. The Chaplaincy team described the chaplaincy values and how these had directly and indirectly benefitted patient experience within the Trust.

186/16 The Chaplaincy team stated that it continued to raise awareness that the service it provided was multi faith and available 24 hours a day, 7 days a week.

187/16 The Chair thanked the Chaplains for their work on behalf of the Board.

188/16 **RESOLVED**

The Board noted the contribution to patient experience of the chaplaincy service.

189/16 **ITEM 7. STRATEGIC ITEMS**

**Item 7.1 Lincolnshire Health and Care**

The Chief Executive advised that the planned sessions focussed on planned care and the final options for women and children's services had not yet taken place. The work on the STP for Lincolnshire was being progressed as the submission of this was required first.

190/16 Mrs Truscott asked whether there had been any feedback on the success of the neighbourhood teams. The Board was advised that it was difficult to measure impact as the expectations for how they would affect flow were not clear.

191/16 **RESOLVED**

The Board noted the update in respect of LHAC.

192/16 **ITEM 8. GOVERNANCE**

**Item 8.1 Portfolio Improvement Programme**

The Chief Executive presented the update on the portfolio improvement programme. The Board was advised that the update was based on the programme for 2015/16 and this would be revisited for the 2016/17 programme. The first report would be brought to the June Trust Board meeting.

- 193/16 There had been no movement in the RAG ratings against the standards. Mr Staniland queried whether there had been any information on the impact of the perfect week. The Chief Executive advised that the evaluation was not complete on the second of these initiatives.
- 194/16 **RESOLVED**
- The Board noted the update on the 2015/16 portfolio improvement programme.
- 195/16 **Item 8.2 Quality Report**
- The Medical Director highlighted the following matters from the report.
- 196/16 The Board was advised that the Trust HSMR for November 2015 was 95. The rolling year to date HSMR figure remained within normal limits. No data was available for the period December to February. The Board was advised of the alerts in place for septicaemia and perinatal conditions. Reviews were being completed for all alerting groups and some improvements were being seen in septicaemia. Crude mortality had increased slightly in year, but the overall trend was falling.
- 197/16 The Trust was alerting on the key harms for catheter and catheter associated UTI and falls.
- 198/16 The Deputy Chief Nurse advised that complaints response rates continued to be an issue for the Trust and actions were in place to address this. Board members had requested complaints numbers as a percentage of activity and bed days and this could now be provided. Mrs Ponder asked when an improvement in response rates could be expected. The Deputy Chief Nurse advised that some improvement had been seen but capacity was impacting on the position. It was expected to take until June to break down the bottle necks in the system and it was the intention to widen the number of responders.
- 199/16 Mr Hayward questioned whether there were particular hotspots for the response issues. The Deputy Chief Nurse advised that the busier business units received proportionally greater numbers and it was important that the load could be shared. Mrs Truscott questioned whether the original backlog had been cleared. It was confirmed that only two complex cases were still outstanding from the original backlog caseload.
- 200/16 The Chief Executive noted that, whilst it was important that the numbers were improving, it was of greater importance that the Trust was ensuring that it was learning from lessons identified within complaints.
- 201/16 The Chair referred to the number of level 4 pressure ulcers and questioned whether analysis was carried out to confirm whether the ulcers were hospital acquired. The Medical Director confirmed that all level 4 ulcers were considered at the patient safety committee and would be reported as an SI.
- 202/16 Mr Staniland observed that the level of medication errors was not improving and asked for assurance that this was being addressed. The Medical Director stated that this was partly down to a focus on ensuring that all incidents were reported; levels of reporting had previously been rudimentary. Incidents were

routinely analysed at medicines management and patient safety committees.

203/16 **RESOLVED**

The Trust Board noted the Quality Report.

204/16 **Item 6.3 Monthly Nurse Staffing**

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

205/16 The report detailed that 7 areas had Registered fill rates below 80% and 5 areas had Unregistered fill rates below 80%. 6 areas had not met their fill rates for 3 months.

206/16 The Board was advised that the Trust had 248 registered nurse vacancies and 50 unregistered nurse vacancies. The Deputy Chief Nurse advised that all actions were on track and work continued to meet the trajectory for recruitment. Pilgrim site fill rates remained a challenge.

207/16 Mrs Ponder questioned the level of unused contracted hours. The Deputy Chief Nurse gave assurance that this was tracked on a monthly basis.

208/16 Mr Hayward questioned whether the previously agreed levels of planned recruitment in the Philippines were sufficient. The Chief Executive stated that the Trust continued to work on improving the use of unregistered staff. The Trust was also working with the university to increase the levels of graduates being recruited in to the Trust and continued to monitor the requirements for the future.

209/16 The Board noted that the action plan was reviewed at the Portfolio Improvement Board and assurance was provided through the Quality Governance Committee.

210/16 **RESOLVED**

The Trust Board noted the nurse staffing monthly report.

211/16 **ITEM 9. GOVERNANCE AND ASSURANCE**

**Item 9.1 Integrated Performance Report**

The Deputy Chief Executive presented the Integrated Performance Report to the Board for the period to 29 February 2016.

212/16 The Board was advised that performance against the A&E 4 hour waiting time target for February was 81% which was below the level required for the recovery plan. Demand remained high with the Pilgrim site giving most cause for concern. The Trust was using the learning from the perfect week and the role of ward liaison officers.

- 213/16 The Board was advised that the Trust had achieved the required performance for referral to treatment for the seventh consecutive month.
- 214/16 The Trust reported meeting 4 of the 9 cancer standards in January 2016.
- 215/16 Mr Hayward questioned whether the Trust had considered the use of GPs on wards in hospitals. The Board was advised that this would only be achievable in some specialties and that GP recruitment was also an issue. The Chief Executive advised that the Trust did not have CCG support for such schemes.
- 216/16 **RESOLVED**
- The Board noted the Trust Performance Report.
- 217/16 **Finance Performance Report**
- The Interim Director of Finance and Corporate Affairs presented the financial performance to month eleven.
- 218/16 The Board was advised that the Trust was reporting a revised year end forecast of £56.9m deficit. The Trust would not deliver the control deficit of £40.3m.
- 219/16 The Trust would achieve the CRL and EFL.
- 220/16 Month 11 position was a deficit of £0.8m. This was following a revenue transfer of £4m and £0.9m winter resilience funds released. Therefore the underlying deficit was £5.7m.
- 221/16 The Board was advised that the dispute resolution process had now concluded and there would be no further movement on the position. The Trust would not be permitted to make any further capital to revenue transfers.
- 222/16 The Board noted that the risks to achieving the revised year end forecast position were the delivery of the activity for March taking account of the junior doctors strike and the delivery of the agreed control totals.
- 223/16 **RESOLVED**
- The Board noted the financial position for February 2016.
- 224/16 **Human Resources Performance Report**
- The Director of Human Resources and Organisational Development presented the Human Resources Performance Report.
- 225/16 The Board was advised that work continued on the workforce plans for submission on 16 May.
- 226/16 The new junior doctors contract had been released and detailed work had

commenced with business managers to review how this would affect plans going forward.

- 227/16 The Board noted that sickness levels had improved.
- 228/16 The Board was advised that appraisal rates and core learning completion continued to be an area of risk.
- 229/16 Mrs Ponder highlighted that the retention of staff appeared to be a risk. Mrs Truscott questioned whether those areas with high turnover were being targeted. The Director of Human Resources and Organisational Development advised that work was ongoing with managers and detailed analysis was being taken to the Workforce and Organisational Development Committee in May. Mrs Ponder stated that staff engagement in some areas was clearly weaker. The Board was advised that work was ongoing with areas with particular issues.
- 230/16 **RESOLVED**
- The Board noted the Human Resources Performance Report.
- 231/16 **Item 9.2 Quality Governance Committee Assurance Report**
- Mr Staniland reported the Quality Governance Committee Assurance Report from the meeting held on 29 March 2016.
- 232/16 The Committee had noted the spike in maternity related incidents. The Committee had requested that an investigation into the rise in cases was completed and brought back to the Committee.
- 233/16 The Committee had noted the work being completed on the risk register but required further assurance on its management.
- 234/16 Housekeeping had been subject to an external review; this had recommended further investment. The matter had been referred to the Executive Team for a plan to implement.
- 235/16 **RESOLVED**
- The Trust Board noted the Quality Governance Committee Assurance Report.
- 236/16 **Item 9.3 Finance Performance and Investment Assurance Committee**
- Mr Staniland presented the Finance, Performance and Investment Committee Assurance Report from the meeting held on 29 March 2016.
- 237/16 The Board noted that the matters to be escalated were the risk to achieving the control deficit, the continued failure to achieve the A&E standard and the failure to agree and sign a contract for 2016/17.

238/16 The Board was advised that the Trust continued with planning based on assumptions and that the gap between the contract positions was understood.

239/16 **RESOLVED**

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

240/16 **Item 9.4 Workforce and Organisational Development Assurance Committee**

Mrs Truscott presented the Workforce and Organisational Development Committee Assurance Report from the meeting held on 8 March 2016.

241/16 The Committee had updated the Board Assurance Framework and requested further assurances in some areas.

242/16 **RESOLVED**

The Trust Board noted the Workforce and Organisational Development Committee Assurance Report.

243/16 **Item 9.5 Audit Committee Assurance Report**

Mr Hayward presented the assurance report from the Audit Committee meeting on 15 March 2016.

244/16 The Board was advised that the Committee had agreed an internal audit plan for 2016/17.

245/16 The Committee had requested further assurances in respect of the risk management processes.

246/16 **RESOLVED**

The Trust Board noted the assurance report from the Audit Committee.

247/16 **ITEM 10 ITEMS FOR MEETING 5 MAY 2016**

Annual Governance Statement  
Final Annual Plan

248/16 **ITEM 11. ANY OTHER BUSINESS**

There were no further items of business.

249/16 **ITEM 12. DATE, VENUE AND TIME OF NEXT MEETING**

The next meeting will take place on Thursday 5 May 2016 in Committee Room 1, Pilgrim Hospital, Boston.



## 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	4 Aug 2015	1 Sep 2015	6 Oct 2015	3 Nov 2015	1 Dec 2015	2 Feb 2016	1 Mar 2016	5 April 2016
Prof Dean Fathers								X
Ron Buchanan	X	X	X	X	X	X	X	
Dr Paul Grassby	X	X	A	X	X	X	X	A
Geoff Hayward	X	X	X	X	X	X	X	X
Penny Owston	X	X	X	X	X	X	X	A
Gill Ponder	X	X	X	X	X	X	A	X
Kate Truscott	X	A	X	X	X	X	X	X
Tim Staniland	X	X	X	X	X	X	X	X
Jan Sobieraj						X	X	X
Jane Lewington	A							
Dr Suneil Kapadia	A	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
Michelle Rhodes	X	X	X	X	A	X	X	A
Pauleen Pratt	X	X	A	X	X			
Kevin Turner	X	X	X	X	X	X	A	X

X In attendance

A Apologies given