

Minutes of the Public Trust Board Meeting

Held on 4 July 2017

Auditorium, New Life Centre, Sleaford.

Present

Voting Members

Professor Dean Fathers, Chair
Ms Karen Brown, Director of Finance and
Corporate Affairs
Mrs Sarah Dunnett, Non- Executive
Director
Mr Geoff Hayward, Non-Executive Director
Dr Neill Hepburn, Interim Medical Director
Mrs Penny Owston, Non-Executive
Director
Mrs Gill Ponder, Non-Executive Director
Professor Mala Rao, Non-Executive
Director
Mrs Michelle Rhodes, Director of Nursing
Mr Jan Sobieraj, Chief Executive
Mrs Kate Truscott, Non-Executive Director

Non-Voting Members

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

In Attendance

Mrs Anna Richards, Communications and
Engagement Manager
Mrs Jayne Warner, Trust Secretary
(minutes)
Mrs Jennie Negus, Deputy Chief Nurse
(item 8.1)

Apologies

Dr Paul Grassby, Non-Executive Director
Mr Kevin Turner, Deputy Chief Executive

560/17 **ITEM 1. INTRODUCTION**

The Chair welcomed the members of the public to the meeting.

561/17 The Chair highlighted to the Board the events which he had attended since the last meeting. The Chair informed the Board that Mrs Karen Brown had been appointed to the Director of Finance and Corporate Affairs post and congratulated Mrs Brown.

562/17 **ITEM 2. QUESTIONS**

No questions had been submitted from members of the public.

563/17 **ITEM 3. APOLOGIES FOR ABSENCE RECEIVED**

Apologies were received from Mr Kevin Turner, Deputy Chief Executive and Dr Paul Grassby, Non-Executive Director.

564/17 **ITEM 4. DECLARATIONS OF INTEREST**

There were no interests declared in respect of the agenda items. The Chair declared that he had been appointed to the Greater Lincolnshire Local Enterprise Partnership.

565/17 **ITEM 5. MINUTES OF THE MEETING HELD ON 6 JUNE 2017**

The minutes of the meeting held on 6 June 2017 were approved as a true and accurate record with the addition of Professor Rao to the attendance table.

566/17 **ITEM 6. MATTERS ARISING/ACTION LOG**

Minute 256/17 - Mrs Owston confirmed that she was meeting with the catering leads to discuss the themes which had been made in the patient experience report. This would be reported back to the Quality Governance Committee.

Minute 332/17 – Mrs Owston confirmed that the Quality Governance Committee had agreed areas for deep dives of the risk register and Directors had been asked to refresh the strategic risk register.

Minute 419/17 – The contribution of reduction of vacancy targets to finances would be taken to the Workforce and OD Committee and back to Trust Board in August.

Minute 472/17 – Responses to friends and family data would be picked up as part of patient experience reporting.

Minute 485/17 – The framework for ward assurance / golden hour was in draft and would go to Quality Governance Committee in July.

Minute 513/17 – Quality Governance Committee were to seek assurance through a deep dive in to cleanliness at the next meeting.

Minute 520/17 – NHSI Cost improvement model had been shared with the Finance, Service Improvement and Delivery Committee members and Trust Board.

Minute 538/17 – Mitigating actions were under review.

567/17 **ITEM 7. CHIEF EXECUTIVE'S UPDATE AND ENVIRONMENTAL SCAN**

NHS Year End Position 2016/17 The Chief Executive informed the Board that the overall NHS financial performance had been published showing a deficit of £800m for 2016/17 which was a substantial improvement on the £2.5b deficit in 2015/16. The Chief Executive pointed out that overall delayed

transfers of care had increased by 20% in the NHS however this was not reflected in Lincolnshire. The pay costs for the NHS had gone up but agency spend had reduced by £700m. NHS pay had come in to focus following the election.

CQC The Board were advised that the CQC had issued a second consultation on their regulations. The changes would not be implemented until 2018 and included the Fit and Proper Person Regulation.

Brexit The Trust noted that negotiations had commenced and continued to watch for the potential impacts on the NHS.

Executive Directors The Chief Executive confirmed the substantive appointment of Karen Brown to Director of Finance and Corporate Affairs and advised that he had received confirmation that approval had been given to the appointment of Dr Neill Hepburn as substantive Medical Director. The Chief Executive advised that this was the first time since his appointment that the executive team had all been substantive appointments.

Fire Safety The Chief Executive acknowledged that fire safety concerns following the Grenfell tragedy had resulted in a number of additional check for the NHS. The Board were advised that the Trust had not identified any cladding issues on any of its property at present.

A&E The Trust had been the subject of a system wide A&E deep dive. The Board were advised that the output from this would be considered through the Finance, Service Improvement and Delivery Committee.

2021 Big Conversation An event had been planned for over 200 staff to increase awareness and engagement with the 2021 strategy.

568/17 **ITEM 8. Patient Experience**

Item 8.1 Patient Experience at Trust Board

The Deputy Chief Nurse introduced the patient experience report.

569/17 The Board were informed that complaints performance had fallen slightly but the trend was still an improving one. There were 15 overdue complaints in month and the team had implemented the performance tool for all of these. Nine of these were in the final stages awaiting sign off.

570/17 The report demonstrated that friend and family was still below the national percentage for recommends.

571/17 The Board were advised that the Trust continued to work with the FAB Academy and one of the Trust ambassadors was now a regional ambassador. The Academy continued to identify and promote positive tools which were being used in Trusts.

572/17 Mrs Dunnett commented that it pleasing to see some of the comments made but expressed concerns about the rising backlog of complaints. Mrs Dunnett

also questions whether we had looked at what other Trusts were doing in relation to friends and family to ensure we were trying everything.

573/17 The Deputy Chief Nurse responded that the Trust were exploring follow up texts for the friends and family test so that the Trust could ask the question what would have made a difference to improve the recommendation. Mrs Owston confirmed that the Quality Governance Committee were monitoring this work.

574/17 The Chair asked whether the data had been broken down to clinical directorate level and agreed to discuss with the Deputy Chief Nurse outside the meeting.

575/17 **RESOLVED**

The Board noted the patient experience report.

576/17 **Item 8.2 Patient Story**

The Deputy Chief Nurse presented the patient story of Mrs C and her family who after being a patient at Pilgrim Hospital raised concerns about medication, clinical decisions and patient care. The Deputy Chief Nurse described the experience of Mrs C and her family during a protracted complaints process and described the arrangements that had since been put in place to ensure that the experience now would be different.

577/17 Mrs Dunnett commented that the dialogue would be different with the introduction of the PALS service which hadn't been in place at the time. The Deputy Chief Nurse confirmed that the Trust now proactively approaches patients and stories were shared at Trust meetings.

578/17 **ITEM 9. STRATEGIC ITEMS**

579/17 **Item 9.1 Sustainability and Transformation Plan**

The Chief Executive advised the Board that there was still no formal update report for Boards from the programme but it was hoped this would soon be in place.

580/17 The Board were informed that a final view had yet to be formed by the Lincolnshire CCGs on which aspects of the STP were to require formal consultation.

581/17 The Chief Executive explained that GPs and others had been asked to put proposals in place for the neighbourhood teams.

582/17 Work continued on the system wide recovery plan. This would be discussed by the Lincolnshire Commissioning Board.

583/17 Mrs Truscott questioned whether any progress had been made with the neighbourhood teams and commented that other parts of the country had already implemented. The Chief Executive responded that this had not been working too well in the past and the impact would not be seen yet but

Lincolnshire really needed to progress the multi disciplinary approach.

584/17 Mrs Owston questioned when it was anticipated that the consultation would commence. The Chief Executive commented that this seemed unlikely to be before the end of 2017. The consultation would have to be agreed nationally because of the organisations being in special measures.

585/17 **RESOLVED**

The Board noted the STP update.

586/17 **ITEM 10 Governance**

Item 10.1 Quality and Safety Improvement Plan

58717 The Director of Nursing introduced the final version quality and safety improvement plan. The plan had seen minor amendments since being considered in draft at the last meeting of the Trust Board. The Board were advised that further actions may be included as the Trust progresses to delivery.

588/17 The Director of Nursing explained that the improvement plan was being monitored weekly through the programme leads meeting and this would feed in to Quality and Safety Improvement Board. The plan would also be a standing item on the Quality Governance Committee agenda with exception reporting. The Trust was still awaiting feedback from Healthwatch on the plans.

589/17 Mrs Owston commented that the feedback loop from serious incidents had been questioned at the Quality Governance Committee. The Director of Nursing stated that the Trust had a plan for how this should work but needed to have the capacity to establish the process.

590/17 Mrs Truscott questioned how the other assurance committees would be expected to contribute to the plan. The Director of Nursing explained that whilst the entire plan went to Quality Governance Committee individual streams may be considered at the other assurance committees. The Director of Human Resources and OD advised that the people strategy would drive the relevant elements of the improvement plan.

591/17 The Board would receive a snapshot update at its meetings, in the first instance this would be monthly.

Professor Rao asked if there were any key actions which could be achieved which had greatest impacts. The Chief Executive commented that at the heart of improvement was the lack of safety culture and that this would not happen through transactional processes. The Trust needed to understand where safety sits and find ways to measure when safety culture had improved.

592/17 **Item 10.2 Integrated Performance Report**

The Board received the Integrated Performance Report for the period to 31 May 2017.

593/17 The Chief Operating Officer reported that the Referral to Treatment Time had been discussed in detail at the Finance, Service Improvement and Delivery Assurance Committee. The risks to delivering the trajectory had been considered. The Trust continued to seek external support for this area and the forecast recovery date was October 2017.

594/17 The Trust was reporting that it was meeting 4 of the 9 cancer standards. Those cancer patients which were on or over 104 days without an agreed treatment plan had all been assessed to confirm that this had not resulted in harm. The Trust had a recovery trajectory to 85% in September and were receiving support from NHSI and NHSE in respect of the actions being taken.

595/17 The Board were advised that performance against the A&E 4 hour standard was at 76.49% in May. Performance had been affected by two key issues the cyber attack and norovirus outbreak. The region was the subject of a deep dive in respect of urgent care and this had brought additional focus on the system wide issues. An action plan to achieve 90% by September was being put in place but this was considered very high risk. Mrs Dunnett noted that the Finance Service Improvement and Delivery Assurance Committee had not been assured on the recovery plans for A&E and questioned whether this was ahead of the further deep dive. Mrs Dunnett raised concerns about the achievability of the plan recognising the starting point for the Trust.

596/17 Mrs Ponder responded that the Committee had concerns that if the Trust continued to try and focus on all areas that the recovery would be achievable and had questioned whether focus should be given particularly to A&E.

597/17 Mrs Dunnett noted that during the cyber attack the Trust had communicated with the public asking them not to attend A&E if they could avoid it. This message had been heard for the Lincoln and Grantham site but had not been so effective for Pilgrim Mrs Dunnett questioned why this might be. The Chief Operating officer advised that there was a difference in service delivery for the East Coast and there were different behaviour patterns. This was being examined as part of the deep dive.

598/17 The Medical Director presented the Quality performance.

599/17 The Medical Director reported that the Trust had investigated the Trust SHMI data and had concluded that this related to the coding. The Trust was an outlier in respiratory and the Trust was looking at how it provided this care with the specialist team. This area formed part of the quality and safety improvement plan.

600/17 The Director of Nursing reported that encouraging progress was being made with reducing falls across all sites. The actions being taken had been

presented at the Quality Governance Assurance Committee.

- 601/17 The Board were advised that the Trust had experienced data recording issues in respect of pressure ulcers and in response to this the Trust would be suspending the use of the PUNT system for 6 months. The trust had seen an increase in grade two pressure ulcers and this had been linked to use of a particular type of heel guards.
- 602/17 The Director of Nursing reported to the Board concern over the increase in cases of clostridium difficile. This was above the Trust trajectory with a plan of significant actions being put in place. The Trust was receiving support from NHSI on this area.
- 603/17 The Director of Human Resources and OD highlighted that non medical appraisal had improved by 10% following significant focus in the Trust.
- 604/17 The Board noted that the vacancy levels from the workforce report and the nurse staffing report were not aligned and work was ongoing to align the two systems.
- 605/17 Actions continued to address the Trust agency spend and review the existing workforce skill mix.
- 606/17 Mrs Owston queried the latest position with the recruitment of nurses from the Philippines. The Director of Workforce and OD explained that there remained 40 potential recruits. The Chair questioned whether the Trust had evaluated the success of the project. The Board were advised that financially the exercise had achieved value for money but the Trust had determined it was unlikely to repeat the contract. The Finance, Service Improvement and Delivery Assurance Committee would further review the process in October.

Action: Mrs Ponder 31 October 2017

- 607/17 Professor Rao questioned whether the Trust was taking in to account the OSCE results when the return on investment was considered and whether those who had taken more than one attempt to pass the assessment were being monitored going forward to support on any areas of weakness.
- 608/17 The Director of Nursing confirmed that support could be introduced.
- The Chair asked for confirmation that the Finance, Service Improvement and Delivery Committee had been assured that contracting was only based on a positive return. Mrs Ponder confirmed that this assurance had been received.
- 609/17 The Interim Director of Finance and Corporate Affairs presented the financial performance. The Trust year to date deficit position was £16.7m against a planned deficit of £9.3m. The Interim Director of Finance and Corporate Affairs advised that the underlying factors to the year to date position was loss of income during the cyber attack, the pilgrim fire and norovirus outbreak.

Agency spend had also not been controlled.

- 610/17 The Trust did not have an efficiency programme in place which could deliver the required savings at pace. The Trust would automatically lose the sustainability and transformation funding if the control total was not hit. The Interim Director of Finance advised that the Trust revised forecast was at least £75m deficit. NHSI had informed the Trust that this level of deficit was not acceptable and had required from the Trust a plan to recover the difference. A director from NHSI would also be working with the Trust on financial recovery.
- 611/17 The board recognised the impact which the current financial position and forecast deficit of £75m would have on the level of external cash support required. The Board were advised that the cumulative drawdown of loans in 2017/18 to 30 June 2017 was £17.5m and that the July drawdown requirement was £11.0m. Future monthly draws were anticipated to be between £5-7m.
- 612/17 The Board agreed to delegate the authorisation of future loan draws in 2017/18 up to the current projected deficit of £75.0m to the Chief Executive and Director of Finance.
- 613/17 Mrs Dunnett questioned whether consideration was being given to grip and control, Carter, technical adjustments. The Interim Director of Finance confirmed that all of these areas were being reviewed.
- 614/17 Mrs Truscott noted the CQUIN performance for 2016/17 and asked for assurance on the plans in place for 2017/18. Mrs Truscott was advised that CQUINs would be monitored through the Finance, Service Improvement and Delivery Assurance Committee.
- 615/17 **RESOLVED**
- The Board noted the Trust Integrated Performance Report and agreed to delegate the authorisation of future loan draws in 2017/18 up to the current projected deficit of £75.0m to the Chief Executive and Director of Finance.
- 616/17 **Item 10.3 Nurse Staffing Monthly Report**
- 617/17 The Director of Nursing presented the nursing workforce report.
- 618/17 The Board were advised that an agency recovery plan would be presented to the Committee in July. The Director of Nursing stated that conversations with staff were being started to understand the issues and share ideas.
- 619/17 The Board were advised that nurse to patient ratios were low because of vacancies. Mrs Ponder noted that nightshifts at Lincoln appeared to be over filled. The Director of Nursing advised that registered nursing vacancies were

being filled with unregistered nurses and healthcare support workers. Mrs Ponder questioned whether the staffing should be reviewed if non registered staff could be used. The Director of Nursing advised that the CQC expected to maintain the registered staffing levels but lots of work was being carried out nationally.

620/17 **RESOLVED**

The Board noted the monthly nurse staffing report.

621/17 **Item 10.4 Quality Governance Committee Assurance Report**

Mrs Owston reported the Quality Governance Committee Assurance Report from the meeting held on 28th June 2017.

622/17 The Committee reported those areas where assurance had been received and those areas where greater assurances had been sought.

There were no matters which required further action from the Trust Board.

623/17 **RESOLVED**

The Trust Board noted the Quality Governance Committee Assurance Report.

624/17 **Item 10.5 Finance, Service Improvement and Delivery Assurance Committee**

Mrs Ponder presented the Finance, Service Improvement and Delivery Committee Assurance Report from the meeting held on 28th June 2017.

625/17 Mrs Ponder reported on the deep dive which the committee had completed around the Lincoln Surgical Directorate.

626/17 The Committee asked the Board to consider whether urgent care performance should be prioritised over other standards. This matter would be considered further in the private session of the meeting.

627/17 The Committee had recorded a lack of assurance that the Trust was currently in a position to resolve the variance to the financial plan and acknowledged that the external regulators were expecting a commitment from the Board to recover the position.

628/17 Mrs Dunnett questioned whether a further Board response was needed. The Chief Executive responded that the Trust continued its dialogue with NHSI and was working to put robust recovery plans in place.

629/17 **RESOLVED**

The Trust Board noted the Finance, Service Improvement and Delivery

Committee Assurance Report.

630/17

Item 10.6 Enforcement Notices for Pilgrim and Lincoln Hospitals

The Director of Estates and Facilities provided the Board with a report on fire safety work being carried out in the Trust following the receipt of two enforcement notices.

631/17

The Director of Estates and Facilities explained that the fire at Pilgrim Hospital had precipitated an enforcement notice from the fire service. The Trust was working with the fire service on action plans to address the improvements needed within the ageing estate and infrastructures.

632/17

The risks had been considered by the Finance Service Improvement and Delivery Assurance Committee.

633/17

The Trust had completed further checks following the Grenfell fire and were considered a low risk site.

634/17

Professor Rao noted that when the fire had occurred on the 9th floor the Trust and had been fortunate that there were no dependent patients at the time. It was questioned whether dependent patients should not be in ward areas at the top of the tower block. The Director of Estates and Facilities confirmed that departments had been asked to update their evacuation plans. The Chief Operating Officer agreed that the most vulnerable patients should be on lower floors.

635/17

Mrs Truscott questioned whether some of the areas highlighted in the notices should have been addressed as business as usual. The Director of Estates and Facilities stated that some areas were already being addressed but the notices had brought the scale of the issue in to focus.

636/17

The Chief Executive questioned whether the Trust could achieve the improvement plans if the only resource available was the Trust limited capital. The Director of Estates and Facilities confirmed that it would not be achievable. Mr Hayward questioned on that basis whether other capital spend should be held. The Director of Finance and Corporate Affairs responded that no further capital spending was being agreed outside the capital already committed apart from where patient safety was compromised. Capital was being reprioritised for fire over the CQC must be done actions.

637/17

RESOLVED

The Trust Board noted the report.

638/17

Item 10.7 Staff Engagement Report

The Director of Human Resources and OD introduced the staff engagement report.

639/17

The Board were updated on the project to develop a staff charter to bring values to life and drive behaviours as a means of working towards embedding

a culture of safety.

Mrs Truscott asked whether patients and their representatives were being involved in any way. The Director of Human Resources and OD confirmed this could be included in the next steps.

640/17 Mrs Dunnett asked whether the Board would have a charter. The Director of Human Resources and OD responded that the Board would be expected to embrace the overall staff charter but that a reflective exercise to consider how the Board would use this would be helpful.

641/17 The Freedom to Speak Up Guardian provided an update report which included the ongoing work and the latest data on issues raised. The board noted that all issues to date had been related to behaviours.

RESOLVED

Then Board noted the update.

642/17 **Item 10.8 Strategic Risk Management Report**

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

643/17 The Board noted that the Committees continued to push for improved focus on corporate risks and had initiated some deep dive work on risks on the cleansed registers.

644/17 The Board noted the fire safety risk which had been escalated by the Finance, Service Improvement and Delivery Assurance Committee.

645/17 **RESOLVED**

The Board considered the latest strategic risk register and BAF.

646/17 **Item 10.9 Trust Innovation**

The Communications and Engagement Manager shared with the Board the opening of the new bereavement centre to support families. The Deputy Chair would welcome the Duke of Gloucester to the official opening.

647/17 **RESOLVED**

The Board placed on record support for the project.

648/17 **Item 11.1 Equality and Diversity Annual Report**

The Board agreed the annual report.

649/17 **Item 11.2 Committee Membership**

The Board agreed the new committee membership with effect from 1 August

2017.

650/17 **Item 11.3 Charitable Trustees Arrangements**

The Director of Finance and Corporate Affairs introduced report detailing proposals to discharge the charitable trustees responsibilities. The board were advised that the Charities Commission and audit had recommended that the Trust establish a charitable funds committee to provide clarity and robust challenge on the use of charitable funds.

651/17 The Board were advised that the proposals met the Trust scheme of delegation. The Director of Finance and Corporate Affairs confirmed that the Trust was ambitious to raise and spend more funds but needed to get basic housekeeping in order first.

RESOLVED

652/17 The Board agreed to call a Trustees meeting following the next Trust Board in August to agree the membership of the Charitable Funds Committee and the Terms of Reference.

Item 11.4 Future Agenda Items

There were no further agenda items.

653/17 **ITEM 12. ANY OTHER BUSINESS**

There were no other items of business.

654/17 **ITEM 13. DATE, VENUE AND TIME OF NEXT MEETING**

The next meeting will take place at 9.15am on Tuesday 1 August in The Reservation, Sleaford.

655/17 **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.

656/17 **Signed as a true record _____ Chairman**

Date _____

Attendance

Voting Members	5 July 2016	2 Aug 2016	6 Sept 2016	4 Oct 2016	1 Nov 2016	6 Dec 2016	7 Feb 2017	7 Mar 2017	9 May 2017	6 Jun 2017	4 July 2017
Prof Dean Fathers	X	X	X	X	X	A	X	X	X	X	X
Dr Paul Grassby	X	A	X	X	X	X	X	X	X	X	A
Geoff Hayward	X	X	A	X	X	X	X	A	A	X	X
Penny Owston	X	A	X	X	X	X	X	X	A	X	X
Gill Ponder	X	X	X	X	X	X	X	X	X	X	X
Kate Truscott	X	X	X	X	X	X	X	X	A	A	X
Tim Staniland	X	X	X	X	X	X	X				
Jan Sobieraj	X	X	X	X	X	X	X	X	X	X	X
Suneil Kapadia/ Neill Hepburn	X	X	A	X	X	X	X	X	X	X	X
Peter Hollinshead/ Jason Burn/ John Barber/Karen Brown (Interim Directors of Finance)	X	X	X	X	X	X	X	X	X	X	X
Michelle Rhodes	X	A	X	X	X	X	X	X	X	X	X
Kevin Turner	X	A	X	X	X	X	X	X	A	X	A
Sarah Dunnett,		X	X	X	X	X	X	X	X	X	X
Mala Rao									X	X	X

X In attendance

A Apologies given