

North Cumbria University Hospitals



NHS Trust

MINUTES OF THE TRUST BOARD MEETING HELD IN PUBLIC ON TUESDAY 30 SEPTEMBER 2014 AT 1PM IN THE BOARD ROOM, CUMBERLAND INFIRMARY

Present:

- Ms G Tiller, Chair**
- Mrs A Farrar, Chief Executive**
- Mr M Evens, Non-Executive Director**
- Mr M Cook, Non-Executive Director**
- Professor R Barton, Non-Executive Director**
- Mrs H Ray, Chief Operating Officer**
- Dr D Freake, Director of Strategy**
- Ms G Naylor, Director of Nursing, Midwifery and AHP**
- Dr J Rushmer, Medical Director**

In Attendance:

- Mr Les Morgan, Director of Redevelopment**
- Mrs R Duguid, Acting Director of Governance**
- Mr D Gallagher, Director of Human Resources and Organisational Development**
- Mrs J Lynch, Office Manager**

TB53/14 APOLOGIES AND DECLARATIONS OF INTEREST

Apologies were received from Dr H Dixon and Mr S Shanahan.

Interests were declared by Mrs Farrar, Dr Rushmer, Mr Morgan and Dr Freake who were on secondment to the Trust and employed by Northumbria Healthcare NHS Foundation Trust. Dr Freake was also a partner of Gibson, Freake Edge.

Ms Tiller opened the meeting by explaining the following:

- Trust Board members were using their I-Pads for the first time at a Public Board meeting instead of having paper copies of all the reports.
- Questions would be taken from the members of the public after each section.
- A verbal update would be given by the Medical Director following the public meeting held at Whitehaven the previous night.

TB54/14 MINUTES OF THE LAST MEETING

The minutes of the last meeting were **APPROVED** as a correct record. The minutes of the Annual General Meeting were **APPROVED** as a correct record.

TB55/14 **MATTERS ARISING AND ACTION PLAN**

No matters arising were discussed. The action plan was **APPROVED** as follows:

TB35g/14: Action Complete.

TB48b/14: Action Complete.

TB56/14 **PATIENT STORY**

Mrs Naylor reported that the patient story had been discussed in the Private Trust Board meeting due to patient confidentiality, but she was pleased that the Board had had the opportunity to hear the experience of the patient. Mr Cook reported that the story had been an honest but heart rendering story; there had been some positive things to note but there had also been some negative things. The Trust had put plans in place to rectify the issues.

The verbal update was **NOTED** by the Board.

TB57/14 **SAFETY AND QUALITY**

a) **Chief Inspector of Hospitals' Report**

Mrs Naylor updated the Board on the Improvement plan and highlighted the key areas:

- A Chief Inspector of Hospitals steering group meeting was taking place on a weekly basis. This meeting was chaired by the Director of Nursing and Midwifery.
- The Executive Management Team on a monthly basis met with the Business Units to review progress against delivery of the 'must and should do' items.
- The improvement plan focus was on all the must do areas, but there were key priorities.
- The Trust had the support of an Improvement Director from the Trust Development Authority. This would ensure the focus is on the core areas to demonstrate improvement.

The report was **APPROVED** by the Board.

As Dr Freake had to leave the meeting early, the Chair agreed that the item 'Development Support Plan to the Trust Development Authority' would be discussed next on the agenda.

b) **Development Support Plan to the Trust Development Authority**

Dr Freake informed Board members that the Trust had to submit a Development Support Plan later that afternoon. The report had to show four improvement priorities for the Trust. Dr Freake gave details of the 4 priorities the Trust were working on. Mrs Ray

suggested that it may be helpful to include 'support to help capacity' also.

The report was **APPROVED** by the Board.

c) **Safety and Quality Report Q1**

Mrs Duguid presented the Safety and Quality Report which was received by the Board. The key points were noted:

- Dr Graham and Ms Barnes were continuing to review deaths within the Trust and these were discussed at the weekly Safety Panel meeting.
- More care bundles were being rolled out within the Trust.
- Infection Control was discussed regularly at the Safety and Quality Committee meeting.
- Complaints were being looked at to see if there were any patient themes.
- A dashboard was being developed and future reports would include this.
- An update regarding the Car Parking issue was tabled which gave details of the work the Trust was currently looking at, to alleviate the problem.

Mr Cook questioned the rollout of the care bundles and how they were being audited. Mrs Duguid informed members that they were being discussed at the Senior Nurse Forum meeting and suggestions from Specialist Nurses were also being looked into. The care bundles would be audited by the specific clinical leads and it was hoped that the audits would be finalised in quarter 4.

Mrs Naylor informed members that as part of the work being undertaken, 11 wards had piloted the ward accreditation framework. This was now being rolled out to all the wards by January 2015. Mrs Farrar requested that representation from the 11 wards attend the next meeting so that the Board could hear their results.

The report was **NOTED** by the Board.

ACTION:

Mrs Naylor to arrange for representation from the 11 wards who had piloted the Ward Accreditation Framework to attend the next Public Board meeting to present their results

d) **Medical Director's Report**

Dr Rushmer presented his report which outlined key clinical issues and this was **RECEIVED** by the Board. Dr Rushmer highlighted the key areas of the report;

- Improved better outcomes for patients: Mortality rates continued to improve within the Trust. Additionally, improvement is evident in specific conditions.
- Acute Medicine at West Cumberland Hospital: A new system has started to ensure patient care and safety, following the retirement of 2 clinical staff members and the withdrawal of trainees. This is being monitored closely. Staff are also looking into an Acute Medical Pathway. Mrs Farrar requested that Dr Rushmer bring the pathway for further discussion and consideration to the next Board Meeting.
- End of Life: The 'Deciding Right' end of life pathway had been adopted following a Cumbria wide meeting of palliative care teams. The document is now being edited. This will be implemented by the Bereavement group, which is led by the Director of Nursing and Midwifery.
- Recruitment: A number of clinical appointments had been made over the previous month.

The report was **NOTED** and **APPROVED** by the Board,

ACTION:

The Acute Medicine Pathway to be further discussed and considered at the November Board meeting

i. **Public Meeting at Whitehaven 29 September 2014**

Dr Rushmer informed members that he had been invited to speak at the meeting the previous evening, along with Dr David Rogers, Medical Director from the Clinical Commissioning Group. Dr Rushmer had been given three minutes to outline the Trusts commitment to the West Cumberland Hospital. The public wanted to be given assurance in relation to specific items that Dr Rushmer had not been able to give them.

The Chair thanked Dr Rushmer for attending the public forum and asked for a commitment to regular engagement and communication with the public to keep them informed. Mrs Farrar said this was indeed recognised and steps would be taken in partnership with the Clinical Commissioning Group.

The verbal update was **NOTED** by the Board.

e) **Nursing Workforce Assurance**

A report outlining the ward staffing levels was **RECEIVED** by the Trust. Mrs Naylor informed members that a robust system was in place to ensure patient safety and care. Recruitment plans were in place and nurses from abroad had been recruited with more interviews planned. The Trust was also working closely with local partners in relation to student nursing and plans were in place to recruit student nurses twice yearly. Mrs Farrar asked that the staff

on Pillar and Patterdale wards were thanked for their care and dedication to the patients, as they were doing everything they could to ensure patient care and safety whilst being understaffed.

The report was **APPROVED** by the Board.

f) **Winter Plan**

Mrs Ray presented the winter plan, which was received by the Board. Mrs Ray reported that the winter preparation was in hand for both sites, the flu vaccination rollout programme had started on both sites and the severe weather plan was being produced. Mrs Ray reported that a further update would be presented to the Board at the November Trust Board meeting.

The report was **APPROVED** by the Board.

ACTION

A further update on the Winter Plan to be presented to the November Board Meeting

g) **Clinical Audit Report**

Dr Rushmer presented the first quarterly report which updated members on the continuing programme to improve and embed effective clinical audit practice in both national and Trust priority areas of audit. Dr Rushmer reported that the Trust was aiming for full compliance of clinical audit by the following year, and although some audits for the current year had not started yet, plans were in place to ensure they were undertaken. Mr Cook informed Board members that clinical audit was regularly discussed at the Safety and Quality Committee and improvements had definitely been shown.

The report was **APPROVED** by the Board.

h) **Questions from the Public Gallery**

Mr Philip Grayflex thanked Dr Rushmer for attending the meeting the previous night and Mr Grayflex shared Dr Rushmer's view on providing sustainable services for the West Cumberland population. Future provision and demand for services had to also include the potential increase of services at the Sellafield Nuclear Plant, which will make it the largest Nuclear Plant in Europe. Mr Grayflex stated that he was not asking for a response but asked Board member to note of what he had said.

Mr Eric Martlew expressed his dissatisfaction in relation to the Public Board papers not being uploaded onto the Internet till late afternoon the previous day. He was also concerned that there were no sets of papers available for the public at the meeting. In relation

to the meeting the previous evening Mr Martlew reported that he felt this was a big issue for the West Cumbrian population and this had to be addressed. He thanked Dr Rushmer for attending the meeting.

Mrs Farrar responded to Mr Martlew's concern relating to the West Cumberland Hospital issue and stated that the health needs for the Cumbrian population were very much in the forefront. The Clinical Commissioning Group took responsibility of the health needs but the Trust was working in close partnership regarding the hospital services required to cover health needs.

Ms Tiller reported that the Board would address Mr Martlew's concerns relating to the production of the papers for this meeting.

A member of the public stated she was pleased to hear the information regarding safety and quality. For the previous year there had been a lot of focus on patient experience and now valid clinical outcomes were showing the results of this.

TB58/14 STRATEGY, POLICY AND ENGAGEMENT

a) R&D Strategy

Mr Rushmer informed Board members on the work being undertaken in relation to research and development. In relation to staff recruitment research was being added to a number of posts to make them more attractive for applicants. The Trust has joined the North East network and is already receiving additional support from this. Professor Barton questioned the information relating to the number of patients being recruited into the trials and Dr Rushmer agreed to find this information out and pass it to Professor Barton.

The report was **APPROVED** by the Board.

ACTION

Dr Rushmer to provide information to Professor Barton on the number of patients being recruited into trials

TB59/14 DELIVERY

a) Finance Report

Mrs Ray, in the absence of Mr Shanahan presented The Finance Report, which was **RECEIVED** by the Board. Mrs Ray reported that the report had been discussed in depth at the Finance, Investment and Performance Committee and the key points to note were

- Plans were in place with the Trust Development Authority in relation to the Trust being in deficit. There was a lot of reasons for this and these included clinical income being ahead of plan,

additional activity not paid for yet, Outpatients being ahead of plan, A&E numbers increasing, non-pay being ahead of plan

- Agency spend had decreased this month
- The Trust continued to work closely with the Trust Development Authority in relation to its financial requirements and would be submitting another application for Distress Funding in December 2014.

The report was **NOTED** by the Board.

b) **Core Performance Report**

The report outlining the Trust's delivery of core standards and key areas of under-performance was **RECEIVED** by the Board. Mrs Ray reported that the key points to note are:

- The key targets being met are MRSA, C Difficile, Cancer 31 day, Cancer Screening and 4 hour A&E
- The key targets not met but where improvement plans are in place are Cancer 62 day pathway, cancer 2 weeks waits, 18 weeks admitted pathway at Trust and Speciality level, Cancelled operations and 6 weeks diagnostics. Work is ongoing in all these areas to improve the patient journey.
- The clinicians were working on plans to move a proportion of the work in Urology/General Surgery to the West Cumberland Hospital and it was expected that this would be finalised by November 2014.

The report was **APPROVED** by the Board.

c) **Workforce Report**

Mr Gallagher updated members of the Board on the current position relating to the workforce of the Trust. The information was regularly monitored at the monthly workforce committee and where slippage individuals were asked to attend the meeting to give account and take appropriate action. Mr Gallagher gave details of the current plans in place regarding statutory and mandatory training, appraisals and sickness reporting.

The report was **APPROVED** by the Board.

i. **Organisational Development Plan**

Mr Gallagher presented the Organisational Development Plan which was **RECEIVED** by the Board. Mr Gallagher reported that the document was still in draft and further changes to the action plan would be made. The document would also align with the strategic objectives of the Trust. Mrs Ray informed members that it was a positive thing to have in place from the operational perspective and would support the Business Unit teams.

The report was **APPROVED** by the Board.

d) **Questions from the Public**

There were no questions from the members of the public.

TB60/14 **REGULATORY**

a) **TDA Self Certification**

The Board **RECEIVED** the TDA Self Certification Report for July. Mrs Ray reported that this was a regular report that was sent to the Trust Development Authority and there had been no change in the information during the past couple of months. Plans were in place to improve the Trust status from red to amber in some areas in the forthcoming month and it was further hoped that the amber rating for appointments would be moved to green. Mrs Duguid informed members of the positive CQC away day which had been well represented by Trust staff and reported that she would give feedback from the session at the November Board meeting.

The report was **APPROVED** by the Board.

ACTION

Mrs Duguid to report back to the Board at the November meeting on the feedback from the CQC away day,

b) **Security, Health and Safety Annual Report**

In the absence of Mr Steve Shanahan, Mr John Mitchell presented the Security, Health and Safety Annual Report to the Board members. Mr Mitchell reported on the work that had been done within the Trust and the work that was ongoing to ensure the safety of staff, patients and visitors. Mr Mitchell further reported that in regard to training, he was working with the Business Unit and departments to address any concerns. Mrs Farrar questioned if a training date had been agreed and asked Mr Mitchell to inform her of the date. Mrs Farrar further asked Mr Mitchell if he required any support to help ensure all areas of his work were covered and to report back to Mrs Farrar regarding this.

The report was **APPROVED** by the Board.

ACTION

1. Mr Mitchell to inform Mrs Farrar of the training date that had been arranged.
2. Mr Mitchell to report back to Mrs Farrar regarding any additional support he may require.

c) **Sustainability Annual Report**

Mrs Farrar presented the Sustainability Annual Report which was received by members. The report gave details of the progress made by the Trust, in the various areas relating to sustainability. The report also noted the areas of concern that the Trust had to address.

Members discussed the practicality of a sustainability committee but it was agreed that the discussion should take place outwith the Board meeting.

The Annual Report was **APPROVED** by the Board.

d) **SIRO/Caldicot Guardian Annual Report 2013/14**

Mrs Farrar reported that Mr Graham Putnam had been the Caldicott Guardian for the Trust for a number of years. The Annual Report gave details of the work undertaken by Mr Putnam in this role. The report also gave details of the workplans for 2014/15.

The Annual Report was **APPROVED** by the Board.

e) **Questions from the Public**

There were no questions from the public.

TB61/14 **FOR INFORMATION**

a) **Safety and Quality Committee – June and July 2014**

The minutes were **RECEIVED** for information.

b) **Workforce Committee – July 2014**

The minutes were **RECEIVED** for information.

c) **EMT – August 2014**

The minutes were **RECEIVED** for information.

d) **Declarations of Interest 2014**

The register of interests was **NOTED**.

e) **Audit Committee – July 2014**

The minutes were **RECEIVED** for information. Members noted that the minutes had now been ratified by the Audit Committee members. Mr Evens informed the Board that the Trust now had new Internal Auditors that they would be working with.

f) **Risk & Assurance Committee – July 2014**

The minutes were **RECEIVED** for information.

TB62/14 ANY OTHER BUSINESS

- a) Ms Tiller, on behalf of the Board, thanked Mr Gallagher for the work he had undertaken during his five years working with the Trust and wished him well in his new role.

There was no other business to discuss

TB63/14 DATE, TIME AND LOCATION OF NEXT MEETING

Tuesday, 25 November 2014 at 1pm in the Board Room, West Cumberland Hospital.