

North Cumbria University Hospitals 
NHS Trust

**MINUTES OF THE TRUST BOARD MEETING
HELD IN PUBLIC ON TUESDAY 27 JANUARY
2015 AT 1PM IN THE BOARD ROOM, WEST
CUMBERLAND HOSPITAL**

Present:

- Ms G Tiller, Chair**
- Mrs A Farrar, Chief Executive**
- Mr M Evens, Non Executive Director**
- Mr M Cook, Non Executive Director**
- Dr H Dixon, 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**
- Mr S Shanahan, Director of Finance**

In Attendance:

- Mrs R Duguid, Acting Director of Governance**
- Mr L Morgan, WCH Director**
- Mrs J Stockdale, Head of Corporate Affairs/Acting Company Secretary**
- Mr D Blacklock and colleagues, Healthwatch**

TB1/15 APOLOGIES FOR ABSENCE

Apologies for absence were received from Professor R Barton.

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.

TB2/15 MINUTES OF THE LAST MEETING

The minutes were **APPROVED** as a correct record.

TB3/15 MATTERS ARISING AND ACTION PLAN

No matters arising were discussed.

The action plan was **APPROVED** as follows:

TB57c/14 Ward Accreditation presentation on January agenda.
Action complete.

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| TB57f/14 | Winter plan presented at November meeting. Action complete. |
| TB60b/14 | Mr Farrar to pick up the issues with Mr Shanahan and Mr Mitchell outside of the meeting. Action complete. |
| TB71d/14 | Safeguarding information circulated to Board members. Action complete. |
| TB71f/14 | TDA Self Certification report updated. Action complete. |

TB4/15 **PATIENT STORY**

Mr Evens provided an overview of the key points in relation to a patient story that had been presented to the Board earlier that day at the private meeting by a patient.

The patient, who was also a member of staff, outlined her experience of the pathway journey whilst undergoing a surgical procedure.

The issues related to having to walk from the ground floor assessment area to theatres on the first floor in a hospital gown, which created privacy and dignity and infection control issues and a failure to take bloods at the appropriate time.

Mrs Naylor outlined the actions that had been undertaken following these concerns being raised, as follows:

- The grey screens in the atrium had been removed and reviews were now being undertaken within the department.
- Patients were now being given the choice of where they were able to get changed for theatre, e.g. the assessment department or within theatres, so as to address the privacy and dignity issues.
- The public and visitors are now requested to wait whilst patients use the lifts.
- New dressing gowns and slippers have been ordered for patients to use.
- Mrs Naylor and Mrs Ray had 'walked' the patient pathway from assessment to arrival at theatre and had discussed this with patients so as to get feedback to make further improvements.
- The issue of blood-taking prior to surgery had been addressed via induction and training staff.

Mr Evens commented that the Board had appreciated the patient, and member of staff, sharing her experience, as it had allowed improvements in patient care to be carried out.

TB5/15 SAFETY AND QUALITY

a) **West Cumberland Hospital Fire**

Mr Morgan gave a presentation which outlined details of the fire, and action taken, which had taken place on Friday 23 January in the energy centre of the new West Cumberland Hospital.

Mr Morgan commended staff for their support in helping to ensure that the hospital site remained as 'business as usual'.

Mr Morgan explained that he was currently in the process of looking at temporary energy solutions, explaining that there was some fairly robust systems available, and that these would be explored. Mr Morgan said that it was inevitable that there would be insurance dispute, however, facts would need to be established which would then dictate where the liability would sit, which would either be the contractors and their insurers or the NHS Litigation Authority.

Mrs Farrar said that although this had been a sad event for everyone, it was still 'business as usual' and everyone needed to move forward. She commended staff and said that they had been magnificent. She reassured the Board that the public would be kept updated and a communication would be sent out before March.

The Board **NOTED** the positive aspect of solutions being investigated and the current position in relation to the investigation.

ACTION:

Communication to the public and stakeholders in relation to progress to be sent out in March.

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

Mrs Naylor presented a report to the Board which outlined the progress achieved against the delivery of the Chief Inspectors' Improvement Plan.

The report explained that the key risks and challenges remained within the nurse staffing levels in key wards and service area, but assurance was given to the Board that plans were in place to improve nurse and medical staff recruitment.

Mrs Farrar reported that the Chief Inspectors' revisit to the Trust was to take place between 30 March – 1 April 2015 and information in relation to the Key Lines of Enquiry would be forwarded to the Care Quality Commission in early February.

In discussing the achievement of the 'must do's', Dr Rushmer explained that these were the 'day to day' business, but what was

difficult was applying the same level of dedication to the Chief Inspectors' preparation due to the pressures in the system. Mrs Naylor explained that Norovirus had had a significant impact on the 'must do's' due to the additional pressure in the system.

Following discussion, the Board gave its **APPROVAL** to the plan of action for addressing the 'must do's' to the satisfaction of the Board.

c) **Safety & Quality Report Q3**

Dr Rushmer and Mrs Naylor outlined the key points of safety and quality performance for quarter 3.

Areas of concern related to performance in the accurate recording and documentation to support escalation in relation to the national early warning scores (NEWS) and complaint response times. However, action plans were in place and the Safety & Quality Committee would continue with their monitoring.

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

d) **Control of Infection Outbreak**

On behalf of Dr Graham, Dr Rushmer gave an update to the Board with regard to the second Norovirus outbreak on the Cumberland Infirmary site.

The outbreak was continuing to have a significant impact operationally, with increased waiting times in the emergency department and cancellation of elective procedures. The Director of Infection Prevention and Control, Dr Graham, had identified a number of additional actions which he believed would mitigate further outbreaks in the future.

In answer to a question as to how many members of staff had caught Norovirus, Mrs Ray reported that this was approximately 30 and the majority of these had been back office staff.

The Board **NOTED** that daily outbreak meetings were being held so as to review progress and to identify controls being put in place and associated costs etc. Mrs Ray reported that a majority of controls had already been put in place within existing budgets and these were outlined in the report.

Mrs Farrar said that the outbreak was a significant issue for the Trust and was having a big effect on patient flow and she assured the Board that the Executive Team were fully addressing this issue and hoped that the outbreak would cease within the next few weeks with the current action being taken.

Following discussion, the Board **APPROVED** the proposed additional measures and **NOTED** the requirement for a business

case to be developed for doors to be placed on bays and more timely diagnostics.

e) **Medical Director's Report**

Dr Rushmer gave an update to the Board in relation to mortality, medical recruitment, medical appraisal and revalidation and NICE best practice.

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

f) **Nursing Workforce Ward Assurance**

Mrs Naylor presented her report which provided details of the November and December staff rates for all wards, in both hospitals.

Although no single ward was causing significant concern, there were a number of wards, predominantly at WCH, that were being monitored by the senior nurse leadership team.

Mrs Naylor outlined the plan to provide safe staffing, which was to be put in place to deliver improvements in relation to ward fill rates and quality metrics.

Mrs Naylor updated the Board on international nurse recruitment.

The Board **APPROVED** the improvement plan to provide safe staffing.

g) **Ward Accreditation Framework**

Mrs Naylor gave a presentation providing details to the Board of the results following the first series of ward accreditation assessments.

Mrs Naylor welcomed Ms G Williamson, Ms J Sewell, Ms CBell, Ms A Tomlinson and Ms R McCartney to the meeting, so as to answer questions from Board members following their wards undergoing the accreditation process.

Staff who had undergone the accreditation explained that the process had allowed them to identify their weaknesses, made them look at things differently, and overall, as teams, allowed them to work to set standards and to monitor their progress.

Dr Rushmer felt that this was a fantastic opportunity to improve how care was provided by both nurses and doctors. He commended Skiddaw Ward for the development of an excellent assessment tool within patient notes.

The staff fed back their experience from being involved in the recruitment of nursing staff from Portugal, explaining that lessons

had been learned which would make the future recruitment of international nurses much better.

The Board thanked Mrs Naylor and the staff who attended for their feedback and looked forward to receiving the outcome of the second series of ward accreditation.

Questions from the public

1. Ms V Stucke enquired as to the concerns outlined in the Safety & Quality Report regarding the recording of basic observations. Dr Rushmer explained that this related to a mandatory set of observations required to be entered onto a patient record sheet. However, the team had added additional observations on the sheet but the two sets of observations had not been tied up. Action had been taken by Dr Rushmer and Mrs Naylor to ensure the required improvements were achieved.

TB6/15

STRATEGY, POLICY AND ENGAGEMENT

a) Review of Plan Delivery 2014/15 and Process for 2015/16

Dr Freake presented a report which provided a review of the overall progress against the Master Change Plan delivery of the 2014/15 Annual Plan and described the process for the development of the Annual Plan for 2015/16.

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

b) Draft Quality Strategy

Mrs Naylor presented the Trust's Quality Strategy 2015-18 for Board approval.

Mrs Naylor extended her thanks to Mrs Duguid to developing the strategy and explained that a final design version was being finalised.

Board members welcomed the Strategy, although recognised that much of the work was currently being undertaken and was not necessarily aspirational.

The Board **APPROVED** the Strategy.

c) Draft Clinical Strategy Feedback

a. Clinical Options Engagement and Activity: Staff Feedback

Mrs Riley presented her report which provided details of the engagement activities undertaken with staff following the publication of the Clinical Options report in November 2014.

Mrs Riley confirmed that although the Trust was not leading on the consultation process, it was important to receive feedback from staff.

The recommendations outline in the report relating to the next steps were **APPROVED** by the Board.

b. **Clinical Options Engagement and Activity: Healthwatch Feedback**

Ms Tiller welcomed Mr D Blacklock, Healthwatch, and his team to the meeting.

In relation to the clinical options engagement, Healthwatch had led on public engagement activities and had attended the meeting so as to feedback to the Board following these events.

Mr Blacklock outlined his report to the Board explaining that the events had been well attended by members of the public and members of staff.

Mr Blacklock requested the Trust respond to the report within 20 days, following which, a copy of the Trust's response would be sent to all those who had attended the event. Mr Blacklock requested the Trust to take into account the comments made by members of the public and staff that were outlined in the report when taking forward the clinical options. Mrs Riley explained that as the Clinical Commissioning Group were leading on the consultation, there would be answers to some of the questions raised within the feedback that the Trust would not be able to answer as these would form part of the consultation. Board members commented that although the report was not in response to the consultation, it was nevertheless an important piece of work undertaken by Healthwatch and one which the Trust would respond to.

The Board discussed the system as a whole continuing to engage with the public and local communities and to keep the dialogue going and to increase visibility.

The Board **AGREED** that a response would be sent to Healthwatch within the required timescales, and by March, the Board to receive a summary of how the Trust had responded by listening to the public views.

ACTION:

Response to be sent to Healthwatch by 23 February the Board to receive a summary of how the Trust had responded by listening to the public views.

d) **Staff Engagement**

Mrs Riley presented a report which outlined the extensive staff engagement activity that had taken place across the organisation in line with the Chief Inspector of Hospitals' Improvement Plan.

Mrs Farrar reiterated that staff engagement was a major issue on which the Trust would be assessed upon.

Mrs Riley extended her sincere thanks and appreciation to the Communications Team over the last 12 months as the workload had been, and continued to be, immense. Although the Communications Team at Carlisle had received limited support from Northumbria colleagues, the two teams had nevertheless worked well together.

The Board **APPROVED** the staff engagement plan report.

Questions from the Public

In answer to a question as to the distinction between 'consultation' and 'engagement', Mrs Riley explained that the Cumbria Clinical Commissioning Group (CCG) had the responsibility for changing services and to consult, whereas the Trust would engage. Consultation was based on a fixed time period, whereas engagement was a continuous process.

TB7/15

DELIVERY

a) **Finance Report**

Mr Shanahan presented a report outlining the Trust's financial position as at the end of December 2014.

Mr Shanahan reported that the Trust's financial recovery plan had been submitted to the NHS Trust Development Authority (TDA), with a total agreed deficit of £28.4m. Discussions were continuing with the TDA with regard to mitigating actions to keep within the agreed deficit. Executive Directors were meeting on a weekly basis so as to discuss progress. Mr Shanahan voiced his disappointment that reducing expenditure continued to be a struggle, despite all controls being in place. He confirmed that the Clinical Commissioning Group would provide some back-up to the Trust should it go over its planned deficit, however, every effort would be made to avoid this. Mrs Farrar reassured the Board that the Executive Team was taking a collective approach and was looking at achieving efficiencies in the round and any major decisions would be shared with the Board.

In reviewing the detail outlined in the report, Mr Evens queried the non pay expenditure in relation to premises being £2.135m higher than plan. Mr Shanahan stated that he was unsure as to the detail but would advise Board members after the meeting.

The Finance Report was **NOTED** by the Board.

ACTION:

Mr Shanahan to provide details to the Board in relation to the premises non pay expenditure being higher than plan.

b) **Core Performance Report**

Mrs Ray presented a report which outlined the Trust's progress in relation to delivery of the core standards, highlighting by exception, key areas of underperformance and the improvement plan to improve delivery.

Mrs Ray commended the hard work of staff, as without their support, the Trust's position in relation to the A&E and 18 weeks performance would be significantly worse.

The Norovirus outbreak continued to have a major impact, as operations had had to be cancelled as a direct result and the Trust was now under trajectory in relation to the A&E action plan and 18 weeks. Mrs Ray explained that £3m of funding had been secured so that support could be utilised within the independent sector.

In relation to patient discharges, Mr Evens queried whether there were other factor affecting these other than Norovirus. Mrs Ray explained that community colleagues were experiencing significant challenges, along with gaps in primary care in the West, which was impacting on the Trust discharging patients. Mrs Ray extended her thanks and appreciation to the Adult Social Care team as they had done an excellent job in helping to get patients back home with care packages.

Mrs Farrar thanked Mrs Ray and her team and said that she felt confident that the Trust's performance would improve once Norovirus was eradicated in the hospital.

The Core Performance Report was **NOTED** by the Board.

TB8/15 **REGULATORY**

a) **TDA Self Certification**

Following discussion of the Self Certification Report, the Board **APPROVED** the recommended RAG ratings and the level to allocate for the monthly submission.

b) **Standing Orders**

The Board **APPROVED** the proposed amendment to the Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions, which outlined the shared vote between the

Executive Chief Operating Officer and the Executive Director of Strategy, in relation to the composition of the membership of the Trust Board.

c) **Charitable Funds Accounts 2013/14**

The Board **RECEIVED** for **INFORMATION** the Charitable Funds Annual Report and Accounts for 2013/14.

The Charitable Funds Committee had approved the report, on behalf of the Corporate Trustee, at the Charitable Funds Meetings on 22 January 2015.

Mrs Farrar requested the Charitable Funds Committee discuss suggestions on how to promote charitable contributions and to outline these at the meeting in March.

ACTION:

Charitable Funds Committee to discuss suggestions on how to promote charitable contributions and to outline these at the meeting in March.

TB9/15 **FOR INFORMATION**

a) **Trust Board Sub-Committee Business Report**

The report was **RECEIVED** for **INFORMATION** by the Board.

TB10/15 **DATE, TIME AND LOCATION OF NEXT MEETING**

Tuesday, 24 March 2015 at 1pm in the Board Room, Cumberland Infirmary.