Trust Board
Minutes of the Trust Board meeting held in public on Wednesday 13 November 2013 at 10:00 in the George Pickering Postgraduate Centre, The John Radcliffe Hospital.

Present: Dame Fiona Caldicott FC Chairman
Sir Jonathan Michael JM Chief Executive
Mr Christopher Goard CG Non-Executive Director
Mr Geoffrey Salt GS Non-Executive Director
Mrs Anne Tutt AT Non-Executive Director
Mr Peter Ward PW Non-Executive Director
Professor Edward Baker EB Medical Director
Mr Paul Brennan PB Director of Clinical Services
Mr Mark Mansfield MM Director of Finance & Procurement
Mr Paul Jones PJ Interim Director of Workforce
Mr Andrew Stevens AS Director of Planning & Information
Mr Mark Trumper MT Director of Development and the Estate
Ms Eileen Walsh EW Director of Assurance
Ms Liz Wright LW Acting Chief Nurse
Professor Sir John Bell JB Non-executive Director
Professor David Mant DM Associate Non-executive Director

In attendance:
Mr Eric Sanders ES Head of Corporate Governance

Apologies Mr Alisdair Cameron AC Non-Executive Director

TB138/13 Apologies and declarations of interest
Apologies had been received from Mr Alisdair Cameron, Non-Executive Director.

No declarations of interest were made.

TB139/13 Minutes of the meeting held on 11 September 2013
The minutes were approved and signed as a correct record.

TB140/13 Matters arising from the minutes
There were no matters arising from the minutes.

TB141/13 Action log
The Trust Board agreed the updated status of the actions as presented.

TB142/13 Chairman's Business
The Chairman advised that she had no business to raise.

TB143/13 Chief Executive's Report
The Chief Executive presented the report and highlighted the following:

- The revised clinical divisional structure was now in place and Dr Anne Thomson was thanked for her enormous contribution to the Trust over the last 24 years, upon her retirement.
The Trust had been included in the second wave of the CQC’s new inspection programme and would be visited from 24 February 2014;

The Trust Board noted the report.

**TB144/13 Patient’s Story**

The Acting Chief Nurse presented a patient’s story which outlined the issues faced by a patient who, following a fall in a care home, was brought to the Emergency Department. The environment there was noted as a particular issue as it often created or increased confusion in patients with dementia due to the noise, lighting and unfamiliar surroundings. The following additional issues were highlighted:

- There was a need for clear explanation to the patient and their carers on the process and the expected waiting time;
- Communication between the Trust and care home needed to be reviewed, particularly relating to information given on discharge;

The Trust Board discussed the issues of the environment and the lessons learnt from other Trusts. It was recognised that there was a need to improve the environment and create an area which was more suitable for patients with dementia. The Medical Director also highlighted the need to review the pathway for patients with dementia and whether they could be treated in an alternative location as recommended in the Keogh report.

The Trust Board noted the story and the lessons learnt.

**TB145/13 Monthly Quality Report**

The Medical Director presented the report and highlighted the following points:

- The new format of the report included a range of divisional and trust-wide metrics;
- There had been an increase in the number of falls in October 2013, and the root cause analysis from all eight falls had not initially identified any common factors;
- The Trust was not performing well against the target to screen all patients for dementia;
- Detailed information on pressure ulcers was included following the previous request by the Trust Board;
- Performance against the clostridium difficile target was very good in year to date.

The Chief Executive clarified that although the report indicated that the Trust had reported three cases of MRSA in the year to date all had been classified as unavoidable by the Clinical Commissioning Group and therefore did not count towards the target. This was agreed and the RAG rating of the report would be updated to reflect this detail.

Geoff Salt, Non-executive Director, queried whether the Trust would be fined for the performance against the Pressure Ulcer target. It was confirmed that the Trust had discussed the overall performance against the CQUIN targets with the Clinical Commissioning Group and had agreed that for pressure ulcers the year-end target would be based upon the level of performance achieved at the end of quarter 2. This recognised the need to reset the baseline due to past inaccuracies in reporting. It
was noted that this was a challenging target and the Trust would be working hard to achieve the required 50% reduction.

Sir John Bell, Non-executive Director highlighted the continued rise in incident reporting and suggested that if the rise was solely down to the implementation of the electronic reporting system it would have been expected to see a plateau in the level of reporting. This issue was discussed and the Medical Director made reference to the graph which demonstrated that there had been no overall increase in harm. It was also recognised that due to the national focus on patient safety there was a greater awareness amongst staff of the need to identify and report incidents, which may also have impacted on the levels of reporting.

The Trust Board noted the report.

TB146/13 Medical Appraisals Rates 2012/13
The Medical Director presented the paper responding to a letter received by all Trusts from Sir Bruce Keogh which required that Boards of NHS Trusts be made aware of the levels of appraisal of doctors. The Medical Director confirmed that the Trust had a high percentage of doctors who had had appraisals, and there was a system to follow up any doctor who had not. In addition over 100 doctors had been revalidated.

Anne Tutt, Non-executive Director, highlighted that the Audit Committee had received an internal audit report on the process, within which was noted the reliance on manual processes. To ensure sustainability this approach needed to be reviewed and the Board should be aware of this.

The Trust Board noted the report.

TB147/13 Review of Cardiac Surgery
The Director of Clinical Services presented the report and highlighted:

- The Chief Executive had commissioned an independent review following concerns raised by staff internally and to the CQC;
- Sir Bruce Keogh had been asked to recommend someone to lead the review to ensure the highest level of expertise;
- An Independent Oversight group was also implemented and was chaired by Peter Ward, Non-executive Director;
- The Director of Clinical Services had reviewed the recommendations with the division and had developed an action plan;
- The report had been shared with the division and a letter had been received from a number of cardiac surgeons raising concerns about the report. A meeting had been arranged to discuss these concerns in more detail;

Chris Goard, Non-executive Director, highlighted that given that the report demonstrated there were issues with team dynamics and culture, and that the stated actions would not necessarily address these, how was the Board to be assured that these issues would be addressed.

The Trust Board discussed the issue of changing the culture and acknowledged that the issues being presented were embedded and would take time to change. There was a strong commitment to address these issues, particularly from the staff within
the department, and the Director of Clinical Services was asked to update the Board on progress at regular intervals.

**Action: Director of Clinical Services**

The Trust Board discussed the report and the recommendations, noted the comments from the Independent Oversight Group, and approved the actions as described.

**TB147/13 Theatres Review**
The Director of Clinical Services presented the report and highlighted:

- The report presented the findings of a review of theatres across the Trust;
- The report was commissioned following the identification of two Never Events in theatres;
- The draft report had not been accepted by the Trust. However the themes from the recommendations had been identified and been translated into an action plan;
- It was confirmed that the report and action plan had been shared with the CQC.

The Medical Director advised that he had visited the Churchill Theatres since the review and had noted a sea change in behaviours and processes.

Anne Tutt, Non-executive Director noted that staffing was a particular issue in Churchill Theatres and queried whether there were issues in other theatres. It was noted that staffing in Churchill Theatres was a specific issue due to a change in the number of theatre sessions, and safe levels had been maintained using agency staffing.

The Trust Board noted the initial work completed in February and March 2013 and approved the actions developed in response to the recommendations that had been accepted.

Sir John Bell, Non-executive Director left the meeting at 11:10.

**TB148/13 Integrated Performance Report**
The Director of Clinical Services presented the report and highlighted:

- The 4 Hour A&E target had been achieved for Quarter 2 and October 2013, in the context of rising activity levels;
- The 18 week referral to treatment targets had been achieved for admitted and non-admitted. There had been an increase in activity relating to referrals from other hospitals and also linked to changes in specialised commissioning;
- Diagnostic waits for longer than the target set had been reduced from over 2000 to 200.

Professor David Mant, Associate Non-executive Director asked for an update on Delayed Transfers of Care. The Director of Clinical Services advised there had been little change. The Supported Hospital Discharge Service had a current case load of 60 which was supporting the reduction in the number of Delayed Transfers of Care. However these still averaged 150 across the health system.
The Trust Board were advised that the Local Authority were commissioning a service similar to the Supported Hospital Discharge Service, which would support patients in the interim period before longer term care plans were developed and implemented. It was anticipated that this would have a positive impact on the number of Delayed Transfers of Care.

The Trust Board discussed the issue of patient choice and how this impacted on the performance against a number of targets. The Director of Clinical Services was asked to provide an update to the Trust Board on how managers and clinicians influenced patient choice.

**Action:** Director of Clinical Services.

The Trust Board received the report.

**TB149/13 NHS Trust Oversight Self-Certification**
The Director of Planning and Information presented the paper highlighting:

- The Trust had reported amber/green performance against the Governance Risk Rating for September 2013. This was due to not achieving the 62 day wait cancer target and related to small numbers of patients and patient choice;
- The Trust was green against the Financial Risk Rating.

The Trust Board noted the report.

**TB150/13 Financial Performance**
The Director of Finance and Procurement presented the paper highlighting:

- Commissioning income exceeded the Trust’s plan by £13m, of which three quarters related to specialist commissioning;
- £2.5m of the additional income related to pass through drugs, and the remainder related to additional activity;
- The additional income was offset by additional expenditure;
- £3.6m more had been spent on bank and agency staff compared to the same period in the previous financial year and this remained a risk to the financial position and a risk to the quality of service being delivered;
- The Cost Improvement Plan was £1m short against the plan;

Peter Ward, Non-executive Director, queried the financial risk associated with the high use of bank and agency staff. It was confirmed that the Trust was currently operating within budgets. However the use of agency staff was associated with high premium costs and it would be preferable to reduce these.

It was noted that the two cost improvement plans with significant shortfall against plan had been impacted by higher than anticipated levels of activity.

Geoff Salt, Non-executive Director queried whether the level of capital spend of 1% was sufficient to address all of the areas, including the replacement of equipment. This issue was discussed and it was noted that the ability of the Trust to generate capital related to the level of depreciation of assets which was also linked to activity levels. The Trust’s capital programme was being reviewed as part of the development of the Long Term Financial Model.
The Trust Board noted the report.

**TB151/13 Specialised Commissioning Update**
The Director of Planning and Information presented the paper highlighting:
- NHS England had implemented a number of clinical reference groups to review specialised service specifications to bring a level of consistency in service provision across the country;
- The Trust had been required to assess itself against the specifications, and where it was not currently compliant, seek derogation. This would allow the Trust time to make the necessary changes and meet the requirements;
- The Trust had applied for derogation against seven services and each has an action plan to achieve compliance;

The Trust Board noted the report and approved the proposed governance arrangements.

**TB152/13 Performance on Initiating Trials**
The Medical Director presented the report and highlighted that performance against a number of targets needed more active management to ensure they were achieved.

The Chief Executive advised that the Trust was not an outlier against these targets. The Trust would be hosting the local clinical research network which would support the Trust improving collaboration amongst research partners.

Professor David Mant, Associate Non-executive Director, suggested that the Trust could improve its performance by doing less research, and the Trust should consider setting its own internal metrics to determine the quality of research being undertaken.

The Trust Board noted the report.

**TB153/13 Safeguarding Children and Adults Annual Report 2012/13**
The Acting Chief Nurse presented the combined annual reports and highlighted:
- There had been a strong focus on increasing the number of staff trained in safeguarding and further work was required as described within section 71.;
- The Trust had actively engaged in the work of the Local Safeguarding Children's Board and cooperated fully with Operation Bullfinch which had investigated child sex exploitation within Oxfordshire;
- There had been an increase in the number of Deprivation of Liberty applications which reflected a growing awareness and training in this area;
- A joint CQC and OFSTED review of children’s services in Oxfordshire had given a verdict of Good.

The Trust Board noted the report.

**TB154/13 Workforce Performance – Quarterly Review**
The Interim Director of Workforce and Organisational Development presented the information for quarter 2 and highlighted:
- The paper presented data for the legacy clinical divisional structure and would be updated for future reports;
• Improvements in vacancy levels were expected in quarter 3 but there was a need to address the high levels of turnover as these remained above target;
• The sickness rate at 3.1% benchmarked well with other similar sized organisations. However this was higher than expected for the time of year and would be expected to increase through the winter.

Peter Ward, Non-executive Director, queried the high turnover in the workforce department and asked what actions were being taken. The Interim Director of Workforce explained that a meeting within the department had been planned to consider actions achieving improvement.

Chris Goard, Non-executive Director, flagged that stress, anxiety and depression had led to the greatest loss of WTE, and questioned the actions being taken. The Interim Director of Workforce confirmed that this area had been prioritised for review during quarter 3, but initial review suggested that this was related to the pressure of work.

The Trust Board noted the paper.

TB155/13 Information Governance Toolkit – Mid-Year Review
The Director of Planning and Information presented the update report and advised that good progress was being made against the target, with 88% of staff undertaking training. The key focus remained on achieving the required level of training on Information Governance.

The Trust Board noted the update.

TB156/13 Academic Health Science Centre Application
The Chief Executive presented the application, for information, which had been submitted for consideration by the panel. The applicants had been interviewed at the end of October 2013, with feedback expected towards the end of November 2013.

The Trust Board noted the application.

TB157/13 Assurance Strategy Review
The Director of Assurance presented the review and advised that the majority of areas had been progressed and the areas where further work was required would be addressed once recruitment to a number of key roles had been completed.

The Trust Board noted the review.

The Director of Clinical Services presented the report which described the good progress over the previous time period. The Trust had been tested by two real incidents relating to the loss of water supply and power, and had managed well. Further work is underway to test the resilience of the business continuity plans.

The Trust Board noted the report and the progress being made.
TB159/13 Research & Development Annual Report 2012/13
The Medical Director presented the report which included the work of the Biomedical Research Centre and the good progress being made by the Joint Research Office.

The Trust Board noted the report.

TB160/13 Foundation Trust Update
The Director of Planning and Information presented the report and highlighted the current expected timetable, and the key focus for the two months which would be on preparing for the planned CQC inspection in February 2014.

The Trust Board noted the report.

TB161/13 Board Assurance Framework and Corporate Risk Register Mid-Year Review 2013/14
The Director of Assurance presented the report and highlighted the key risks relating to the management of Delayed Transfers of Care and the alignment of the Trust’s plans with those of the Commissioners.

The Trust Board discussed the risks and agreed that the following risks needed to remain on the Corporate Risk Register and asked the Trust Management Executive to review:

- 2.1 – Failure to effectively control pay and agency costs.
- 6.1 - Difficulty recruiting and retaining high-quality staff in certain areas.

It was also agreed that the description of risk 4.3 needed to be revised to reflect the need for the risk to focus on the misalignment of the Trust’s plans with those of its commissioners.

The Trust Board noted the report and approved the other proposed changes to the Corporate Risk Register.

TB162/13 Post Implementation Review: twin Theatres Development at the NOC
The Director of Planning and Information presented the review following implementation of the Trust Board approved business case. The key learning which had been taken from the project was that there needed to be a greater focus on forecasting the impact of any delays in a project and ensuring appropriate mitigation plans were in place and enacted. The learning would be used to inform the proposed renovation of the JR2 Theatres.

Issues with recruitment were also identified and these would be addressed through an aligned recruitment plan to support future projects where required.

The Trust Board noted the review and the learning identified.

TB163/13 Audit Committee Report
The Trust Board noted the report.

TB164/13 Finance & Performance Committee Report
The Trust Board noted the report.
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The Trust Board approved the Annual Cycle of Business.

No other business was discussed.

The next meeting is due to be held on Wednesday 22 January 2014 at 10:00 in the Postgraduate Education Centre, John Radcliffe Hospital.