

## Trust Board

Minutes of the Trust Board meeting held in public on **Wednesday 14 May 2014** 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
	Mrs Anne Tutt	AT	Non-Executive Director
	Mr Tony Berendt	TB	Interim Medical Director
	Mr Paul Brennan	PB	Director of Clinical Services
	Mr Mark Mansfield	MM	Director of Finance & Procurement
	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
	Mr Peter Ward	PW	Non-Executive Director
	Mr Geoffrey Salt	GS	Non-Executive Director
	Professor Sir John Bell	JB	Non-Executive Director
	Professor David Mant	DM	Associate Non-Executive Director
	Mr Alisdair Cameron	AC	Non-Executive Director
	Mr Christopher Goard	CG	Non-Executive Director
	Ms Liz Wright	LW	Acting Chief Nurse
	Mr Mark Power	MP	Director of Organisational Development and Workforce
In attendance:	Mr Eric Sanders	ES	Head of Corporate Governance
	Ms Catherine Stoddart	CS	Chief Nurse elect
	Mrs Susan Polywka	SP	Deputy Head of Corporate Governance
	Mr Neil Cowley	NC	Senior Delivery & Development Manager, NHS TDA
Apologies:	Ms Nicky Mowatt	NM	Senior Business Consultant, NHS TDA
	None		

### **TB14/05/01 Apologies and declarations of interest**

The Chairman welcomed the representatives from the NHS Trust Development Authority who were observing the Trust Board meeting as part of the assessment of the Trust in relation to its NHS Foundation Trust application.

No declarations of interest in the papers to be considered were declared.

### **TB14/05/02 Minutes of the meeting held on 12 March 2014**

The minutes were approved as a true and correct record of the meeting.

### **TB14/05/03 Matters Arising from the minutes**

There were no matters arising from the minutes.

### **TB14/05/04 Action Log**

The action updates were noted.

### **TB14/03/05 Chairman's Business**

There was no Chairman's business to note.

**TB14/03/06 Chief Executive's Business**

The Chief Executive presented a verbal report and highlighted:

- The reports from the CQC inspection from 26/27 February 2014, and the subsequent unannounced inspections, had been published that morning. The Trust had overall been rated as Good. Of the 115 rating judgements made by the CQC, 104 were Good, with 11 Requires Improvement;
- The report was discussed at a Quality Summit jointly chaired by the CQC and NHS Trust Development Authority on Monday 12 May 2014. Also involved were key external stakeholders including NHS England, Oxfordshire Council and Oxfordshire Clinical Commissioning Group;
- The report contained a number of very positive comments about the care provided by staff across all sites with numerous references to caring and compassionate staff. This demonstrated that the Trust's commitment to Delivering Compassionate Excellence was being shown by the staff;
- The areas requiring work primarily focused on the John Radcliffe Hospital which had struggled with the pressure of work, primarily through the Emergency Department. The Trust was working with colleagues across the Health and Social Care system to address the relevant pressures;
- A Peer Review Conference had been held on 24 April 2014, which was attended by over 100 members of staff to consider the findings from the initial peer reviews and to consider how the programme would be developed into the future;
- A public engagement event was held on 23 April 2014 to consider progress against the previous year's Quality Account priorities and to identify priorities for 2014/15;
- A rapid access clinic had been introduced at the Horton General Hospital to allow GPs to refer children for appointments. This was one of the measures introduced to reduce waiting times;
- A new Chief Executive, David Smith, had been appointed at Oxford Clinical Commissioning Group, and he was due to take up post in mid-June 2014;

Ian Wilson, Interim Chief Executive for Oxford Clinical Commissioning Group (in attendance in the public gallery) was thanked for his contribution to helping take forward the debate about health system issues across Oxfordshire.

The Trust Chairman echoed comments from the Chief Executive towards Ian Wilson. She also proposed that a joint letter with the Chief Executive was sent to all staff to thank them for their hard work and commitment which had resulted in the positive result in the CQC inspection.

Mrs Anne Tutt, Non-executive Director asked what was the timescale for developing an action plan against the recommendations from the CQC inspection reports. It was noted that the plan to address "Must do" actions was required by 12 June 2014, with the "Should do" action plan should be developed by 31 July 2014. The latter reflected the need to engage with external partners on the development of these actions.

The Trust Board noted the report.

**TB14/05/07 Patient's Story**

The Acting Chief Nurse presented the patient story and highlighted:

- The patient story reflected the views and comments of patients from vulnerable groups;
- A new style of template had been used to present the story as this could also be used to create a poster for display in staff areas as part of a suite of learning tools;
- The Trust had one Learning Disability Nurse and 49 Learning Disability Champions across the Trust;
- Work was underway to ensure that patients with Learning Disabilities could be discretely tagged on the EPR system so that adjustments in their care could be planned;

Mr Geoff Salt, Non-executive Director asked how the Trust Board would be assured that identified actions would be completed. It was noted that the Quality Committee would receive a regular report which described progress to close actions.

The Chief Executive advised that he had authored a report, on behalf of the Secretary of State, entitled "Healthcare for All" which considered this issue in detail.

Mr Peter Ward, Non-executive Director, enquired whether the Learning Disability Nurse was supernumerary and how the Trust ensured that on a day to day basis nurses didn't pass the responsibility for caring for patients with learning disabilities to this specialist nurse when it should be part of their core activities. The Acting Chief Nurse advised that planning was essential to know, whenever possible, when patients with learning disabilities were coming into hospital for care, so that adequate adjustments could be made.

Sir John Bell, Non-executive Director agreed that the story was a good example of the issues raised but questioned whether the action plan should look at care of all vulnerable patients and not just those with learning disabilities. The Chief Executive agreed that the Trust should be aware of the needs of all patients with cognitive impairments, and this would require healthcare organisations to work effectively together to share information and then apply appropriate adjustments.

The Trust Board noted the patient story.

**TB14/03/08 Update on Inpatient Diabetes Service**

The Interim Medical Director presented the paper and highlighted:

- The report was presented to update the Trust Board on progress to address issues in relation to the treatment of patients with diabetes following a Serious Incident Requiring Investment, a patient story and national audit data. An action plan had been developed, which had been supported by the Trust Management Executive, with £500k of investment agreed to support staffing;
- A Diabetes Quality Group had been constituted which included staff from all five divisions, subject matter experts, Oxfordshire Clinical Commissioning Group, patients and GPs;

Mr Alisdair Cameron, Non-executive Director suggested the need for more measurable outcomes. This was agreed.

The Trust Board debated the need to balance the presentation of detailed information with providing assurance that action was being taken. The Director of Assurance was asked to consider this issue.

Ms Anne Tutt, Non-executive Director asked why there was a delay until February 2015 to collect data. The Interim Medical Director advised that the data collection scheduled for 2015 would inform the next national audit, however the Trust was planning more timely data collections to inform progress.

Sir John Bell, Non-executive Director, advised that the care of patients with diabetes often required a focus on the cardiovascular system and not just their glucose levels and that this should be considered within the action plan. This was agreed.

Mr Geoff Salt, Non-executive Director, commended the Trust's Executive Management for picking this issue up so quickly and taking appropriate action. He queried whether clinical engagement on this issue was a problem. The Interim Medical Director advised that there was good clinical engagement evidenced through attendance at the Diabetes Quality Group.

The Trust Chairman questioned whether the Trust had engagement with the national diabetes quality group to share lessons learnt and good practice. This was agreed as a positive step and would be taken forward.

The Trust Board noted the report.

#### **TB14/05/09 Board Quality Report**

The Interim Medical Director presented the paper and highlighted:

- 15 of the 54 outcomes in the report had not been achieved;
- Six Serious Incidents Requiring Investigation were identified in April 2014;
- The Trust's SHMI was 0.96;
- CQUINs for 2014/15 were being negotiated in line with the agreement of the commissioning contracts;
- The out of hours risk summit was now being badged as Care 24/7 to recognise that the majority of care was undertaken outside the normal Monday to Friday 9-5 work pattern;

Mr Alisdair Cameron, Non-executive Director asked what the Trust's expectations were in relation to complaints. It was advised that the Trust had over 1.2m patient contacts per year and therefore the number of complaints represented a small proportion of these. A review of complaints handling was being undertaken and would look at trends within complaints.

The Director of Clinical Services advised that the majority of complaints were linked to outpatient appointments. Work was underway to ensure that there was sufficient outpatient clinic capacity to meet demand, and also to ensure that appointments could be booked via the Choose and Book system, as currently 51% were not available through this mechanism.

Professor David Mant, Associate Non-executive Director, asked whether the Trust was receiving a higher volume of complaints relating to patient care and why antibiotic prescribing was deteriorating. In regards to the latter, the Interim Medical

Director advised that he was investigating this issue and would report back in a future Quality Report. In regards to the former, the Acting Chief Nurse agreed to include more detail in relation to patient care complaints in the next report.

Mr Geoff Salt, Non-executive Director enquired as to the robustness of the challenge of Cost Improvement Programmes (CIPs) and how this was reported to the Trust Board. It was advised that there were regular reports through the Quality Committee and Finance & Performance Committee during 2013/14 on the quality impact assessment of CIPs. There was also a robust challenge to all proposed CIPs from the Acting Chief Nurse and Interim Medical Director, and plans had been rejected due to concerns about their impact on quality.

It was also confirmed that CQUINs had been agreed for 2014/15.

The Trust Board noted the report.

### **TB14/05/10 Nursing and Midwifery – Safe staffing levels report for the month of March 2014**

The Acting Chief Nurse presented report and highlighted:

- The report had been prepared to meet national requirements on the reporting of ward level staffing;
- Guidance from NICE had been published and was subject to consultation until 6 June 2014. This may require changes to the information reported;
- The report represents 12 months of activity to collect, refine and triangulate data on staffing levels, and would continue to be refined as further guidance was issued;

Professor David Mant, Associate Non-executive Director, enquired as to the process for moving staff to fill identified gaps in ward staffing levels. The Acting Chief Nurse advised on the process for monitoring staffing levels which included a twice daily staffing meeting attended by the senior nursing staff. Where staff were required to be moved this was agreed at this meeting.

The Director of Assurance commented that of 2015 shifts, only 15 required escalation. This was impressive given the complexity and size of the organisation. It was proposed that for shifts that required escalation the actions taken were described within the report. This was agreed.

Mr Christopher Goard, Non-executive Director questioned whether the Trust was able to benchmark this information with other comparable Trusts. This was planned. However other Trusts had not yet published this information and were planning to do so from June 2014.

The Chief Executive highlighted that the “Amber” rating referred to safe staffing levels and should not have been referred to as “sub-optimal” in the report.

The Trust Board noted the report and congratulated the Acting Chief Nurse and her team for pulling together the information.

**TB14/05/11 Integrated Performance Report**

The Director of Clinical Services presented the report and highlighted:

- The report presented information for March 2014;
- The Trust had achieved 93% against the 95% 4 Hour A&E target for 2013/14, despite there being additional investment in the health and social care community to support activity through the Winter;
- The Trust was focusing on reducing the overall size of the waiting list to a more sustainable level. The list had been reduced from over 14,400 to 11,000 in three months;
- Diagnostic waits had been reduced to 152. However as the waiting list had also been reduced the Trust was not yet achieving this target;

Mrs Anne Tutt, Non-executive Director asked what was the confidence level for achieving the targets in Quarter 1 2014/15. The Director of Clinical Services advised that the Trust would be back on track for April 2014 with data validation due to be completed at the end of the week. The Director of Clinical Services was asked to provide an update to members of the Board on April performance.

**Action: Director of Clinical Services**

The Director of Clinical Services also advised that the Trust was not expecting to be able to deliver the 4 Hour A&E target in Quarter 1 due to the level of activity and the number of breaches in April 2014.

The Trust Board noted the report

**TB14/05/12 Finance Report to 31 March 2014**

The Director of Finance and Procurement presented the report and highlighted:

- The report presented the unaudited financial performance for 2013/14;
- All targets had been met for the year;
- The Trust had over performed against its income target by £23m primarily due to increased specialised commissioning activity;
- The Trust had incurred significant additional expenditure to undertake this additional activity, with the majority of costs related to the use of bank and agency staffing and additional clinical supplies;
- A risk to the delivery of the capital programme had been raised at previous meetings of the Trust Board. This had been mitigated by bringing forward the delivery of a number of programmes from 2014/15;

Mr Peter Ward, Non-executive Director questioned what the issues were with forecasting capital expenditure and private patient income. It was advised that tighter controls around the capital programme had been instigated to ensure that expenditure aligned with the plan. In addition it was noted that the private patient market was volatile and private patient activity had been impacted by the need to prioritise NHS activity.

The Trust Board noted the report

**TB14/05/13 Workforce Performance**

The Director of Organisational Development and Workforce presented the report and highlighted:

- A revised reporting format was being used for the year-end report;
- There had been a net increase in substantive staff during the year of more than 500, with the majority in clinical roles;
- Performance against the statutory and mandatory training and appraisal targets was still below plan and actions had been developed to address these areas;

Mr Alisdair Cameron, Non-executive Director asked whether the Trust would achieve its training and appraisal targets for 2014/15. The Director of Organisational Development and Workforce confirmed that the targets would be achieved in Quarter 4 2014/15.

Professor David Mant, Associate Non-executive Director asked whether there was a plan to address gaps in staff groups to which it is difficult to recruit. It was advised that a summit was being planned for the beginning of July 2014 to consider recruitment and retention initiatives, specifically focused on these staff groups.

Mr Mark Trumper, Director of Development and the Estate advised of the need to consider the whole benefits package for staff to ensure that the Trust was competitive in its offering. This was agreed.

The Trust Board noted the report.

**TB14/05/14 Cardiac Theatre Review: Progress report on implementation of Action Plan**

The Director of Clinical Services presented the report and highlighted:

- A standard operating procedure was now in place and had been agreed with clinicians;
- A bespoke human factors training programme had been created for the cardiac staff;

The Chief Executive advised that he had received a letter, signed by all of the surgeons in the cardiac specialty, which confirmed that they were engaged in the changes and were supportive of the agreed actions. This represented a positive cultural change.

The Trust Board noted the report.

**TB14/05/15 Trust Business Plan 2014/16**

The Director of Planning and Information presented the draft business plan and highlighted:

- The plan was based on national guidance and covered a two year planning period;
- The plan was a combination of bottom up planning by the divisions and top down corporate planning;
- The plan would be used as a communication tool internally and externally with key stakeholders;

- The plan would allow for the setting of objectives at team and individual level;
- There was a clear need to focus on transformational change to address the challenges facing the Trust;
- Staff and patient engagement was going to be key to ensure actions were achievable;

The members of the Trust Board were asked for comments by 28 May 2014.

The Trust Board discussed the optimal bed occupancy level to maintain flow and therefore support the achievement of operational objectives. This was noted at approximately 92%, with average bed occupancy currently at 97-98%. The need to create 30-40 additional beds to support these objectives was discussed.

Sir John Bell, Non-executive Director asked what was the risk related to loss of markets and whether the Trust should be explicit about how it would be growing its patient catchment. The Chief Executive highlighted the need to ensure that the Trust's plans were aligned to those of commissioners, which they were, although this did not preclude increasing the share of the market with their agreement.

The Trust Board approved the Annual Business Plan 2014/16, subject to the inclusion of any additional comments by 28 May 2014.

#### **TB14/05/16 Foundation Trust Update**

The Director of Planning and Information presented the report and highlighted:

- The Integrated Business Plan and Long Term Financial Model had been submitted to the NHS Trust Development Authority;
- The plan and model had been updated following agreement of the commissioning contracts for 2014/15;
- The risk related to the outcome of the CQC inspection was now addressed through the positive outcome. Letters of support from the commissioners for the Trust's plan had also been received which addressed the risk related to commissioner alignment. The risk related to operational performance remained and would need to be addressed in line with the agreed plan;
- The Board to Board with the NHS Trust Development Authority was planned for early June 2014;

Mr Peter Ward, Non-executive Director questioned what the NHS Trust Development Authority's expectations were in relation to delivering operational performance. It was highlighted that the Trust was expected to be performing against the 18 week Referral to Treatment, cancer and 4 Hour A&E targets, and to have demonstrated a reduction in the number of Delayed Transfers of Care.

The Trust Board noted the report.

#### **TB14/05/17 Board Governance Assurance Framework (BGAF) – Review of Evidence March 2014**

The Director of Assurance presented the report and highlighted that the review had demonstrated that there had been improvements in six of the criteria and deterioration against one. This related to the members of the Board undertaking a multi-faceted review (similar to a 360 degree review). This action was being taken



forward by the Director of Organisational Development and Workforce. A number of suggested actions had been identified to further enhance compliance.

The Trust Board approved the revised position against the Board Governance Assurance Framework.

#### **TB14/05/18 Monitor Quality Governance Framework**

The Interim Medical Director presented the report and highlighted:

- A review of the Trust's self-assessment had been undertaken in April and May 2014 which recommended a reduction in the score against the framework to 2.0;
- An independent assessment against the evidence and scoring was being undertaken by the Trust's Internal Auditors, KPMG, and a deeper dive of the evidence would also be undertaken by the Assurance Directorate.

The Trust Board discussed the evidence and noted that work was required to tidy up the evidence presented. The assurance provided by Executive Walkarounds was also discussed and it was agreed that although only two walkarounds had been completed in April 2014, the programme focused on a longer term approach and was a valuable assurance tool for triangulating information against activities on wards.

The Trust Board approved the revised scoring against the Monitor Quality Governance Framework, noting the evidence to support the improved scoring.

#### **TB14/05/19 Board Assurance Framework and Corporate Risk Register**

The Director of Assurance presented the report and highlighted that the Board Assurance Framework and Corporate Risk Register had been reviewed in detail by the Trust Board's sub-committees and by the Trust Management Executive. The report presented supported the transition between financial years.

The Trust Board noted the risks as described in the Board Assurance Framework and Corporate Risk Register.

#### **TB14/05/20 Emergency Preparedness, Resilience and Response Assurance Audit- November 2013**

The Director of Clinical Services presented the report and advised that the Trust had been subject to an external assessment by NHS England. Of the 119 criteria the Trust had self-assessed itself as compliant with 111 of the criteria, with the remaining eight areas requiring further work. This assessment had been agreed by NHS England. An action plan had been developed against the eight areas of non-compliance.

The Trust Board approved the assessment,

#### **TB14/05/21 Register of Interests and Register of Gifts, Hospitality and Sponsorship**

The Director of Assurance presented the report which was an annual review of the interests declared by members of the Trust Board.

A number of amendments to the register were highlighted including the following:

For Mr Christopher Goard, Non-executive Director:

Interests added:

- Magistrate on Buckinghamshire Bench for Adult Criminal Court and Family Court

Interests removed:

- Pending confirmation by ABPI Member of Code of Practice for the Pharma Industry;
- Non-executive Director of the Patient Safety Federation;

For Mrs Anne Tutt, Non-executive Director:

Interests added:

- NED and Trustee of The Social Investment Business Foundation Ltd;
- NED and Chair of Audit and Risk Assurance Committee of Her Majesties Identity and Passport Office - Contract ended December 2013;
- International Network for the Availability of Scientific Publications – Director and Chair of Audit Committee;

Interests removed:

- NED and Trustee of the Adventure Capital Fund Ltd
- Trustee Oxford Kidney Unit Fund

The Trust Board noted the registers and confirmed that no conflicts existed.

#### **TB14/05/22.1 Audit Committee**

The Chairman of the Audit Committee presented the report and highlighted:

- The Committee had considered the Trust's approach to Clinical Audit to ensure this was aligned with the other audit programmes. It was noted that there had been improvements and further enhancement work was underway;
- A presentation on Cyber Threats had been received and the Committee had recommended to the Trust Board that due to the nature of the threats, a seminar session be held to discuss this in more detail;
- 20 outstanding audit recommendations had been identified and the Committee had asked that Executive Director leads ensured these were addressed in a more timely fashion;
- The report into the Welcome Centre procurement had been received and was referred back to the Trust Board who had originally commissioned the report.

The Trust Board noted the report.

#### **TB14/05/22.2 Finance & Performance Committee**

The Chairman of the Finance & Performance Committee presented the report and highlighted:

- The initial programme of presentations from the clinical divisions had been concluded and a revised approach was now being developed;
- The Committee was due to focus on the key issues of divisional budgetary management and cost management during 2014/15;

The Trust Board noted the report.

**TB14/05/22.3 Quality Committee**

The Chairman of the Quality Committee presented the report and highlighted that the Committee had been focusing on closing the loop to ensure that the Trust Board was assured that agreed actions were being taken and addressed the original issues.

The Trust Board noted the report.

**TB14/05/22.4 Trust Management Executive;**

The Trust Board noted the report.

**TB14/05/23 Consultant Appointments and Signing of Documents**

The Trust Board noted the report.

**TB14/05/24 Any Other Business**

The Chairman thanked Eric Sanders, Head of Corporate Governance for his contribution to the Board during his time with Oxford University Hospitals NHS Trust and wished him well.

**TB14/05/25 Date of the next meeting**

A meeting of the Board to be held in public will take place on Wednesday 9 July 2014 at 10:00 in the Postgraduate Education Centre, the John Radcliffe Hospital.