SALISBURY NHS FOUNDATION TRUST

Minutes of the meeting of Salisbury NHS Foundation Trust Board Held on Monday 13th April 2015

Board Members Present:	Dr N Marsden	Chairman
	Mr L Arnold	Acting Chief Operating Officer
	Dr C Blanshard	Medical Director
	Mr M Cassells	Director of Finance & Procurement
	Mr A Freemantle	Non-Executive Director
	Mr I Downie	Non-Executive Director
	Mr P Hill	Chief Executive
	Mr A Hyett	Chief Operating Officer
	Mr P Kemp	Non-Executive Director
	Mrs A Kingscott	Director of Human Resources and Organisational Development
	Mr S Long	Non-Executive Director
	Revd Dame S Mullally	Non-Executive Director
	Ms L Wilkinson	Director of Nursing
In Attendance:	Mr P Butler	Communications Manager
	Mr D Seabrooke	Secretary to the Board
	Mr P Lefever	Wiltshire Health Watch
	Mrs J Sanders	Public Governor
	Mr J Carvell	Public Governor
	Dr B Robertson	Public Governor
	Mrs C Martindale	Lead Governor
	Mrs L Taylor	Public Governor
	Mr B Fisk	Staff Governor
	Cllr John Noeken	Appointed Governor
	Dr A Lack	Public Governor
	Mr R Polkinghorne	Appointed Governor West Hampshire CCG
	Mrs M Monnington	Appointed Governor
	Colonel J Denny	Military Governor
	Mr & Mrs Gould	Volunteers
Apologies:	Dr L Brown	Non Executive Director

2074/00 INTRODUCTION AND WELCOME **ACTION**

The Chairman welcomed Andy Hyett to his first meeting of the Trust Board following his appointment as Chief Operating Officer from 13 April 2015.

2075/00 DECLARATIONS OF INTEREST AND FIT AND PROPER/GOOD CHARACTER

Members of the Board were reminded that they have a duty to declare any impairments to be Fit and Proper and of good character as well as to avoid any conflict of interest and to declare any interests arising from the discussion. No member present declared any such interest or impairment.

2076/00 MINUTES

The minutes of the meeting of the Board held on 2 February 2015 were

approved as a correct record subject to an amendment in 2062/00, the end of the second paragraph to refer to four departures rather than two.

The Board approved the minutes of the Joint Meeting with the Council of Governors held on 23 February 2015

2077/00 CHIEF EXECUTIVE'S REPORT - SFT 3637 – PRESENTED BY PH

The Board received the Chief Executive's Report.

PH highlighted the thanks he had given to the Trust's staff through his regular communications for their loyalty commitment and support during 2014/15. In particular, staff in A&E had met a testing challenge in meeting their operational targets.

It was noted that the Trust was working with Great Western Hospital and Royal United Hospitals Bath on a joint bid to create a new model for Adult Community Services across Wiltshire from July 2016. The Trusts were bidding through a competitive process organised by Wiltshire CCG and the process would continue through the remainder of 2015.

Congratulations were given to Christine White who had won the National Chief Scientific Officers 2015 award for Organisational Lead Scientist and Millie Mitchell and Jessica Norton, Trainee Clinical Scientists who were finalists in the Rising Star Life Sciences category. This prestigious award demonstrates how health care scientists at Salisbury were fully engaged in their work and were receiving recognition.

Also highlighted in the Chief Executive's Report was the Trust's staff success in the Wiltshire Public Health Awards, a recent Medicine for Members event, the commemoration of 60 years of the League of Friends and the formation of a clinical ethics committee.

The Board noted the Chief Executive's Report.

2078/00 STAFF

2078/01 Workforce Performance Report including Nurse Staffing SFT 3638 - Presented by AK & LW

The Board received the Workforce Performance Report and Safe Staffing Report for Month 11. This newly commissioned report gave details of Workforce numbers, quality health and compliance.

The following principal points from the narrative associated with the dashboard report were noted -

- Agency costs year to date were £7.1m compared to £5.2m in the same period in 2013/14.
- The Trust was £409,000 overspent on workforce costs.
- There was differing information about appraisal rates. 77% of staff had linked onto the SPIDA appraisal system (this did not mean that the remaining staff had not had an appraisal) and of those staff included on SPIDA 35.6% had a fully signed off appraisal registered. However 84% of staff reported via the Staff Survey that they have had an appraisal. It was noted that medical revalidation depended on being able to demonstrate compliance in this regard.
- Compliance with mandatory training varied between just over 50% for Information Governance and up to 80% for Safeguarding. It was

noted that compliance with the training requirements had to be maintained at intervals and that an employee not being up to date on this training did not raise immediate safety concerns.

It was noted that where temporary medical cover was required the matter was discussed by the Clinical Lead and Directorate Manager and this would often result in the Trust securing a locum from an agency, particularly for junior posts.

Senior medical cover was normally for short-term absences but there were some instances of longer term and where more tasks were carried out by middle grades or nurse specialists to make appropriate use of consultant capacity. The Trust continued to work with a specialist agency to reduce locum costs.

Responses to the Trust's recruitment advertising for nurses was variable both for Salisbury and other organisations. The Trust networked across the locality to learn about and try different solutions.

The Nurse Staffing Report indicated a registered nurse shift fill rate of 97.4% for February 2015 and a fill rate of 103.5% for nursing assistants. Red flags were described in the Hospice, clinical support and NICU areas for night shifts and for Radnor, NICU and Clinical Support in day shifts. The report described the mitigations in place for all Red and Amber rated areas.

The Board noted the Workforce Performance Report and Safe Staffing Report.

2078/02 Staff Survey 2014 – SFT 3639 – Presented by AK

The Board received a report summarising the results of the Staff Survey conducted in autumn 2014 by the Picker Institute. The results had been reviewed by the Operational Management Board which was proposing to adopt focus groups to further explore the emerging themes with staff to develop action plans and effect change.

There were 29 key findings and in 20 of these the Trust was in the best or better than average category and average in a further four areas. It was not represented in the worst performing 20% but in the below average the theme of physical violence and also harassment, bullying or abuse from patients relatives or the public in the preceding twelve months was reported and physical violence and also harassment, bullying or abuse from staff was reported. Overall the Trust came out 6th or 137 hospitals taking part in the survey.

The Trust continued to support staff and emphasised that they should feel safe at work. It was noted that the Trust had recently launched a 24 hour on-site security service.

The number of staff reporting they were witnessing near misses on clinical incidents had reduced to an average level.

Conflict Avoidance training was available and the Trust took into account available advice on designing out violence and aggression where possible.

It was noted that the Executive Workforce Committee would continue to receive updates on the Staff Survey and that the Board would receive a further report on progress at the 7 December 2015 meeting.

2079/00 PATIENT CARE

2079/01 Quality Indicator Report to 28 February (Month 11) – SFT 3640 - Presented by CB and LW

The Board received the Quality Indicator Report. It was noted that mortality rates had been decreasing through to November 2014 and were within the expected range. The mortality reviews were continuing. A Never Event had been reported and two other Serious Incident Inquiries had been commissioned. It was noted that escalation bed capacity had been high during the period covered in the report.

The Clinical Governance Committee continued to review the Trust's performance on preventing C-Diff. This had reached 18 attributed cases in February and it was noted that there had been a further five cases in March all of which were subject to review. The nine cases in February and March had occurred in seven separate clinical areas. No further cases had been reported in April.

There had been ten falls resulting in moderate harm. These had occurred in seven different wards but were being reviewed for common themes. Many had arisen from work with patients on remobilisation. Commissioners were visiting the Trust to discuss whether any improvement in delivering single sex accommodation breaches was possible. The breaches the Trust experienced arose mainly from the Intensive Care Unit and were largely as a result of the Trust trying to avoid the transfer of patients in the middle of the night.

The Board noted the Quality Report.

2079/02 Customer Care Report – Quarter 3 – SFT 3641 – Presented by LW

The Board received the Customer Care Report. It was noted that complaints in the Medicine directorate were reducing and this was thought to be due to the work of a new Customer Care Facilitator dedicated to Medicine and it was thought that this practice could spread to the other Clinical Directorates. The Parliamentary and Health Service Ombudsman had closed three cases during the Quarter, of which one had been upheld.

SL reported on his regular dip-sampling of complaint files and emphasised the need to respond to the personal issues raised by the complainant at the end of the investigation process.

The Board noted the Customer Care Report.

2080/00 PERFORMANCE AND PLANNING

2080/01 Finance & Performance Committee Minutes 2 February & 23 February 2015 – SFT 3642 – Presented by NM

The Board received the Finance and Performance Committee Minutes and the Chairman highlighted the Trust's achievement on its CQUIN targets.

The Board noted the minutes of the Finance and Performance Committee from 2 and 23 February 2015.

2080/02 Finance and Contracting Report to 28 February 2015 – SFT 3643 – Presented by MC

The Board received the Finance and Contracting Report for Month 11 and it was noted that the Trust was £1.7m in deficit after 11 months of the financial year. The forecast outturn was subject to a range of factors but was thought to be up to £2m deficit, excluding charitable donations.

It was noted that Medicine and Clinical Support and Family Services directorates were challenged by their forecast outturns in relation to plan. The Trust had delivered a sizable savings plan in 2014/15 with a 14.5% shortfall. Work was underway to develop robust plans for 2015/16.

On 2015/16 contracts it was noted that Heads of Terms had been signed with Dorset CCG and good progress was being made with West Hampshire CCG. For specialist Commissioners discussions were continuing and it was noted that the Trust had requested a payment of £800,000 in support of the Genetics Services.

The Board noted the Finance and Contracting Report for Month 11.

2080/03 Progress against Targets and Performance Indicators to 28 February 2015 – SFT 3644 – presented by LA

The Board received the Targets and Indicators Report to February 2015.

It was noted that the Trust had achieved the A & E target in February 2015 and for Quarter 4. There was a planned breach agreed in advance with Monitor and commissioners in relation to the 18 Weeks (admitted) standard for February. It was noted that the rate of cancelled operations had reduced to 0.7%. Delayed Transfers of Care stood at just over 20. Delayed Transfers of Care caused by the hospital were confined to a very small number of incidences.

The Board noted the Performance Report.

2080/04 Update on Planning Process – Presented by LA

LA reported that the Trust had submitted the Operational Draft Plan to Monitor on 10 April and that the more detailed version was under development at present for submission by 14 May. This would be discussed by the Joint Board of Directors, the Governor's Strategy Group and approved at a meeting of the Trust Board on 11 May.

2080/05 Emergency Department Survey Results – SFT 3645 – Presented by LW

The Board received the Emergency Department Survey which was taken in May – September 2014. In three incidences in the 35 questions the Trust had the highest score nationally and scored favourably throughout the survey. An action plan brought forward by the A&E Department was attached. It was noted that the survey period had been a busy one for the A & E Department at Salisbury.

2080/06 Code of Governance Compliance Review – SFT 3646 – Presented by NM

The Board received a report setting out the Trust's arrangements for compliance with the code of Governance and reflecting the requirements for the Annual Report in this regard. Appended to the report were updates on Board statements required under the Code and a table of "Comply or Explain" responses that were required to be published.

The Board noted the Report.

2080/07 Financial Estimates 2015/16 – SFT 3647 – Presented by MC

The Board received the Financial Estimates for 2015/16. It was noted that the budget setting process for 2015/16 had been especially difficult in view of overspending and the 3.5% cut in the value of the Tariff. The Trust's planned income would not make sufficient allowance for costs pressures, inflation and the required contribution to the Clinical Negligence Scheme. There were indications from the Trust's own analysis that the national tariff would be worth 1% than had been originally indicated. The range of non-tariff prices had also been reduced. In determining which of the Tariff options to select the Board had been mindful of the availability of £3.5m of CQUIN payments.

A range of internal costs pressures such as IT, equipment, staffing were described. Savings in 2014/15 had been achieved but much of this was non-recurrent and would have to be factored into 2015/16 were this was the case. There was an intention nationally to reduce activity through the Better Care Fund and QUIP mechanisms which put at risk the Trust's position. There were greater mandatory penalties in the 2015/16 contract and the Trust could expect less resilience support in 2015 than in 2014/15.

The shortfall was £13.8m and with a savings target of £8m the Trust was planning for a £6m deficit for 2015/16.

In order to protect the Trust's cash position, a loan application had been submitted to the Foundation Trust Financing Facility and the outcome of this was awaited. The loan would be applied to some of the schemes in the Trust's Capital Programme, if granted. No resources had been identified at this stage to support the implementation of the Electronic Patient Records. If implemented the Electronic Patient Records system would deliver revenue savings.

The Board approved the estimates for 2015/16.

2081/00 PAPERS FOR NOTING OR APPROVAL

2081/01 Minutes from Clinical Governance Committee 29 January and February 2015 – SFT 3648 – Presented by SM

The Board received for information the confirmed minutes of the Clinical Governance Committee for 29 January and 26 February 2015.

2081/02 Draft Minutes from the Public Section of the Council of Governors meeting 16 February 2015 – SFT 3649 – presented by NM

The Board received for information the draft minutes of the Council of Governors meeting held on 16 February 2015.

2081/03 Draft Minutes of Audit Committee 22 January 2015 – SFT 3650 – Presented by PK

The Board received for information the draft minutes of the Audit Committee meeting held on 22 January 2015. It was noted that a change to the planned number of internal audit days had been discussed by the Committee.

2081/04 JBD minutes evidencing presentation of Assurance Framework and Risk Register – SFT – 3651 – Presented by PH

The Board received for information the update from the Joint Board of Directors.

2082/00 QUESTIONS FROM THE PUBLIC

In relation to a question about the seniority compared to other Trusts of the infection Control Team asked by Brian Fisk, LW confirmed that there was a variable position across different organisations. However she was satisfied that the level of resource devoted to Infection Control was adequate and this was kept under regular review by the Clinical Governance Committee. The Salisbury Team were very experienced and highly regarded..

In relation to a question about cancelled operations and the effect of this on patients LA commented that the Trust did not take any late cancellation of patient procedures lightly. The decisions were based on clinical need.

In relation to a question about caring for patients with co-morbidity LW explained that the Trust continued to carry out regular Skill Mix Reviews that checked staffing levels and skills in relation to patient need. The Trust was also implementing the Safer Care Bundle in support of this.

In relation to a question about violence and harassment among staff from Mary Monnington AK explained that the Trust had information from the survey split at directorate level but was using focus groups to look at the detail to gain a better understanding of the issue, where and when it was occurring.

Finally volunteer Mrs Gould commented that in her experience conducting real time feedback in the hospital she very seldom came across anyone who had a bad word to say about the care provided by the Trust.

2083/00 DATE OF NEXT MEETING

It was noted that the next public meeting of the Trust Board will be on Monday 8 June 2015, in the Board Room at Salisbury District Hospital starting at 1.30pm.