# SALISBURY NHS FOUNDATION TRUST

## Minutes of the meeting of Salisbury NHS Foundation Trust Board Held on Monday 8 June 2015

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| **Board Members Present**: | Dr N Marsden | Chairman |
| | Dr C Blanshard | Medical Director |
| | Mr A Freemantle | Non-Executive Director |
| | Dr L Brown | 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 |
| **Corporate Directors Present:** | Mr M Ace | Associate Executive Director |
| | Mr L Arnold | Director of Corporate Development |
| **In Attendance**: | Mr P Butler | Communications Manager |
| | Mr M Collis | Deputy Director of Finance |
| | Mr D Seabrooke | Secretary to the Board |
| | Mr P Lefever | Wiltshire Health Watch |
| | Ms S White | Public Governor |
| | Dr J Lisle | Public Governor |
| | Mrs J Sanders | Public Governor |
| | Mr J Parker | Public Governor |
| | Dr A Lack | Lead Governor |
| | Sir R Jack | Public Governor |
| | Cllr J Noeken | Appointed Governor – Wiltshire Council |
| | Mrs L Taylor | Public Governor |
| | Mrs L Herklots | Public Governor |
| | Mr M Wareham | Staff Side |
| | Mr J Hemming | Consultant for SFT 3662 |
| **Apologies:** | Mr M Cassells | Director of Finance and Procurement |
| | Mr I Downie | Non-Executive Director |

### Organ Donation

Before the meeting started the Chairman called upon Dr Lydia Brown to speak to everyone present in her capacity as the Chair of the Trust's Organ Donation Committee. Dr Brown invited everyone to consider their feelings towards organ donation and to signify this by dropping a token into one of three boxes provided.

**2086/00 INTRODUCTION AND WELCOME** **ACTION**

The Chairman welcomed the local press and the governors to the meeting.

**2087/00 DECLARATIONS OF INTEREST AND FIT AND PROPER/GOOD CHARACTER**

Members of the Board were reminded that they have a duty to declare any impairment to Fit and Proper and being 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.

**2088/00 MINUTES**

The minutes of the meetings of the Board held on 13 April and 11 May 2015 were accepted as a correct record.

**2089/00 CHIEF EXECUTIVE'S REPORT - SFT 3656 – PRESENTED BY PH**

The Board received the Chief Executive's Report.

It was noted that the Trust had been named as one of the top hospitals in the country by CHKS, a leading national health care intelligence organisation. The trophy signifying the award was on show at the meeting.

The Trust remained in the best band in the CQC intelligent monitoring system. Work continued towards the joint bid with Great Western and Royal United Hospitals Bath in support of a new model for Adult Community Services across Wiltshire. The next key deadline for shortlisted candidates would be to submit an outline proposal to the Wiltshire Clinical Commissioning Group later in June.

It was noted that Andy Hyett had been designated as accountable officer for emergency planning.

Following elections held earlier in the year for public and staff governors it was noted that Dr Jennifer Lisle, Lucinda Herklots, Isabel McLellan, John Parker, Sharan White, Michael Mounde, Ross Britton, Pearl James, Jonathan Wright and Paul Straughair had been elected to the Council of Governors. Sir Raymond Jack, Dr Beth Robertson, Shaun Fountain, Colette Martindale and Christine White had been re-elected.

The Board noted the Chief Executive's report.

**2090/00 STAFF**

**2090/01 Workforce Performance Report including Safer Staffing and Skill Mix SFT 3657 - Presented by AK & LW**

The Board received the Workforce Performance Report including the monthly Skill Mix review and an update on the six monthly Skill Mix review.

In relation to the Workforce Performance Report, AK reminded the Board of the work underway to increase the proportion of staff employed on a permanent basis and through the bank. Actions in relation to agency spend included an updated protocol for the purchasing of agency nursing, a review of the agency that supported the substantive medical post recruitment, ongoing international nurse recruitment during 2015/16 and further work by the nursing and administration bank to bring in more recruits.

Work to address sickness rates continued including special physiotherapy promotional events in June. There was good feedback on the staff Friends and Family test.

Concern was expressed about the appraisal and mandatory training compliance rates reported under workforce compliance. It was noted that a review of the on-line SPIDA system had been undertaken and reported to the Executive Workforce Committee and work was underway to ensure that all completed training was recorded on the managed learning environment (MLE) system.

In relation to the National Quality Board (NQB) report for April 2015 it was noted that figures for maternity were included in the report for the first time. Actual and planned skill mix were closely aligned and fill rates for planned and actual hours were satisfactory. The Board noted the variations shown in the night and day shifts in regard to maternity and neo-natal intensive care unit (NICU). The nationally mandated tool was not able to capture the full range of patient numbers and acuity.

It was noted that the pie chart showing reasons for leaving the Trust showed 20% for the termination of a fixed term contract which included maternity leave cover and staff employed in support of projects particularly in the IT area.

The Trust was avoiding using agencies for nursing cover that charged excessive rates.

The six monthly skill mix had taken place and the Board was reminded of the investments totalling £917,000 that had led to strengthening Band 7 ward sister posts, establishing the 1:8 ratio on day shifts and additional staffing requirements on Durrington and Amesbury wards. The full results would be discussed by the Board and presented at the 3 August meeting. LW

The Board noted the report.

**2090/02 Staff Survey 2014- Update on progress – SFT 3658 – Presented by AK**

The Board received the update report following consideration of the results at the 13 April meeting. It was noted that the Trust had a Staff Survey Steering Group in place chaired by the Deputy Director of HR and this reported to the Executive Workforce Committee. It was noted that a Staff Support Advisor role was being developed and conflict resolution training across the Trust was continuing. The Trust-based 24 hour security service would be launched in the next few weeks. Consideration was being given to Pulse surveys to help evaluate progress in-between staff survey exercises.

The Board noted the report.

**2090/03 Voluntary Services Department Annual Report – SFT 3659 – Presented by AK**

The Board received the annual report setting out the range of work undertaken in support of the Trust by its volunteers. The numbers of volunteers registered reflected strong community support for the hospital. Thanks were given to Brian Fisk the volunteer's governor and the service would be welcoming Pearl James as the new volunteer's governor from 1 June. It was noted also that a survey of volunteers had recently been completed.

**2091/00 PATIENT CARE**

**2091/01 Quality Indicator Report to 30 April 2015 (Month 1) – SFT 3640 - Presented by CB and LW**

The Board received the Quality Indicator Report and the following principal points were highlighted:

- There had been five new Serious Incident Inquiries.
- Mortality rates were reducing and were in the as expected range.
- There was a reduction in the number of patient spending 90% of their inpatient time on the stroke unit as three patients had been transferred to other wards prior to discharge from the hospital to provide specialist capacity for new stroke patients.
- There had been eight breaches affecting 46 patients for mixed sex accommodation principally arising from the Acute Medical Unit.
- Escalation bed capacity had increased in April and work was underway to look at bed capacity and efficiency.

The Board noted the Quality Report.

**2091/02 Customer Care Report – Quarter 4 – SFT 3661 – Presented by LW**

The Board received the Quarter 4 Customer Care report and it was noted that complaint numbers remained static. There were 11 complaints reopened in Quarter 4. The Ombudsman had closed two complaints in the quarter of which one had been partially upheld. Concern was expressed that six complaints out of 22 in the Musculo-Skeletal Directorate had been reopened due to inaccuracies in the response further questions, dissatisfaction with the response and further questions arising.

It was also noted that the Trust continued to resolve concerns by discussion wherever possible.

**2091/03 Director of Infection Prevention and Control (DIPC) Annual Report 2014/15 – SFT 3662 – Presented by LW**

Julian Hemming from the Infection Control Service attended for this item.

The Board received the annual report. It was noted that the Trust had finished 2014/15 with 23 attributed cases of C-Diff against a trajectory target of 18 although CCG reviews of two of these cases had yet to be heard. A number of cases had occurred in February 2015 but ribo typing had not established any connections between these. The Trust had seen a rise in activity in January in patients with influenza and respiratory problems which had been dealt with effectively. The Trust remained vigilant on potential for CPE by using screening on patients transferring from high risk facilities. Microbiologists continued to review patients in conjunction with Pharmacy.

Hand hygiene results continued to be reported to the Matrons Group.

The Board noted the report.

**2092/00 PERFORMANCE AND PLANNING**

**2092/01 Finance & Performance Committee Minutes 30 March and 27 April 2015 – SFT 3663 – Presented by NM**

The Board received the confirmed minutes of the Finance and Performance Committee. The Chairman highlighted the Trust's outstanding performance on CQUIN and emphasised that the Committee would continue to focus on the achievement of cost improvement and transformation programmes.

**2092/02 Finance and Contracting Report to 30 April 2015 – SFT 3664 – Presented by Mark Collis**

The Board received the Month 1 report. It was noted that the Trust had recorded a deficit of £1.1m for the month. This was due to high agency spend, reductions in income and greater spend on resilience. Efforts to continue to reduce high cost agency spend continued.

The Board noted the report.

**2092/03 Operational Performance Report – Month 1 – SFT 3665 – presented by AH**

The Board received the operational performance report for April. It was noted that the Trust delivered its infection control, referral to treatment, emergency department and seven out of eight cancer standards in April. There were some challenges on admitted pathways for RTT in some areas. It was noted that some of the figures rated as green were close to their threshold to turn to amber. The Trust had failed some of its diagnostics targets in April but a plan was in place to clear a backlog and referrals received by the Trust were back to normal levels.

It had recently been announced nationally that two of the three 18 week targets were to be discontinued but the Trust continued to emphasise that patients would not wait any longer than necessary for their treatments.

Delayed Transfer of Care continued to be an issue which was affecting the length of stay particularly in medicine areas. An operational group was in place seeking improvements to the patient transport service and was working with the contractor in this regard.

The Board noted the the report.

**2092/04 Update on Strategic Planning – Presented by LA**

LA reported that the Trust had submitted the Annual Plan to Monitor in May and was awaiting feedback.

**2092/05 Capital Development Report – SFT 3666 – Presented by LA**

The Board received the Capital Development Report. It was noted that planning permission for the Springs entrance project was being sought and tender specifications were being issued. It may however be necessary to take a critical look at which capital schemes could proceed and which would provide value for money. Building work in support of the new Breast Care

Unit was expected to start later in 2015. Work on phase one wards such as Durrington, Post Natal, Surgical Assessment Unit and Radnor was planned to start in late summer with refurbishments completed by mid-December. Design work on the maternity unit expansion was underway.

The Board noted progress with key IT projects including single sign on, POET, Electronic Discharge Summaries and the implementation of an electronic patient record. The outline business case for the latter would be submitted to the 3 August Trust Board. LA

The Board noted the Capital Development Report.

**2092/06 National In Patients Survey Results 2014 – analysis of CQC Benchmark Report and local action plans - SFT 3667 – Presented by LW**

The Board received an update in relation to the inpatients survey that had been conducted between October 2014 and January 2015. The findings had been considered by the Clinical Governance Committee and with one exception in 60 indicators the results were within the average "about the same as other Trusts". Work was underway to address concerns on food and nutrition, single sex accommodation, noise at night and the Clinical Governance Committee would receive these updates.

The Board noted the report.

**2092/07 Informatics Strategy Update – SFT 3668 – Presented by LA**

The Board received the report summarising progress on the main work streams of the 2011/16 Informatics Strategy. It was noted that the Trust was developing a new strategy during 2015 with a particular theme to link outwards with the information held by the Trust.

The Board noted the Report.

**2093/00 PAPERS FOR NOTING OR APPROVAL**

**2093/01 Minutes from Clinical Governance Committee 26 March 2015 – SFT 3669 – Presented by LB**

The Board received the confirmed minutes of the Clinical Governance Committee. Lydia Brown highlighted the service review for Dementia care and issues arising from this would be followed up by the Committee. It was also noted that the Committee had discussed its quarterly safeguarding adults report.

The Board noted the minutes of the Clinical Governance Committee.

**2093/02 Joint Board of Directors Minutes - Review of Assurance Framework and Risk Register – SFT 3670 – Presented by PH**

The Board received an extract of the minutes of the Joint Board of Directors indicating the quarterly review of the assurance framework. The minute highlighted the work of Thames Valley and Wessex Leadership Academy in relation to robust governance processes, the introduction of the workforce report and the overall review of the Risk Register.

**2094/00 QUESTIONS FROM THE PUBLIC**

In response to a question from Alastair Lack concerning compliance rates with staff mandatory training AK stated that there was a process being addressed to ensure that face to face sessions on information governance were recorded in the MLE and similarly with infection control were data was brought together from separate parts of the MLE system.

In relation to a question regarding the split of staffing spend (page 15 of the agenda pack) It was noted that more detailed data was provided to the Executive Workforce Committee but the bar chart would be reviewed to pull out the different categories of spend more clearly. AK

**2095/00 DATE OF NEXT MEETING**

It was noted that the next public meeting of the Trust Board will be on Monday 3 August 2015, in the Board Room at Salisbury District Hospital starting at 1.30pm.