

**DRAFT**

**MINUTES OF PART 1 BOARD OF DIRECTORS MEETING  
HELD ON WEDNESDAY 25th JUNE 2014**

**Call to Order****Present:**

Alan Tobias	- Chairman
Jacqueline Totterdell	- Chief Executive
David Parkins	- Deputy Chairman
Sue Hardy	- Chief Nurse
James O'Sullivan	- Chief Financial Officer
Mike Green	- Non-Executive Director
Fred Heddell	- Non-Executive Director
Sandra Le Blanc	- Director of HR
Neil Rothnie	- Medical Director
Jon Findlay	- Chief Operating Officer
Qadir Bakhsh	- Non-Executive Director
Tony Le Masurier	- Non-Executive Director
Tim Young	- Non-Executive Director
Jan China	- Interim Director of Estates & Facilities

**Also in attendance:**

Angela Bosnjak-Szekeres	- Trust Secretary
Cheryl Auger	- Assistant to Trust Secretary (minutes)
Lucy Thomas-Clayton	- AD for Community Engagement
Claire Hankey	- Head of Communications
Lynda Steer	- Head of Leadership, OD & Learning
Denise Townsend	- Head of Governance
Coleen Begg	- Head of Midwifery
Alex Pimm	- Manager, Women & Children Business Unit
Elaine Blatchford	- Governor
Tony Dunn	- Governor
Cllr. Alan Crystall	- Governor
Jan Tassell	- Governor
Majzoub B Ali	- Member of the Public
Anne Pettican	- Member of the Public

Alan Tobias, Chairman, on behalf of the Board, congratulated and presented certificates to the June winner of Hospital Heroes, Mary Burton, a ward clerk on Westcliff Ward, and Highly Commended Tim Cahill, who is a mortuary technician.

**171/14 Welcome and Apologies**

The Chairman welcomed Directors, Governors, staff, and members of the public to the meeting.

**Apologies:**

There were no apologies

**172/14 Declaration of conflicts of interest**

No conflicts of interest beyond those registered, were declared.

**173/14 Approval of Part 1 minutes of 27th May 2014 meeting**

The minutes of the previous meeting were agreed as an accurate record with the following amendments:

- Add Sue Hardy to list of attendees
- Page 2, bullet point 1: Change 'NHS England & SNCT' to 'Board agreed'
- Page 2, bullet point 5: Change '17' to '19'
- Page 3, Actions: Take out 'percentages instead of actual numbers'
- Page 4, bullet point 3: Change 'a complete review' to 'post infection review'

*Item, 3 mins*

**174/14 Matters Arising**

Page 3: The business case regarding the expansion of A&E need not go to the Board as approval has already been given.

*Item, 2 mins*

**175/14 Consideration of Part 1 Action Tracker**

The action tracker was reviewed with the following comments:

- 319/13 - Quarterly Employee Engagement Survey: The next report will be in September (as it is an agenda item for today's meeting).
- 120/14 - Governance Framework for Staff: Deferred to September following meetings with Business Units taking place in July; also, new action "Report on 'whole workforce' metrics, including analysis of appraisal data, to come to September board"
- 150/14 Catering KPIs: Feedback deferred to July onwards

**Decision:**

- The Action Tracker was approved as presented.

*Item, 4 mins*

**176/14 Patient Story**

The Board watched a video entitled 'Nicola's Maternity Story'. The woman in the video, who has cerebral palsy, wanted to share how good her care was in the maternity department at SUHFT and how it differed from her "other care" both at SUHFT and other Trusts.

The Board discussed care given to all patients with disability and learning difficulties. The video will be shown to staff on training days.

The Chairman thanked Colleen Begg, Head of Midwifery, and asked for thanks to be passed on to all the staff involved.

*Item, 20 mins*

**177/14 Nursing Establishment - Monthly & 6 Monthly Update**

**and**

**178/14** Sue Hardy, Chief Nurse, gave the report to the Board.

**Key Points:**

- **Monthly Update:**  
The data differed from that presented in May 2014, due to information being received from NHS England which differed from the original approach of reporting against the Board agreed safe staffing levels. The report now measures against current establishment and how SUHFT is able to fill those hours. According to the new requirements from NHS England SUHFT reported an overall fill rate of 93% for Registered Nurses & Midwives and over 100% for Health Care Assistants (HCAs).
- The significant level of vacancies, in addition to sick leave, resulted in bank & agency staff being used to cover 8.17% of day and 20.9% of night hours (registered nurse hours) and 28.78% of day hours and 39.60% for night hours (HCAs). In response to concerns raised, regarding the high rate of bank and agency use to cover HCA night hours, the Chief Nurse and the Director of HR agreed to look into the reasons for it and report back to the next Board meeting.
- **6 Monthly Update:**  
The Board was informed that the April 2014 nurse staffing review identified the requirement of a further 24.8 Whole Time Equivalent (WTE) registered nurses over and above the 57.2 WTE previously agreed in November 2013, and 15.41 WTE HCAs. This is to cover recommended nurse levels per shift on:
  - Chalkwell (Surgical Assessment Unit)
  - Blenheim
  - Paglesham
  - Paediatric Assessment Unit
  - Princess AnneThe Board was asked to discuss and agree the additional nursing levels, costs for which have been calculated and will be discussed further in Part 2.
- There was a brief discussion on career progression for HCAs, also, the importance of retaining current staff.

**Actions:**

- Month on Month comparison to be shown in future reports.
- Data on 'fill rates' compared to other Trusts to be provided when that data becomes available.
- Review the 40% Bank & Agency use for night time HCAs.
- Provide a Trajectory on Recruitment Report for the July Board

**Decision:**

- The Board agreed in principle the uplift in Chalkwell, Blenheim, Paglesham, Princess Anne and the Paediatric assessment unit subject to finance discussions in Part 2

*Item, 28 mins*

## 179/14 Report from Health & Safety Champion

Tim Young, Non Executive Director, gave the report to the Board.

### Decision:

- The Board noted the report.

*Item, 1 min*

## 180/14 Monthly Integrated Performance Report

The IPR report was given to the Board by The Chief Operating Officer with input from the Medical Director, the Director of HR, the Chief Nurse and the Interim Director of Estates & Facilities.

### Key Points:

- **RTT:** The Trust achieved the 3 standards in May however continues to be challenged on achieving the admitted target at sub-speciality level. Actions to deal with the specialities performance, and achieve compliance by quarter 2, include additional lists on Saturdays and outsourcing with local external providers. Theatre capacity will be reduced in July and August due to essential maintenance work; a mobile theatre has been brought in to offset the reduced capacity; the mobile theatre will be operational from 7<sup>th</sup> July for a minimum of 2 months.
- The Board was informed that the shortage of paediatric nurses/paediatric beds is a major obstacle to achieving 18 week compliance. The recruitment of paediatric nurses from Ireland is not going according to plan; another company has been engaged to help with recruitment. The Board was informed that paediatric patients are always prioritised.
- **A&E:** The Trust achieved compliance of 95.7% against the 95% 4 hour standard. The Emergency Care Action Plan has been fully worked up now and progress is being made. A couple of fundamental issues that still need to be addressed are the recruitment of permanent Consultant staff and the need to increase the physical space. Attendances at A&E continue to rise, it was pointed out the department has had to cope with over 100,000 people so far this year; it was designed to accommodate 60,000 people.  
The Emergency Care Action Plan has been submitted to the NHS England Area Team, we are awaiting feedback, so it has not been officially signed off yet. Progress against the plan is monitored through the weekly Emergency Care Project Board.
- **VTE:** The provisional May performance was 91.83% against a standard of 95%. A detailed action plan has been developed and submitted to the CCG; progress against the plan will be monitored by the Trust and the CCG via the Contract Quality Review Group (CQRG).
- **Diagnostic Breaches:** The primary cause for failing this standard was due to a sudden increase in diagnostic breaches for cardiology; this has now been resolved.
- **Cancer:** The 62 Day-2 week wait performance for May was 80.4% against the target of 85%; it was noted that the 'SUHFT patients only' standard was exceeded at 86%.
- The Board recognised the progress made in A&E but noted that month on month urology is mentioned negatively e.g. cancer, RTT, cancelled operations. It was explained that there has been a significant increase in the number of

referrals, also, urology cancers, mainly prostate, have lots of different treatment options and patients have to be given time to decide what is most appropriate for them. The Board noted the need for extra theatre capacity on a permanent basis.

- Friends & Family: In May in A&E, of the 345 comments received, 30 were negative which is a reduction compared to the 44 in April. Issues with IT and texting for the maternity Friends & Family, mean that the system cannot be moved ahead as quickly as first thought.
- Safety Thermometer: A slight decline in the percentage of over-all harm free care was noted in May; this is largely due to the level of “old” pre-existing harms (particularly community acquired pressure ulcers) that patients are admitted to hospital with.
- Nurse Recruitment continues both in the UK and abroad.
- Estates: The maintenance service level agreement was achieved for priority 2 reactive and pre-planned maintenance (PPM) works. The priority 1 target of 95% completed within 4 hours, was missed (86.3%) as staff are not ‘closing down’ jobs on their hand held devices once the work is completed.
- Cleaning: Of the 4 cleaning area KPIs 2 were not achieved however staffing levels have been increased from 100 to 150 WTEs to ensure the right number of staff on the wards and that standards are met across the Trust.
- Catering: Catering services KPI’s will be submitted to the July Board
- Telephony: The Priority One Internal Emergency Calls target was met. It was explained that when/if standards are not met it is usually due to the number of routine internal calls that prevent staff from responding to external calls.

*There was a comfort break at 11.30, the meeting resumed at 11.35*

- Workforce: The Board was informed that meetings with Business Units, to discuss achieving key workforce metrics, have been arranged and will commence 17<sup>th</sup> July
- There was a brief discussion on the number of vacancies (400 WTE) and why 100 posts are not actively being recruited into. It was noted this issue is part of the in depth discussions that will be taking place with the Business Units.

#### **Actions:**

- RTT Backlog: Report to show more granularity e.g. is it the same 190 patients? How many patients on and how many off the list within the month? and how many are paediatric patients?
- Show trend analysis and timescales for compliance with ‘Short Notice Cancellations’ and ‘VTE’ Targets.
- Workforce: Recruitment Issues regarding vacant nursing posts to be included in July Report.
- Workforce: Report on Whole Workforce Metrics, including analysis of appraisal data to be provided for September Board.

#### **Decision:**

- The Board noted the report and agreed actions.

*Item, 1 hour 18 mins*

### **181/14 Quarterly Employee Engagement Survey Data**

Sandra Le Blanc, Director of HR, gave the report to the Board.

### **Key Points:**

- The number of staff who responded to the questionnaire was 432 (equating to less than 10% of the workforce). The Board discussed the low response rate, especially in Theatres and Critical Care. It was noted this survey had closely followed the National survey and there had been little or no time for the effect of changes made to be seen.
- The recommendations as written in the report do not capture the concerns raised and should be discussed further in the Executives weekly meeting.

### **Actions:**

- Recommendations/actions to be discussed by Executives and brought back to the July Board.

### **Decision:**

- The Board noted the report and agreed action.

*Item, 20 minutes*

## **182/14 Financial Position**

James O'Sullivan, Chief Financial Officer, gave the report to the Board.

### **Key Points:**

- There was a deficit of £117k in the month which was £74k more than the planned deficit in the original budget profile.
- Income was higher than plan in a number of areas. It was noted that the increased activity is both unsustainable and a risk to the CCGs; joint working with the CCGs and the Community is needed to reduce activity levels. It was pointed out that the current staffing model is based on activity plans, if levels continue to rise the establishment will need to be increased as well.
- Pay expenditure in May was higher than budget; agency spend increased yet again to £1.291m. Medical staffing accounts for 90% of the total agency spend.
- More than 80% of the non-pay overspend is due to the non-delivery of CIPs. Although the delivery rate improved in May, CIP delivery is currently 50% behind plan. CIPs will be a key issue in the next Finance & Investment Committee and in the monthly finance reviews held with the business units. It was noted that if all the CIPs are achieved the Trust will not have a deficit.
- Cash balances at the end of May were above plan and significantly above the Trusts' internal cash floor of £10m; the reduction in debtors has contributed to the favourable position.

### **Actions:**

- Chief Financial Officer to show what actions are being taken to recover the financial position - report back to the September Board, having taken his report to the Finance & Investment Committee first.

### **Decision**

- The Board noted the report and agreed action.

*Item, 26 minutes*

## **183/14 Part 1 Report from the Chairman**

The Chairman informed the Board of Monitors' decision to impose discretionary requirements and additional licence conditions on the Trust, pursuant to its powers under section 105 and a section 111 of the Health and Social Care Act 2012. Monitor expects the Trust to take "immediate and urgent action" to comply with the regulatory actions and will assess progress through a series of regular review meetings. Should the Trust fail to deliver Monitor can consider further enforcement action.

The Chairman updated the Board on the Annual Volunteers Awards evening he attended on 6<sup>th</sup> June; he described it as an uplifting event and thanked both the volunteers, and Communications staff (who organised the event).

*Item, 4 minutes*

#### **184/14 Part 1 Report from the Chief Executive**

The Chief Executive had nothing further to add

*Item, 1 minute*

#### **185/14 Finance & Investment Committee Report**

David Parkins, Chair of the Finance & Investment Committee, gave the report to the Board.

##### **Decision:**

- The Board noted the report.

*Item, 1 minute*

#### **186/14 Quality Assurance Committee Report**

Tim Young, Deputy Chair of the Quality Assurance Committee, gave the report to the Board.

##### **Decision:**

- The Board noted the report.

*Item, 2 mins*

#### **187/14 Review of Board Calendar**

The Board Calendar was reviewed as follows:

- Add 'Nursing Establish Monthly Updates' to every month.
- June - move Full Strategic Review (Part 2 item) to September

##### **Decision:**

- The document was approved.

*Item, 4 mins*

#### **188/14 Date of Next Meeting**

The next Board of Directors' meeting will be held on Wednesday 30th July 2014 in the Trust Boardroom.

*The Chairman thanked members for their contribution and declared Part 1 of the meeting closed at 12:44*