

**DRAFT**

**MINUTES OF PART 1 BOARD OF DIRECTORS MEETING  
HELD ON WEDNESDAY 24th SEPTEMBER 2014**

**Call to Order**

**Present:**

Alan Tobias	- Chairman
David Parkins	- Deputy Chairman
Sue Hardy	- Chief Nurse and Deputy Chief Executive
James O'Sullivan	- Chief Financial Officer
Jon Findlay	- Chief Operating Officer
Fred Heddell	- Non-Executive Director
Neil Rothnie	- Medical Director
Qadir Bakhsh	- Non-Executive Director
Tony Le Masurier	- Non-Executive Director
Mike Green	- Non-Executive Director
Jan China	- Director of Estates & Facilities
Keith Warrior	- Acting Director of HR

**Also in attendance:**

Angela Bosnjak-Szekeres	- Trust Secretary
Cheryl Auger	- Assistant to Trust Secretary (minutes)
Claire Hankey	- Head of Communications
Lucy Thomas-Clayton	- Staff
Denise Townsend	- Staff
Emma Stock	- Staff
Les Catley	- Lead Governor
David Hobbs	- Governor
Elaine Blatchford	- Governor
Jan Tassell	- Governor
Tony Dunn	- Governor
Majzoub B Ali	- Member of the Public
Trevor Johnson	- Member of the Public
Paul Sly	- Southend CCG
Lynda Steer	- Staff (for item 279/14)
Marion Cain	- Staff (for item 279/14)

David Parkins, Non Executive Director, on behalf of the Board, congratulated and presented a certificate to the September winner of Hospital Heroes Yvonne Garcia Nino, a service manager in medical specialities, in recognition of the extra support she has given to the nurses recruited from Spain.

**272/14 Welcome and Apologies**

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

**Apologies:**

Apologies were received from Jacqueline Totterdell, Chief Executive and Tim Young, Non Executive Director.

**273/14 Declaration of conflicts of interest**

No conflicts of interest beyond those registered, were declared.

**274/14 Approval of Part 1 minutes of 27th August 2014 meeting**

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

- Page 4, 8<sup>th</sup> bullet point from the top of the page: Replace the words “flooding in” with “staining of the floors of”
- Page 6, item 252/14: Add “that the financial forecast was sound” to the end of the sentence.
- Page 7, item 255/14, 2<sup>nd</sup> bullet point: Replace the word “finalise” with the words “sign off” and add the words “and the Executive team will populate the BAF”.

*Item, 4 mins*

**275/14 Matters Arising**

There were no matters arising

*Item, 1 min*

**276/14 Consideration of Part 1 Action Tracker**

The action tracker was reviewed with the following comments:

- Item 43/14: On the October Board Agenda, remove from the action tracker
- Item 120/14: The Governance Framework will be moved to the November Board development session.
- Item 211/14: Feedback on the local risk summit is covered in the IPR Report remove from the action tracker.

**Decision:**

- The Action Tracker was approved as presented.

*Item, 3 mins*

**277/14 Nursing Establishment - Monthly Update**

Sue Hardy, Chief Nurse, gave the report to the Board. The report relates to fill rate against planned staffing, in current funded establishment.

**Key Points:**

- There were 24 shifts where high risk triggers were identified on the wards and one occasion in A&E; however there were no occasions where risk remained high following mitigating actions.

- NHS funding, from Health Education England, to support the introduction of a work-based programme for Associate Nurse Practitioners has been declined. The Executive team will be discussing this further, looking at internal options.
- A report providing an analysis of trends in staffing levels in relation to the quality, safety and patient experience outcomes, for the period May to July 2014 will be presented to the Quality Assurance Committee (QAC).
- In future the Trust will be required by NHS England to report nursing hours fill rate against the agreed shift to shift staffing levels, inclusive of planned uplift in nurse establishment. This requirement is being discussed with both the CCG and the Local Area Team (LAT), and reassurance is being sought from NHS England that all Essex Trusts will report on a like for like basis..

### **Action:**

Mike Green will raise the issue of All Trusts reporting on a like for like basis at the next Regional Audit Chairs meeting (to get some first-hand views).

### **Decision:**

- The Board noted the report

*Item, 11 mins*

## **278/14 Monthly Integrated Performance Report**

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

### **Key Points:**

- The Trust achieved compliance of 96.60% against the 4 hour standard for August, with only 1 out of 5 weeks not meeting the 95% threshold; Qtr. 2 has been achieved. Filling the vacant Consultant positions remains a priority.
- RTT Admitted Backlog: Performance for August was 85.99% against the 90% target which represents a decrease on the July position. This deterioration in performance partly reflects the work undertaken by the Trust as part of the waiting list initiative to reduce the backlog. Theatre capacity was also reduced in August due to essential maintenance work which impacted on capacity; for this reason the mobile theatre is being kept on site until the end of September. There followed a brief discussion on the case mix shift, how it affects the waiting lists and why it is currently increasing the backlog; it is expected that the backlog will be down to 160 by the end of November.
- Details were given on the non-admitted backlog which still required validation. It was noted the the RTT target for this category was also to be met by November.
- Short Notice Cancellations for non-medical reasons rose to 43 in the month. The highest area of cancellations was "Medical Practitioner Unavailable" (10) this was due to bereavement and could not have been avoided. This performance target is being monitored via the 18 week improvement meetings.
- Cancer Targets: All standards were met in August except 31 Day subsequent surgery at 86.7% against a standard of 94% (this represents 2 patients who breached) and 62 Day-2 week wait - 76% against a standard of 85% ( Southend only patients were 87.5% against the 85% standard). The Board was informed that one patient was referred onto the Southend pathway on day 102; the patient was treated very quickly but SUHFT still have to share the breach. Concerns

were raised that a breach protocol had still not been agreed with Basildon hospital, it was explained that Southend CCG cannot force Basildon CCG to sign up.

- Cancer Action Plan: There is a National requirement to complete a very detailed action plan, in a specific format. It was noted that actions put in place will not see results until the end of the year; compliance should be achieved by the end of Qtr.3. It was agreed the NED sub group monitoring the Emergency Care Action Plan will also monitor the Cancer Action Plan on a weekly basis.
- Pressure Ulcers: 4 avoidable pressure ulcers were reported in August; three of the 4 cases were on CastlePoint ward and were classified as avoidable due to poor documentation. The reconfiguration of the MSK wards has enabled more permanent staff to be deployed on CastlePoint ward, reducing the reliance on temporary staffing. Compliance with pressure prevention care is being monitored by matrons through daily spot check and weekly audit.
- Friends and Family: A decline in the Net Promoter Score (NPS) was discussed; the Board was informed there is a drive to raise awareness of the importance of the NPS Trust wide. Scott West to be asked if it is possible to show a correlation between certain wards and poor NPS scores (incorporating staff and patient comments).
- Cleaning: All domestic cleaning standards were met.
- Telephony: Priority standards 1 & 4 were met; Priority 2 - 95% of GP calls to be answered within 20 seconds target was just missed (94% against a 95% target). Priority 3 - standard not met (90% against 95% standard) but an improvement in performance over last month's 85%.
- Catering: There was a comprehensive discussion regarding the catering contract and Medirest's failure to meet Statutory Compliance. Written warnings have been issued re lack of temperature record documentation and the Trust has now increased the frequency of its checks & inspections on various wards. In light of the continued problems the Trust is holding weekly operational meetings with the contractor, involving senior facilities management and Matrons, to ensure any identified problems are dealt with swiftly. A formal warning will be issued to the contractor if all the issues are not addressed before mid-September or they continue without an implementation of any corrective measures.
- Workforce: The August round of meetings with Business unit senior management focused on Recruitment and Retention. There has been an improvement in staff turnover and a drop in the number of vacancies. Agency spend continues to increase, however, actions implemented should see an improvement from September onwards. The workforce section of future IPRs will show trajectories to compliance.
- Clinical Outcomes: following discussion it was agreed detailed reporting on clinical outcomes will go to QAC; a dashboard summary will come to the Board, as part of the IPR, once it has been agreed at QAC.

#### **Actions:**

- RTT Admitted: Insert waiting list trajectories for next meeting
- NHS 62 Day Cancer Target Trajectory for improvement to be shared with NED sub Group
- MRSA Screening Update to be included in next month's IPR
- Clinical Outcomes to be discussed at the next QAC and a summary to regularly come to the Board as part of the IPR
- Workforce: The section of the report on 'Risks & Mitigations' to be reviewed and

updated.

**Decision:**

- The Board noted the report and agreed actions.

*Item, 1 hour 3 mins*

**279/14 Staff Exit Questionnaire**

Keith Warrior, Acting Director of HR, gave the report to the Board with input from Lynda Steer and Marion Cain.

**Key Points:**

- In February the Board were presented with a report on the findings of a 6 month review of staff leaving, with less than 2 years' service. Following this report it was recommended that a review of the existing process for carrying out exit interviews be undertaken; the report showed the findings of that review; the findings also link in to recent Corporate Team discussions on high staff turnover and the lack of clarity on reasons why staff are leaving.
- Managers are to be encouraged to take a greater interest in the turnover figures in their area; it will be their responsibility to carry out exit interviews (rather than an external third party). The benefits of this approach include:
  - Information would be readily available to managers and Business Units
  - Trends and concerns would be quickly identified
  - Actions could be implemented quickly by the managers and the Business Unit
  - Staff feel management are interested in them – even when they are leaving
- Exit interviews will be piloted in 3 areas where turnover is high; at 3 and 6 monthly intervals manager and staff feedback will be evaluated.

**Decision:**

- The Board noted the report.

*Item, 11 mins*

**280/14 High Risk Recruitment Trajectories**

Keith Warrior, Acting Director of HR, gave the report to the Board.

**Key Points:**

- The Trust has a total of 432 vacancies equating to a vacancy rate of 10.2%. The Board discussed the Recruitment Action Plan which has been developed, following intensive work with Business units and corporate functions, to reduce the vacancy rate.
- Following discussion of the consultant recruitment trajectory figures and medical staff trajectory figures (on page 21 of the report) it was agreed that these numbers merited further review.

**Actions:**

- Interim Director of HR to review Consultant and Medical Staff recruitment trajectory figures with Medical HR

**Decision:**

- The Board noted the report and agreed action.

*Item, 10 mins*

## **281/14 Quarterly Employee Engagement Survey Data**

Keith Warrior, Acting Director of HR, gave the report to the Board.

### **Key Points:**

- The report provided key findings from the local quarterly Employee Engagement Survey carried out in August 2014. Only 3% of the workforce (131 people) responded to the questionnaire. It was stated that such a small sample made the findings unrepresentative.
- There was a brief discussion on whether Trust staff are 'survey fatigued' and what changes need to be made to make staff surveys more meaningful. It was agreed the Executive team will look again at the whole issue of staff engagement.

### **Actions:**

- Staff Engagement to be added to the next Executive meeting agenda

### **Decision:**

- The Board noted the report

*Item, 5 mins*

## **282/14 Staff Appraisals Report**

Keith Warrior, Acting Director of HR, gave the report to the Board.

### **Key Points:**

- Trust wide the level of appraisals completed stands at 74.15% against a target of 85% which is an increase of 1.55%.
- It was noted the practical implementation of the recommendations in the report had not been discussed by the Exec Team prior to the report coming to the Board; it will therefore come back to the Board following executive agreement.

### **Actions:**

- Action to be taken to ensure Board reports are presented and considered by the Executive Team before they are presented to the Board and Board Committees

### **Decision:**

- The Board noted the report; that it will come back to the Board following agreement by the Executive team.

*Item, 4 minutes*

## **283/14 Financial Position**

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

### **Key Points:**

- There was a deficit of £1.2m in August which increased the cumulative deficit to £3.6m. Although cash balances remain strong the Trust's Continuity of Service

Risk Rating (CoSRR) reduced to a 2.

- Income in August was higher than plan for both elective and non-elective. Maternity income remains behind plan.
- Agency spend decreased by £55k to £1.5m in August; decreases were seen in all clinical business units but this was offset by increases in Facilities and Corporate Areas.
- CIP delivery in August was £295k, 50% lower than the target for the month. The value of schemes identified by the PMO remains at £6.5m against a plan of £9.5m. £1.8m of these identified schemes are 'red rated' which means they are currently high risk in respect of delivery.
- There was a brief discussion on new to follow up penalties, it was noted these are not fines but non-payment for services; This issue will be discussed further in the next Finance & Investment Committee (F&IC).
- The Board was informed that a better analysis and understanding of activity is needed, the Income Team has been strengthened to look at this.

### **Decision**

- The Board noted the report aware that there is a further report in part two.

*Item, 5 minutes*

## **284/14 Part 1 Report from the Chairman**

The Chairman updated the Board as follows:

The Hospital Heroes Awards evening was a great success; the chairman described it as an uplifting event and expressed "thanks and well done" to both the organisers of the event and the winners of the awards.

The 'Four Chairs' meeting held on 11<sup>th</sup> September was "extremely positive"; concerns regarding Castle Point & Rochford CCG aligning with Basildon & Brentwood CCG were allayed; they will be making a joint 'communications' appointment. (the other three chairs were from SEPT, CP&R CCG and Southend CCG).

In a meeting with Sarah Boulton, Chair of the East of England Ambulance Service, Sarah confirmed the service is willing to deliver patients to a HASU; Sarah also mentioned funding for 11 HALOs (Hospital Ambulance Liaison Officers), SUHFT may get a share of a HALO.

HASU Press Offensive: an encouraging response has been received from Castle Point & Rochford CCG; however, disappointingly, nothing has been heard from the other CCGs.

*Item, 8 mins*

## **285/14 Part 1 Report from the Chief Executive**

Sue Hardy, in her role as Deputy Chief Executive, updated the Board as follows:

CCGs: Regular meetings are taking place with our two CCGs to ensure continued joint working.

'Signed up for Safety': This is a new national campaign to reduce 6000 deaths

nationally; the Board will be kept informed as more details are known.

*Item, 4 mins*

## **286/14 Audit Committee Report**

Mike Green, Chair of the Audit Committee, gave the report to the Board.

### **Key Points:**

- Good progress is being made against the annual audit plan with 10 reports issued to date.
- Two red rated reports have been issued since the last meeting (Agency Staffing and E-Rostering). These will be followed up later in the year so that progress can be captured. These are the first red reports for 2014/15.
- It was noted that most of the red rated reported over the last 2 years have related to systems and processes in staff related areas.
- A review of contract and income management has been completed at the request of the Chief Financial Officer.
- Consultant Job plans are not sufficiently advanced yet to enable a sample to be audited.
- Allocation of BAF reviews between the Board and its Committees has been agreed the majority of which will go to QAC. There followed a brief discussion on the growing number of items that have to go to QAC. It was agreed the QAC agenda needs to be reviewed; all the subcommittee agendas need to be constructed in a more business-like way.

### **Action:**

- Reconstruction of the QAC and other Sub Committee Agendas

### **Decision:**

- The Board noted the report and agreed actions.

*Item, 8 mins*

## **287/14 Board and Committee Meetings, Frequency & Dates**

Angela Bosnjak-Szekeres, Trust Secretary, gave the report to the Board.

Thee Board was asked to consider the proposed dates and agree the Board and Board Committees calendar for 2015

### **Decision:**

- The Board agreed the Calendar noting that the position will be reviewed in May 2015

*Item,3 mins*

## **288/14 Review of Board Calendar**

The Board Calendar was reviewed. It was noted the dates for 2015, now approved, will be added to the calendar.

It was agreed that 10th December will be the date of the joint November / December Board.

### **Decision:**

- The Board approved the calendar

*Item, 2 mins*

**289/14 Date of Next Meeting**

The next Board of Directors' meeting will be held on Wednesday 29th October 2014 in the Trust Boardroom.

*The Chairman thanked members for their contribution and declared Part 1 of the meeting closed at 12.00*