

SALISBURY NHS FOUNDATION TRUST

Minutes of the meeting of Salisbury NHS Foundation Trust Board Held on 7 October 2013 In the Boardroom, Salisbury District Hospital

Present:	Mr L March	Chairman
	Mr N Atkinson	Non-Executive Director
	Dr C Blanshard	Medical Director
	Dr L Brown	Non-Executive Director
	Mr M Cassells	Deputy Chief Executive
	Mr I Downie	Non-Executive Director
	Mr A Freemantle	Non-Executive Director
	Ms K Hannam	Chief Operating Officer
	Mrs A Kingscott	Director of Human Resources
	Mr S Long	Non-Executive Director
	Reverend Dame S Mullally	Non-Executive Director
	Miss T Nutter	Director of Nursing
In Attendance:	Mr L Arnold	Director of Corporate Development
	Mr P Butler	Communications Manager
	Mr D Seabrooke	Secretary to the Board
	Mr A Campbell	Volunteer
	Mr J Carvell	Governor
	Mrs C Collins	Governor
	Mr B Gould	Volunteer
	Mrs S Gould	Volunteer
	Sir R Jack	Governor
	Dr A Lack	Governor
	Mrs C Noonan	Governor
	Mr P Lefever	Wiltshire Health Watch
	Dr B Robertson	Deputy Lead Governor
	Mr C Wain	Governor
Apologies:	Mr P Hill	Chief Executive

1917/00 **INTRODUCTION AND WELCOME**

The Chairman opened the meeting by welcoming all present. He announced that the post of Chairman had been offered to Nick Marsden to start 1 January 2014.

1918/00 **INTERESTS AND FIT AND PROPER DECLARATION**

Board members were reminded that they had an obligation to declare any interest which might impact upon the business of the Trust, to avoid any conflicts of interest and to declare any matters that could affect their status as fit and proper persons to hold office. No Board member declared any such interest or impediment.

1919/00 **PAPERS FOR APPROVAL**

1919/01 **MINUTES FROM MEETING OF THE BOARD – 5 August 2013**

The minutes of the Board held on 5 August 2013 were agreed as a correct record subject to an amendment to minute number 1906/07, fourth bullet point to confirm that the information about the rate of cancelled operations will be reviewed in detail by the Clinical Governance Committee.

1919/02

CHIEF EXECUTIVE'S REPORT – SFT 3446 – Presented by MC

The Board received the report and the following principal points were highlighted:

- A successful AGM – on 23 September. There had been good support from the public and the presentation on the Trust response to recent NHS reviews had been well received
- Cancer patients rate their care highly in national survey and Health and Wellbeing programme. Cancer patients had rated their care highly with 93% of those asked saying that it was either very good or excellent in a national survey carried out by NHS England. In addition, Macmillan Cancer Support had funded a programme put together by the Trust's clinical psychologists and health and fitness staff in the Trust's staff club to provide a programme of physical activities, information and shared support for cancer patients over the next 18 months
- Representatives of the Health Service Journal had visited the Trust to assess its application for the 'Hospital of the Year and Innovation' award
- Joint Advisory Group assessment of Endoscopy Unit. There had been positive feedback from this recent review
- Funding to support dementia care. It was noted that work had got underway on the Redlynch Ward which had been decanted to provide a more dementia friendly environment
- Patient led assessment of the care environment. The result of the successor to the Patient Environment Action Team Audits had been published at the end of September. A full report would be presented to the Board at its 9 December meeting. While the Trust had scored excellent under the previous process, we had not done as well as we would have expected when benchmarked with other hospitals across the country
- Refurbishment of the main kitchen – an eight week programme had recently concluded during which time a temporary kitchen had been used during very hot weather and the standard of catering had been maintained at its usual high level. The Board asked that its thanks to the catering team be passed on
- Unannounced CQC visit – it was noted that representatives of the Care Quality Commission had visited the Trust on 2 October to assess the completion of the Trust's action plan in respect of the minor concern raised in April in respect of staffing and records
- A feature on my Trusty Little Sunflower Cream was expected to be broadcast on the One Show that evening

The Board noted the Chief Executive's Report.

1919/03

QUALITY INDICATOR REPORT TO 31 AUGUST 2013 – SFT 3447 – Presented by CB/TN

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

- CDiff – 0 cases in August and 1 attributed in September

making the quarter 2 total three, making the year to date 9 cases which was within the trajectory of 21

- The hospital standard mortality rate had increased to 115 for March 2013. It was noted that some variance in the figure could be expected over time as it was rebased twice-yearly. Issues around palliative care coding were being investigated as a possible underlying cause. The Trust's crude mortality rate had reduced from 100 to 68 between March and August 2013 and there was not considered to be cause for concern at this stage
- On stroke discharges there had been capacity issues on the Farley Ward, particularly at night
- Response rates to the Friends and Family test and Real Time Feedback were improving

In relation to the Trust's mortality figures, CB highlighted the continuing roll out of the Sepsis 6 care package which had been demonstrated to improve outcomes for many patients. Work continued to improve care pathways particularly to reduce the number of handovers of care required in the process. CB was also discussing with Wiltshire Public Health future review activities.

It was noted that there had been some use of the Day Surgery Unit for overnight patients, this was due to capacity issue, the Redlynch Ward had been decanted into the Braemore area and the Durrington Unit was now permanently open. The Trust continued to manage delayed transfers of care and develop intermediate care facilities in association with local GPs.

The Board noted the Quality Indicator Report.

1919/04 **COMPLAINTS REPORT - QUARTER Q1, 1 APRIL – 30 JUNE 2013 – SFT 3448 – Presented by TN**

The Board received the Customer Care report for quarter 1. It was noted that there had been 14 more complaints than in the previous year. In some instances complaints were being received from individual areas for the first time. It was noted also that response times to complaints were set locally and the Trust was currently consulting with staff on joining the Customer Care team with the Patient Experience team to improve the handling of complaints and to improve the chances to avoid complaints arising.

The work of the helpdesk in assisting people with a wide variety of queries was highlighted.

The Board noted the Customer Care report.

1919/05 **FINANCE COMMITTEE - 19 AUGUST 2013 – SFT 3449 – Presented by LM**

The Board received the minutes and the Chairman highlighted the discussion held on agency staffing rates that the Committee had held under minute 4.

The Board noted the minutes of the Finance Committee 19 August 2013.

1919/06

FINANCIAL PERFORMANCE TO 31 AUGUST 2013 – SFT 3450 – Presented by MC

The Board received the Finance Performance Report. MC highlighted the following principal points:

- A surplus of £1.2m had been achieved which was above plan due to additional activity
- The financial risk rating remained at 3 and this would be replaced by a continuity of service rating from month 7
- Cash was somewhat behind plan as the Trust was awaiting payment of invoices for clinical activity
- The Capital Programme was slightly behind
- The Trust had received a constructive challenge letter from the CCG in relation to over activity
- Activity for Dorset was expanding which was a concern as this was a block contract

MC remained concerned about levels of agency use and a number of other internal cost pressures and the need to refresh non-recurring savings each year.

NR highlighted the individual score under the financial risk rating of 2 for the Trust's surplus. MC felt that the long term future of the Trust would be more secure if it was generating a 4 or 5% return on its activity.

The Trust was discussing the CCGs financial position in relation to quarter 4 as it was considered likely that money intended to support transformation activity would in fact be diverted to funding in year activity. A more rigorous approach to setting clinical priorities could be expected from the CCGs if a financial shortfall arose.

The Trust would need to work in partnership with the CCGs to bring about transformation in care pathways including the integration of community based care.

The Board noted the finance report.

1919/07

TRUST PERFORMANCE REPORT TO END AUGUST 2013 – SFT 3451 – Presented by KH

The Board received the Trust Performance Report to 31 August 2013. The report included performance exception reports in respect in respect of Cancer, Diagnostics and the Emergency Department. A capacity issue in the Endoscopy Unit had been addressed and continued to review information on levels of demand through the week and were looking more broadly at how the 'front door' of the hospital was managed.

It was noted there had been 14 operations cancelled on the day during August – all patients had been rebooked within 28 days and directorates were reviewing the processes and systems to minimise the risk of urgent trauma cases and list overruns.

Work was continuing with Wiltshire Council and the CCG on delayed transfers of care. Medicine were now reviewing relevant patients on a daily basis to ensure that discharge arrangements

could be put in place at the earliest possible stage. This approach was due to be rolled out across all specialties during October.

On appraisal rates an improved position was now being reported but action was continuing to improve the position further.

The nursing vacancy factor was being addressed by skills mix reviews. Wards were being encouraged to predict likely vacancies so that these could be better managed and the use of agency staff in this circumstance reduced. It was noted that agency spend could be triggered for vacancy cover across a variety of clinical roles and also for 'special' care. The Trust continued to work with the Local Education training board (LETB) to develop return to practice initiatives. The Trust also took place in nursing recruitment fayres such as in Southampton, Bournemouth and in Salisbury Guildhall. Action was also underway to try to reduce the high rate of turnover in non registered nurses.

The Workforce Committee would continue to review this area and gain a full understanding of the different causes of agency spend.

The Trust Board noted the Performance Report.

1919/08 **COST IMPROVEMENT PROGRAMME UPDATE –Presented by KH**

KH gave a presentation to the Board outlining the 3 year challenge to save £25m. She described the approach now being adopted by the Programme Management Office to deliver business as usual alongside transformation activities. About half of the required 3 year savings had been identified so far and there was enthusiasm for this task among clinical teams and some frustration regarding the established systems in some areas. The Trust continued to talk to external companies to establish whether they have any fresh ideas that could drive the savings plan on further.

The Board thanked KH for the presentation.

1919/09 **CAPITAL DEVELOPMENT REPORT 1 JUNE – 30 SEPTEMBER 2013 – SFT 3453 – Presented by LA**

The Board received the Capital Development report.

LA highlighted the following principal schemes:

- Springs main entrance redevelopment – this would comprise two single storey extensions on the existing SDH north building with a new main entrance lobby, retail space – this was expected to start on site in May 2014 to run for the remainder of the calendar year
- Work on the Redlynch Ward funded by the Department of Health was underway and would be completed in January 2014. The next phase, Pitton Ward was planned to start in summer 2014
- The work on the Hospice refurbishment also supported by the DH was due to be completed by March 2014
- LA continued discussions with bidders for potential development on the southern part of the hospital site

The Board noted the Capital Development report.

1919/10 **UPDATE ON PAY OPTIMISERS AND TERMS AND CONDITIONS CHANGES – SFT 3454 – Presented by AK**

The Board received a report setting out progress on the review of pay optimisers for Agenda for Change and for clinical staff. An additional appendix B in relation to clinical staff was circulated at the meeting.

It was noted that the new performance/appraisal framework was shortly to be implemented, this would link performance to staff being awarded incremental progression on pay scales.

Some aspects of the optimisers shown in the report could be implemented within the latest Agenda for Change agreement, others needed further discussion with Staff Side.

The Board noted the pay optimisers report.

1919/11 **RISK MANAGEMENT ANNUAL REPORT 2012-13– SFT 3455 – Presented by TN**

The Board received the Risk Management annual report 2012/13.

The report confirmed that the process of an annual review of the assurance framework had been continued, that Internal Audit had carried out a review with an overall opinion of significant assurance, the reporting rate of instance had increased with patient falls being the most commonly reported incident. During the reporting period there had been 12 serious incident enquiries, 13 clinical reviews which had resulted in improvement work to the management of theatre lists, rationalising and segregating theatre stock, clarifying responsibilities of staff in patient identification, review of work experience guidance and the suitability of placements, and the escalation of patients for senior medical review.

The Board noted the achievements within the annual report 2012/13 and the annual risk management plan 2013/14.

1919/12 **Risk Management Strategy 2013/14 – SFT 3456 – Presented by TN**

The Board received the Risk Management Strategy 2013/14 draft.

The aim of the strategy was to ensure robust risk management processes were in place to ensure that the Trust is discharging its responsibilities in accordance with the outcomes framework and compliance framework.

The Board approved the revised Risk Management Strategy.

1919/13 **CLINICAL GOVERNANCE COMMITTEE DRAFT MINUTES: 10 SEPTEMBER 2013 – SFT 3457 - Presented by LB.**

The Board received the draft minutes of the Clinical Governance

Committee of 10 September 2013. It was noted that the Committee was proposing to hold nine time limited meetings per year starting in 2014.

1919/14 **WORKFORCE COMMITTEE MINUTES 22 JULY 2013 – SFT 3458 - Presented by SL**

The Board received the draft minutes of the meeting of the Workforce Committee of 22 July 2013. It was noted that mandatory training requirements had been improved and the range of mandatory modules had been reduced from 19 to 10.

The Board received the minutes of the Workforce Committee.

1919/15 **CLINICAL GOVERNANCE ANNUAL REPORT 2012/13 – SFT 3459 – Presented by CB**

The Committee received the report setting out progress with quality governance during 2013/13.

The Board noted the report.

1919/16 **MATERNITY AND NEONATAL RISK MANAGEMENT ANNUAL REPORT – SFT 3460 – Presented by TN**

The Board received the report for 2012/13 giving details of complaints, achievements and future plans in this service area.

The Board noted the report.

1919/17 **ASSURANCE FRAMEWORK 2013/14 PROPOSALS – SFT 3461 – Presented by TN**

The Board received the revised Assurance Framework for approval which highlighted 2 new principal risks – the failure to listen to feedback and the awareness of staff in changes in the direction of the organisation plus updates to existing risks. Three risks, relating to objective 8 of the National Dementia Strategy, failure to meet public sector equality duties and the failure to be the provider of choice.

These had been reviewed and were now integrated with other stated risks. The Board approved the Assurance Framework risks for 2013/14.

1919/18 **MINUTES FROM THE COUNCIL OF GOVERNORS MEETING HELD ON 22 JULY 2013 – SFT 3462 - Presented by LM**

The Board received the minutes of the Council of Governors meeting held on 22 July 2013.

1919/19 **REVIEW OF ASSURANCE FRAMEWORK AND RISK REGISTER – SFT 3463- Presented by LM**

The Board received the minutes of the 17 July meeting of the Joint Board of Directors which confirmed the regular review on the Trust's behalf of the assurance framework and risk register.

The Board noted the report.

1919/20 **REVIEW OF EFFECTIVENESS OF THE TRUST BOARD SUB COMMITTEES – SFT 3464 – Presented by LM**

The Board received a report setting out proposals to rationalise the effectiveness review, terms of reference review and annual reporting of the Boards committees so that all three exercises were delivered as part of the preparation for the Trust's annual report. The mandatory committees were required to give an account of how they had discharged their duties in the annual report and it was suggested that discretionary committees should make their report to the Board at approximately the same time.

A preliminary report was also presented on the scope of the governance reviews that were now required under the risk assurance framework by Monitor. Resolved 1: that the committees be asked to complete a self assessment of effectiveness for the June meeting of the Board and review their terms of reference and submit any proposed changes and 2: that the Board annually reviews the composition of its committees at its June meeting.

1919/21 **MANAGEMENT LETTER 2012/13 – SFT 3465 – Presented by MC**

The Board received the Management Letter 2012/13 from KPMG. It was noted that the recommendations contained in the letter had all been accepted.

The Board noted the Management Letter.

1920/00 **QUESTIONS FROM THE PUBLIC**

On behalf of Health Watch, Paul Lefever asked if the Trust's winter plan could be shared and KH undertook to follow this up. KH

- In response to a question from Chris Wain, TN described the challenges faced in maintaining staff numbers, including an aging staff population, some ill health and maternity related absences, additional bed capacity being opened.
- The recent recruitment of the nurses from Portugal continued to have a positive impact on the work of the Trust.
- The Trust continued to monitor trends towards services being allocated to larger centres, especially when this was prejudicial to patient choice

1921/00 **DATE AND TIME OF NEXT MEETING**

9 December 2013 at 1.30 pm in the Board Room.

1922/00 **CONFIDENTIAL ISSUES**

The Board resolved that under paragraph 13 (2) of Schedule 7 to the NHS Act 2006 the public be excluded from the meeting as publicity would be prejudicial to the public interest by reasons of the confidential nature of the business to be conducted.