

SALISBURY NHS FOUNDATION TRUST

Minutes of the meeting of Salisbury NHS Foundation Trust Board Held on 5 August 2013 In the Boardroom, Salisbury District Hospital

Present:	Mr L March	Chairman
	Mr N Atkinson	Non-Executive Director
	Dr C Blanshard	Medical Director
	Mr M Cassells	Director of Finance & Procurement
	Mr I Downie	Non-Executive Director
	Mr A Freemantle	Non-Executive Director
	Ms K Hannam	Chief Operating Officer
	Mr P Hill	Chief Executive
	Mrs A Kingscott	Director of Human Resources
	Mr S Long	Non-Executive Director
	Reverend Dame S Mullally	Non-Executive Director
In Attendance:	Mr L Arnold	Director of Corporate Development
	Mr P Butler	Communications Manager
	Mr N Cleaver	Directorate Senior Nurse – MSK for SFT 3428
	Mrs F Hyett	Deputy Director of Nursing
	Mr D Seabrooke	Secretary to the Board
	Mr J Carvell	Governor
	Mrs C Collins	Governor
	Mr R Coate	Governor
	Dr A Lack	Governor
	Mr P Lefever	Wiltshire Health Watch
	Mrs C Martindale	Lead Governor
	Dr B Robertson	Governor
	Mr M Wareham	UNISON
Apologies:	Dr L Brown	Non-Executive Director
	Miss T Nutter	Director of Nursing

1905/00 INTERESTS

Board members were reminded that they had an obligation to declare any interest which might impact upon the business of the Trust and to avoid any conflicts of interest. No Board member present declared such an interest.

1906/00 PAPERS FOR APPROVAL

1906/01 MINUTES FROM MEETING OF THE BOARD - 10 JUNE 2013

The minutes of the Board held on 10 June 2013 were agreed as a correct record.

1906/02 CHIEF EXECUTIVE'S REPORT – SFT 3424 – Presented by PH

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

- Changes to the way Trusts will be inspected by the CQC following the appointment of Professor Sir Mike Richards as the Chief Inspector of Hospitals. An initial 18 NHS Trusts

would be inspected under the new regime in the next few months

- Friends & Family Test – Initial results from this had given the rate of people who said that they would be likely or extremely likely to recommend the hospital to their friends and family and range of narrative comments to compliment complement the existing real time feedback. This was the subject of a dedicated agenda item later on
- Care Card – The Trust was piloting a yellow card issued to patients with a communication difficulty or disability to indicate the need for extra support or assistance
- The recent award given to 28 staff in recognition of 25 years' continuous service was highlighted
- It was also noted that the 47 nurses recruited from Portugal had now started work

The Board noted the Chief Executive's Report.

1906/03

QUALITY INDICATOR REPORT – QUARTER 1 2013/14 – SFT 3425 – Presented by CB/FH

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

- There had been six attributed cases of CDiff with no remediable factors identified. It was noted this took the Trust over its in-year trajectory of five attributed cases
- There were three serious incidents
- Mortality rates remained within the 'as expected' range
- Theatre capacity issues were causing difficulty in meeting the 36 hour target for fractured neck of femur
- For stroke care it was noted that patients whose total stay was less than 24 hours were now required to be included in the figures
- For the dementia audit it was noted that the final month of this graph would always show a substantial dip in respect of the percentage of GP referrals as these patients had not yet been discharged and the referral made

The Board noted the Quality Indicator Report.

1906/04

INDEPENDENT REVIEW INTO THE USE OF THE LIVERPOOL CARE PATHWAY – SFT 3426 – Presented by CB

The Board received a report on the announcement from NHS England about the next steps. The Clinical Governance Committee was reviewing this change and the Trust was communicating with staff as to the response.

A positive message had been issued to staff about the need to continue appropriate palliative care where this is required. It was noted that the decision to start a patient on the Liverpool Care Pathway was normally arrived at over several days and was always the subject of discussion with the patient's family and next of kin. As acknowledged in the Neuberger review, in the right hands, properly applied the Liverpool Care Pathway supports people to experience high quality and compassionate care in the last hours and days of

their life.

The Neuberger review had revealed some serious cases of unacceptable care where the Liverpool Care Pathway had been incorrectly implemented – this was not felt to be the case at Salisbury and the broadcast to staff had indicated the Trust would now consider how the use of the pathway can be phased out and new NICE guidance on the care of the dying introduced whilst ensuring the we continue to care for the dying with kindness and compassion.

The Board noted the report.

1906/04 **NHS SAFETY THERMOMETER UPDATE – SFT 3427 – Presented by Neal Cleaver (who attended for this item)**

The Board received an update on progress with the implementation of this measure.

The July 2013 figures indicated a trust wide harm -free care of 90.67% compared to the national rate of 91.2%. Progress would be monitored via the monthly Quality Indicator Report.

It was noted also that national work on a medicines safety thermometer may be reflected in the 2014/15 CQUIN agreement.

1906/04 **THE NHS FRIENDS AND FAMILY TEST –SFT 3428 – Presented by FH**

The Board received a report detailing the methodology for calculating the friends and family test result, as briefly discussed in the Chief Executive's Report. Additional information setting out the Trust's score compared with other local hospitals was tabled at the meeting. The Trust had a score of 70 under the methodology. The comparative tables also showed the relative response rates.

It was noted that the ongoing results of the friends and family test would feature in the Quality Indicator Report.

1906/05 **FINANCE COMMITTEE - 20 MAY AND 24 JUNE 2013 – SFT 3429 – Presented by LM**

The Board received the minutes of the Finance Committee for 20 May and 24 June 2013.

The minutes were noted.

1906/06 **FINANCIAL PERFORMANCE TO 30 JUNE 2013 – SFT 3430 – Presented by MC**

The Board received the Finance Report to 30 June 2013. MC highlighted the following principal points:

- The surplus to date was £0.486m
- The financial risk rating was 3
- Activity was up and there had been increased GP referrals in recent months
- Agency spend was considered to be high

- The concern that cost improvement plans only represented 70% of the total requirement; about half of the savings identified were considered to be non-recurring
- The above was being helped by the over activity

KH described the cross-directorate approach being adopted to the planning and delivery of cost improvement programmes over the coming 3 years.

MC described the proposals to agree the Trust's contribution the NHSLA for 2013/14 with further review of the figure in 2014/15.

It was noted that good progress was being made to transfer the laundry service into Salisbury Trading Limited and the current target date was 1 October 2013.

MC reported that the working capital facility had not been renewed from 1 August 2013.

It was noted that the spend on agency was attributed to an increase in additional one-to-one support for patients with various forms of dementia.

The financial situation of the CCGs would be closely monitored towards the end of the financial year.

The Board noted the financial performance report.

1906/07

TRUST PERFORMANCE REPORT TO END JUNE 2013 – SFT 3431 – Presented by LA

The Board received a report setting out recent performance against key indicators.

LA highlighted the following principal points:

- The quarter 1 performance for CDiff was 6 attributed cases which placed the Trust outside of its quarterly trajectory of 5 cases in quarter 1
- In respect of cancer 2 week waits, some patients were exercising patient choice and not accepting appointments in this timescale
- The increased referrals from GPs had put pressure on the Trust's availability for Choose and Book
- Information about the rate of cancelled operations was being reviewed in detail by the Clinical Governance Committee

LB

It was noted that a continued focus on raising the rate of staff appraisals completed was being maintained through the 3:3 meetings and the need for managers to upload details of their completed appraisals to the staffing record system was emphasised.

The agency spend was being addressed through a project to reduce and ultimately eliminate agency spend and this would be reviewed in detail by the Workforce Committee.

The Trust Board noted the Performance Report to 30 June.

1906/08 **EQUALITY AND DIVERSITY ANNUAL REPORT 2013 – SFT 3432 – Presented by AK**

The Board received the twice yearly Equality and Diversity Report. The report had been reviewed by the Workforce Committee. The Trust kept its advertising and recruitment processes under continual review and there was scrutiny of completed recruitments to test for any unconscious bias in relation to for example applicants with protected characteristics.

AK undertook to clarify whether staff on maternity leave received the increment. SL drew attention to the equalities guidance aimed at Board members issued by NHS Employers. The Board noted the report. AK

1906/09 **WORKFORCE REPORT 2013 – SFT 3433 – Presented by AK**

The Board received the annual Workforce Report and AK highlighted the following principal points:

- The Trust had an ageing workforce – this was affected by changes to the retirement age
- There had been an improvement to the rate of reporting for accidents and violent incidents
- The Trust had a low sickness rate compared to others in the South West
- There had been a small reduction in total staffing numbers

The Board noted the Workforce Report.

1906/10 **INFORMATICS STRATEGY 2013-16 – SFT 3434 – Presented by LA**

The Board received a report setting out the revised Informatics Strategy and LA highlighted the following:

- The recently completed PACs/RIS upgrade
- The planned upgrade to clinician's view that would enable easier to cross -refer between clinical applications in respect of the same patient
- Improved linkages outside the Trust e.g. to community providers and GP surgeries
- E-prescribing and medicine administration
- The challenge to replace the patient administration system

LA also gave an update on the current set of interviews for the post of Director of Informatics.

The Board approved the revised Informatics Strategy.

1906/11 **REMUNERATION COMMITTEE ANNUAL REPORT 2012-13– SFT 3435 – Presented by LM**

The Board noted the annual report of the Remuneration Committee which had reviewed the objectives of the Executive team throughout the year.

The Board received the report.

1906/12 **AUDIT COMMITTEE: 29 APRIL, 24 MAY AND DRAFT MINUTES OF 15 JULY 2013 – SFT 3436 – Presented by NA**

It was noted that the Committee had reviewed the Trust's standing financial instructions and standing orders at the its meeting on 29 April. As previously reported the Committee had scrutinised on the Board's behalf the draft Annual Report.

The report included the draft minutes of the meeting held on 15 July which had kept under review the reports of the internal auditor, local counter fraud specialist and appointed auditor.

The board noted the Audit Committee minutes.

1906/13 **CLINICAL GOVERNANCE COMMITTEE DRAFT MINUTES: 9 JULY 2013 – SFT 3436 presented by SM**

The Board noted the report and draft minutes of the 9 July 2013 meeting of the Committee.

1906/14 **WORKFORCE COMMITTEE MINUTES: 20 MAY 2013 – SFT 3436 - Presented by SL**

It was noted that the Committee was overseeing improvements to the range of workforce information.

The Board noted the minutes of the meeting.

1906/15 **COUNCIL OF GOVERNORS: 13 MAY 2013 – SFT 3437 – Presented by LM**

The Board noted the minutes of 13 May meeting of the Council of Governors.

1906/16 **REVIEW OF BOARD COMMITTEES TERMS OF REFERENCE – SFT 3438 – Presented by LM**

The Board received a report setting out details of the annual review of the terms of reference for the Audit Committee, Finance Committee, Workforce Committee and Clinical Governance Committee.

The revised terms of reference included with the report were approved.

1907/00 **QUESTIONS FROM THE PUBLIC**

Mark Wareham informed the Board that the Unison and Unite unions had raised a collective grievance concerning the terms of transfer of staff from the Trust to Salisbury Trading Ltd.

In relation to concerns about the delivery of hot food to wards, it was noted that replacement catering trolleys were the subject of a capital bid in addition to routine replacements.

It was noted that the Trust would seek to retain the core principles of the Liverpool Care Pathway in the transition to new, more individualised arrangements.

There was also a concern expressed about the effect on staff morale arising from the recent change to onsite car parking charges.

DATE AND TIME OF NEXT MEETING

7 October 2013 at 1.30 pm in the Board Room.

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.