

Minutes of the meeting of the Board of Directors
Held on Tuesday 25 April 2017
In the Boardroom, Doncaster Royal Infirmary

Present:	Suzy Brain England OBE	Chair of the Board
	Karen Barnard	Director of People and Organisational Development
	Moirra Hardy	Acting Director of Nursing, Midwifery and Quality
	Martin McAreavey	Non-executive Director
	Richard Parker	Chief Executive
	Linn Phipps	Non-executive Director
	David Purdue	Chief Operating Officer
	Neil Rhodes	Non-executive Director
	Jon Sargeant	Director of Finance
	Philippe Serna	Non-executive Director
In attendance:	Sewa Singh	Medical Director
	Marie Purdue	Acting Director of Strategy and Improvement
	Simon Marsh	Chief Information Officer
	Kirsty Edmondson-Jones	Director of Estates and Facilities
	Matthew Kane	Trust Board Secretary
	Emma Shaheen	Head of Communications and Engagement

ACTION

Welcome and apologies for absence

- 17/04/1** Apologies for absence were received from Alan Armstrong and John Parker. The Board welcomed Neil Rhodes and Marie Purdue who were attending their first meetings in their official capacities.

Declarations of Interest

- 17/04/2** There were no interests declared in respect of the business of the meeting.

Minutes of the meeting held on 28 March 2017

- 17/04/3** The minutes of the meeting of the Board of Directors held on 28 March 2017 were APPROVED as a correct record with the following amendment:

17/03/47 - The Trust's rolling 12-month HSMR position at the end of December was 93 (not 87).

Actions from the previous minutes

- 17/04/4** The actions were noted and updated. The following updates were provided:
- 17/03/59 – The Board was advised that the tender for insurance had been let.

- 17/03/11 – All NEDs had been invited to the person centred care days and would be invited to future listening events.

Chair's report

- 17/04/5** The Board considered a report of the Chair which outlined her recent involvement in the following activities:
- Meetings across the Trust
 - Members' Meeting
 - NED Objective Setting
 - Working Together Update
 - Governor elections update
 - Reports from the NEDs
- 17/04/6** The Chair commended her visit to the library, encouraging all NEDs to become members, as well as the Members' Meeting on 13 April that she felt was a good opportunity to find out what members thought about the Trust's services.
- 17/04/7** The Chair referred to advice issued in the previous week from NHS Providers as to whether elections to governor positions were affected by Purdah rules. Having taken a view from the Trust's elections specialists and other trusts it was agreed to proceed as planned. The Board backed this course of action.
- 17/04/8** Further to the reports from NEDs within the report, Neil Rhodes advised Board of discussions relating to the proposed redesign of Financial Oversight Committee into a new Finance and Performance Committee. Assurance would be fed back to the Board in the form of a Chair's Log and the Committee were supportive of working at pace in order to put in place a framework for the next Board in May.
- 17/04/9** Martin McAreavey fed back on the recent consultant interviews he had taken part in and the conference around duty, accountability and candour. In relation to a question relating to staff awareness of Datix statistics, the Chief Executive advised Board of plans for a new quarterly summary setting out the key complaints and risk issues to staff.
- 17/04/10** Linn Phipps fed back on her participation in the national "Learning from deaths in the NHS – new responsibilities for Board members" event in London, and placed particular emphasis on listening - how the Trust listens and responds to the views of patients, families and staff.
- 17/04/11** The Chair's report was NOTED.

Chief Executive's report

17/04/12 The Board considered a report of the Chief Executive which outlined progress against the following:

- Next steps in the Five Year Forward View
- Fire Safety Compliance Update
- Putting an end to #PJParalysis
- Government changes to Midwifery
- Consultations into hyper acute stroke and Tier 2 children's surgery and anaesthesia services
- Mandatory enhanced surveillance
- Changes to NHS Litigation Authority
- New training at DRI
- Acute Hospital Urgent & Emergency (UE) Mental Health Liaison Services (Adults and Older Adults) Transformation Fund
- IR35
- Strategic Hospital Review
- The Long Term Sustainability of the NHS and Adult Social Care
- Integrated Clinical Academic Programme Internships
- Improving interactions
- Changes within Executive Team

17/04/13 In drawing out some of the key headlines within the report, the Chief Executive advised that the calling of the General Election on 18 April may result in delays to moving forward some of partnership working as councils entered purdah. Board was also advised of changes to the management structure at Sheffield Teaching Hospitals.

17/04/14 In respect of IR35 rules, the Chief Executive advised that plans had been put in place over the Easter Bank Holiday period to mitigate against spikes in A&E activity but that the period had gone without major incident. IR35 rules had resulted in some shift cancellations, It was confirmed that these should be subject to a four week notice period otherwise the Trust had a duty to consider informing the General Medical Council. The Chair reiterated the Trust's commitment to finding a long-term solution to temporary staffing issues.

17/04/15 The Board commended the Trust's work on ending PJ paralysis as a means of reducing patient dependency and institutionalism. It was agreed to write to the team expressing thanks for the work being undertaken.

MK

17/04/16 The Chief Executive's report was NOTED.

Carol's Story

- 17/04/17** The Board watched a short film and received a presentation from Dr Lee Cutler, Consultant Nurse – Critical Care, on an item relating to a patient experience at two hospitals in the Trust. The film had been produced in association with Metro Films who had previously produced Gina's Story.
- 17/04/18** Having watched the film, the Board reflected on its key messages around culture, the power to choose and staff empowerment. The Chair reminded Board that its new committee structure would see an added emphasis on patient experience through the new Quality and Effectiveness Committee.
- 17/04/19** Carol's Story was NOTED.

Use of Trust Seal

- 17/04/20** The Board APPROVED the use of the Trust Seal in respect of the lease of land at 28-50 Ryton Street, Worksop, Notts.

2016 Staff Survey Results and Action Plan

- 17/04/21** The Board considered a report of the Director of People and Organisational Development that set out the Trust's staff survey results and action plan.
- 17/04/22** Between October and November 2016, 47% (2,938) of DBTH staff completed the NHS staff survey. This was the third year using an online survey of all staff and showed a continuing improvement on previous years' completion rates of 44%.
- 17/04/23** The survey highlighted a deteriorating picture for the Trust overall. Compared to all acute Trusts, of the 32 key findings this year:-
- 1 issue was in the best 20
 - 3 issues were better than average
 - 4 issues were at the average
 - 5 issues were worse than average
 - 19 issues were in the worst 20%
- 17/04/24** Compared with the Trust's 2015 results, one issue had improved, 17 stayed the same and 14 issues deteriorated. Upon the new Chief Executive coming into post a number of actions had taken place to address the issues raised and an action plan had been formulated around:
- How the Trust communicated with and listened to staff
 - How the Trust involved staff
 - Supporting managers to engage effectively with their staff

- Staff experience

17/04/25 Following consideration of the report further work on the action plan was required around highlighting measures of success and ensuring objectives were smart. Details of individual care group responses would also be forwarded to non-executives. **KB**

17/04/26 Linn Phipps raised a question discussed at the recent NHS Providers Network meeting which she had attended, around how the Trust measured how staff felt outside the staff survey, as well as how the Trust were enabling managers to support their staff.

17/04/27 The Board NOTED the outcomes from the 2016 staff survey and APPROVED the actions set out in the action plan, subject to the improvements highlighted above.

Annual Accounts - Going Concern Basis

17/04/28 The Board considered a report of the Director of Finance that sought authority for the Trust to prepare its financial statements on a going concern basis and to make the necessary declarations as part of its annual report and annual accounts.

17/04/29 In accordance with International Accounting Standard 1 the Trust, as part of its annual accounts preparation, was required to consider its ability to continue as a going concern. The report provided a summary in support of this. Board were satisfied with the assessment contained within the paper.

17/04/30 Board APPROVED that:

1. The Trust should be considered a going concern for accounts preparation purposes.
2. The Trust should prepare its annual accounts for the year 2016/17 and balance sheet as at 31st March 2017 on that basis.
3. The annual report should clearly state this assessment whilst also outlining the risks facing the trust.
4. Power be delegated to ANCR to sign off the accounts at a special meeting of the Committee on 26 May 2017.

Strategy & Improvement Update

17/04/31 The Board considered a report of the Acting Director of Strategy and Improvement that included updates on CIP progress, the 2017/18 CIP programme, the strategic planning process and the move from turnaround to transformation.

17/04/32 The report highlighted that savings at M12 were £11.893m, a decrease since M1 of £522k and a decrease since M11 of £69k. Delivery in M12 was £1.833m, ahead of plan in month by £516k and ahead of stretch by £433k in month.

17/04/33 The CIP for 2017/18 is £14.5m, of which £6.248m has been identified in developed delivery plans. Further CIP ideas were at varying stages of scoping and development with the relevant scheme SROs.

17/04/34 In response to a question from Linn Phipps on how assured the Trust was on delivering CIPs, the Board was advised that it would be important to consider not just internal savings but place based and partnership initiatives too. The need for a six month review of CIPS was emphasised.

MP

17/04/35 The Board RECEIVED the Strategy and Improvement Report for assurance.

Finance Report as at 31 March 2017

17/04/36 The Board considered a report of the Director of Finance that set out the Trust's financial position at month 12 2016/17.

17/04/37 The Board was advised that the year-end position was a £17m deficit, in line with the financial forecast. In response to the strong performance against the original financial plan, the Trust had received one-off support from the NHS Improvement in the form of a bonus payment which reduced the deficit to £6.7m.

17/04/38 Key points from the report included:

- Income was £1.6m higher than expected in month, £1.1m of which related to STF funding.
- Capital expenditure year to date was £10.1m of which £2.1m was funded from Charitable Trust Funds leaving £8m. The major areas of expenditure were on fire safety improvements, property works, medical equipment replacement and IT developments. Charitable Funds expenditure was focused on the Ophthalmology scheme.
- There was a cash draw down of £3 million to meet the anticipated high volume of creditors resulting from clearance from Agresso to the new Oracle system.

17/04/39 The Board briefly discussed the challenges on capital for the forthcoming year and it was agreed this would return to Board for discussion. If the Trust was successful in leveraging in STF funding for capital works then there may be opportunities to address a number of priorities.

17/04/40 It was AGREED that the Finance Report be NOTED.

Business Intelligence Report as at 31 March 2017

17/04/41 The Board considered a report of the Chief Operating Officer, Medical Director, Acting Director of Nursing, Midwifery and Quality and Director of People and Organisational Development that set out clinical and workforce performance in month 12.

17/04/42 Performance against key metrics included:

- 4 hour access - In March the Trust achieved 92.7% (93.4% including GP attendances) against the 95% standard. The Trust continued to perform within the top quartile of trusts and at the end of the financial year was the top performing adult service in South Yorkshire.
- RTT - In March, performance remained below the standard, achieving 90.5%, with eight specialities failing to achieve the 92% standard for the month.
- Diagnostic waits – The Trust missed the 99% standard in March achieving 97.4%.
- Cancer - In February, two-week waits were 85.5% against the 93% standard. The key issues related to patient choice and capacity in Dermatology and Urology departments. The 62-day performance achieved 86.8% against the 85% standard.
- HSMR – The Trust’s rolling 12-month position at the end of December was 92.8, positively remaining below 100.
- C.Diff – In 2016/17 there was a 19% reduction in the number of C. Diff cases than in 2015/16.
- Falls – In 2016/17 there was a 14% reduction in the number falls resulting in harm than in 2015/16.
- Pressure ulcers - In 2016/17 there was a 25% reduction in the number of hospital acquired pressure ulcers than in 2015/16.

17/04/43 Further to a question from Martin McAreavey, Board were advised of recruitment issues within Ophthalmology and Audiology that had affected the month’s performance. Issues with patient transfers from Bassetlaw to Doncaster were being addressed and issues relating to miscoding in pain management were being reviewed. In response to a question from the Chair, the Board was advised of plans to change the existing trauma model to increase capacity.

- 17/04/44** Neil Rhodes emphasised the importance of ensuring objective setting and appraisals at senior management level were undertaken early in the year to ensure dissemination of actions further down the structure. The Director responsible was seeking to remodel the appraisal timetable over an April-September time period.
- 17/04/45** The Chief Operating Officer advised of changes to the way in which emergency activity could be reported from 1 April. This would be measured in shadow format until confirmation of the requirements from NHSI.
- 17/04/46** The Business Intelligence report was NOTED.

Quarter 4 People and Organisational Development Update

- 17/04/47** The Board considered a report of the Director of People and Organisational Development which set out progress made in Q3 to deliver the current P&OD Strategy in 2016/17; the annual workforce related KPIs, corporate objectives and P&OD led projects.
- 17/04/48** The report advised that the cumulative sickness rate for the year was 4.46%, with a reduction in the numbers of long-term sick and an increase in sickness capability discussions. Compliance with Statutory and Essential Training (SET) continued to rise each month and at the end of March the rate was 69.54%. Official appraisal rates stood at 61.27% across the Trust although the staff survey indicated that 82% of staff had been appraised. The Directorate would continue to focus on improving the quality of appraisals as reported by staff.
- 17/04/49** The Q4 People and OD Update was NOTED.

Nursing Workforce Report

- 17/04/50** The Board considered a report of the Acting Director of Nursing, Midwifery and Quality which provided detailed information relating to the nursing workforce, highlighting issues that could impact on the Trust's ability to sustain appropriate staffing levels and skill mixes.
- 17/04/51** The overall planned versus actual hours worked in March 2017 was 99%, one per cent down on February. Care Hours Per Patient Day (CHPPD) stood at 7.5 across the Trust, up 0.3 on February.
- 17/04/52** Details of the quality and safety profile were provided in the report. Three wards triggered red in the month; the Acute Medical Unit, C2/CCU and Ward 25. These areas would be reviewed through a quality summit.
- 17/04/53** Further to a question from Linn Phipps, non-executives would be invited to attend a future quality summit.

- 17/04/54** The report in respect of Nursing Workforce was NOTED and the actions identified to ensure that the risks associated with inappropriate nurse staffing levels were appropriately managed was SUPPORTED.

Complaints, Concerns, Comments and Compliments Quarter 4 and Annual Report 2016/17

- 17/04/55** The Board considered a report of the Acting Director of Nursing, Midwifery and Quality which set out Quarter 4 performance using the information available from Datix and the learning points from the organisation, summarising the end of year activity.

- 17/04/56** Key points contained in the report were as follows:

- There had been a steady increase in numbers of complaints and concerns since December (less than 100 a month) to March (150 per month).
- Individual care groups had seen normal variation of complaints with the exception of Obstetrics and Gynaecology. Reasons for the increase in Obstetrics and Gynaecology were set out to the Board.
- Included for the first time in the report were concerns, comments and complaints from Members of Parliament.
- The main reason for complaints remained as communication. Training was being offered to staff around improving interactions with patients.
- Numbers of complaints being investigated by the Ombudsman were reducing.

- 17/04/57** The complaints, concerns, comments and compliments report was NOTED.

Junior Doctors Safe Working quarterly report

- 17/04/58** The Board considered a report of the Guardian for Safe Working that set out background and context around the introduction of the Guardian of Safe Working as part of the 2016 Terms and Conditions for Junior Doctors and implementation of that role within the Trust together with the second quarter update.

- 17/04/59** The report advised that no gross safety issues had been raised with the Guardian by any trainee. There had been 37 exceptions raised by junior doctors that had been resolved without any fines being levied. The processes for the payments highlighted in the report were being addressed.

17/04/60 The report of the Guardian of Safe Working was NOTED.

Chair's Log: Audit & Non-clinical Risk Committee and Clinical Governance Oversight Committee

17/04/61 The reports of the chairs of Audit & Non-clinical Risk Committee and Clinical Governance Oversight Committee were NOTED.

Reports for Information

17/04/62 The following items were NOTED:

- Learning from Deaths in the NHS
- EU General Data Protection Regulations
- Physical Assaults 2016/17
- Financial Oversight Committee minutes, 27 March 2017
- STP Collaborative Partnership Board, 17 March 2017

17/04/63 It was agreed that the item on Learning from Deaths would be brought back to Board in June. It was agreed that future reports on physical assaults would include normalised data.

MK

Items escalated from Sub-Committees

17/04/64 None.

Any other business

17/04/65 There were no items of other business.

Governors questions regarding business of the meeting

17/04/66 None.

Date and time of next meeting

17/04/67 9.00am on Tuesday 23 May 2017 in the Boardroom, Doncaster Royal Infirmary.

Exclusion of Press and Public

17/04/68 It was AGREED that representatives of the press and other members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.

Suzy Brain England
Chair of the Board

Date