

Minutes of the meeting of the Board of Directors
Held on Tuesday 21 August 2018
In the Boardroom, Doncaster Royal Infirmary

Present:	Suzy Brain	England OBE	Chair of the Board
	Karen Barnard		Director of People and Organisational Development
	Alan Chan		Non-executive Director
	Pat Drake		Non-executive Director
	Moirra Hardy		Director of Nursing, Midwifery and Allied Health Professionals
	Sheena McDonnell		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
	Kath Smart		Non-executive Director
	Sewa Singh		Medical Director
In attendance:	Kirsty Edmondson-Jones		Director of Estates and Facilities
	Marie Purdue		Director of Strategy and Transformation
	Matthew Kane		Trust Board Secretary
	Adam Tingle		Acting Head of Communications and Engagement
	Clive Tattley		Governor
	Mark Bright		Governor
	Emma Challans		Deputy Chief Operating Officer (part)

ACTION

Welcome and apologies for absence

- 18/8/1** The Chair welcomed Sheena McDonnell, Non-executive Director, to her first Board meeting.

Declarations of Interest

- 18/8/2** No interests were declared in the business of the public session of the meeting.

Actions from the previous minutes

- 18/8/3** The list of actions from previous meetings was noted and updated:

18/01/13 – The Board was advised that details of phase two Teaching Hospital would be contained within the Research and Development Strategy. This action would be closed.

18/7/70 – Following the previous meeting, the Chief Pharmacist had confirmed the Trust was taking all appropriate actions to reduce the impact of Brexit on medicines distribution. External guidance was also expected.

Presentation slot – Missed appointments

- 18/8/4** The Board considered a presentation from Emma Challans, Deputy Chief Operating Officer, on what the Trust was doing to reduce the number of missed appointments. This followed a similar presentation to Board, given in November 2017.
- 18/8/5** The review had resulted in four recommendations:
- Enhance communications between providers and patients
 - Improve the quality of information provided to patients when attending the hospital
 - Improve patient experience and enhance use of digital communication aids
 - Increase and improve knowledge to further strengthen patient understanding of services and meeting expectations.
- 18/8/6** Actions against each of the recommendations were set out and they were all on track.
- 18/8/7** Further to a question from Pat Drake, the Board was advised that the cost of missed appointments were now being emphasised through social media. There was also the opportunity to make better use of patient stories. Plans for a text reminder service were on track which would potentially free up some capacity within Switchboard.
- 18/8/8** It was important at the same time to acknowledge that reminders were a mixed economy and that a lot of people still did not use mobile phones. It was suggested that a small card, similar to that used at dentist's surgeries, could be developed in tandem to the text service.
- 18/8/9** In response to a question from Sheena McDonnell, the Board were advised that availability of patient mobile numbers was a risk and the Trust was taking learning from other areas. At present time, it was important to establish a baseline to which further information could be added. Linn Phipps asked what measures the Trust has or could have of patient experience of DNAs, and of patient outcomes arising from DNAs. The Deputy Chief Operating Officer undertook to find out.
- 18/8/10** The Chair emphasised the Trust's approach towards inclusivity that included a lot of work around governors. It was key that the missed appointments work was fed back to governors. The Board was advised that a similar presentation was planned for Council of Governors in October.
- 18/8/11** The Board NOTED the update.

Hospital Sterilisation and Decontamination Unit (HSDU)

- 18/8/12** The Board considered a report of the Director of Estates and Facilities which sought approval for the Trust to enter into a 15-year contract with STERIS IMS for the decontamination of surgical instruments and associated products.
- 18/8/13** The Board were advised that, in late 2015, a high-level internal review made the case for the market testing of the Trust's run Hospital Disinfection and Sterilisation Unit (HSDU). In May 2017, the Trust issued an Official Journal of the European Union (OJEU) advertisement for the provision of decontamination services. Following a lengthy and detailed evaluation, STERIS Instrument Management Services (STERIS IMS) were selected as the preferred bidder.
- 18/8/14** The bid represented a total net present value (NPV) service cost for the 15 year contract of £34.1m, with a NPV benefit to the Trust of £4.8m over the life of the contract when compared to the Public Sector Comparator (PSC).
- 18/8/15** Board were advised that although the contract gave rise to a direct cost pressure of £912k over the life of the contract or £61k per annum, there was the opportunity to mitigate this with savings generated from variant bids for Pre-Sterile Consumables and Loan Kits. Savings initiatives had been identified and risk assessed at 50%, totalling £823k over the life of the contract, which would therefore reduce the cost pressure to £90k over the life of the contract, or £6k per annum. By outsourcing the service the Trust would transfer all risks associated with the decontamination of surgical instruments, and release valuable space within a clinical area adjacent to theatres.
- 18/8/16** The report had been considered by the Finance and Performance Committee the previous day and the Chair drew out the following points:
- The proposal was a quality rather than finance focussed proposal.
 - Board noted that if the Trust were attempt to run the service in-house then it would need to invest approximately £4.8m. Whilst this proposal resulted in a small cost pressure (at least initially), it negated large capital investment through cost avoidance.
 - There had been very good engagement from executives on a range of points. It was clear the Trust had learned lessons from previous contract management work but there was still a need to monitor the transition.
 - The proposal aligned with the Integrated Care System and presented a fair deal for staff.
 - The proposal, if approved, would also unlock a significant portion of estate that could be used to support transformational projects as outlined in the Trust's clinical site development strategy.

- 18/8/17** The Board supported the proposal, although further to a point from Alan Chan felt that a middle ground between submitting the full business case and a two-page cover paper would be beneficial for such decisions in future. Linn Phipps, in particular, emphasised the need for an examination of risks. Board was advised that the full business case had been made available to Board members.
- 18/8/18** Further to a question from Sheena McDonnell, Board was advised of the arrangements for major incidents. In this situation, instruments would be 'fast-tracked' and supplied within four hours for no extra charge.
- 18/8/19** Board was also advised of the approach to staff engagement in relation to the contract. Board were assured that the approach was different to a previous contracts it had let as STERIS had offered staff transport to the new premises and other benefits and incentives were outlined.
- 18/8/20** The Board APPROVED the award of the 15-year contract to STERIS IMS for the decontamination of surgical instruments and associated products.

Completion of Contract Documents for Electrical Infrastructure Phase 2 - DRI

- 18/8/21** The Board considered a report of the Trust Board Secretary that sought permission for the signing under deed of the Stage 3 and Stage 4 NEC3 contracts for phase 2 of the electrical infrastructure bid.
- 18/8/22** Board was advised that the works were part of the Trust upgrade of its critical electrical infrastructure which was essential in order to increase the supply to the site which was currently at full capacity and continuation of the replacement of High and Low Voltage site infrastructure. The works were commensurate with the programme for the eradication of backlog maintenance and addressed an element of significant risk. The increase in supply was needed to ensure that the site had spare electrical capacity.
- 18/8/23** Board endorsed the contract for Electrical Infrastructure Phase 2 with IHP and DELEGATED power to the Chief Executive to sign on behalf of the Trust.

RP

Appointment of Non-executive Director for Speaking Up

- 18/8/24** The Board considered a report of the Director of People and Organisational Development and Trust Board Secretary that sought the appointment of Pat Drake as non-executive lead for speaking up.
- 18/8/25** Board was advised that national guidance for boards on Freedom to Speak Up in NHS foundation trusts, and the Trust's own Raising Concerns Policy – We Care, We Listen, We Act, required DBTH to have executive and non-executive lead directors for 'speaking up' (known in the Policy as 'raising concerns' or 'whistleblowing').

18/8/26 Following recent changes on the Board, it was proposed that Pat Drake be appointed to the non-executive position.

18/8/27 There was a brief discussion about the need for an anonymous DBTH email address through which whistle-blowers could report issues. Likewise, the NED proposed for the role was happy for Communications and Engagement to promote her own DBTH email address in correspondence with staff.

KB

18/8/28 Board APPROVED that Pat Drake be appointed non-executive lead for speaking up with immediate effect.

Use of Trust Seal

18/8/29 Board APPROVED the use of the Trust Seal in the following instances:

Seal No.	Description	Signed	Date of sealing
96	Lease of substation accommodation and easements at Doncaster Royal Infirmary for Northern Powergrid (Yorkshire) Plc	Richard Parker Chief Executive	8 August 2018
		Alex Crickmar Deputy Director of Finance	
97	Deed of variation of the contract for the provision of sexual health services with Nottinghamshire County Council	Richard Parker Chief Executive	8 August 2018
		Alex Crickmar Deputy Director of Finance	
98	Transfer of registered title – former nurses home, Mexborough for CW	Richard Parker Chief Executive	8 August 2018
		Alex Crickmar Deputy Director of Finance	

Chairs Assurance Logs for Board Committees held 20 August 2018

18/8/30 The Board considered a report of the chairs of Finance and Performance Committee and Quality and Effectiveness Committee following their meetings on 20 August 2018.

18/8/31 The Finance and Performance Committee reported a better month financially although effectiveness and efficiency plans of £2.2m were still required. Reporting periods for finance and workforce issues would be married up in future and a discussion was held on developing a performance report that better suited the needs of the Committee and other stakeholders. The Director of Finance provided additional detail on the Performance Report that he would be pulling together in conjunction with executive colleagues.

The meeting adjourned at 11.30am and reconvened at 11.40am.

- 18/8/32** The Quality and Effectiveness Committee had considered a number of items including the quarter end learning from deaths report, the inpatient survey as well as the usual clinical governance update.
- 18/8/33** In response to a question from Kath Smart about how the Board stayed close to CQC, the Board was advised that action plans were in place that were being considered by the Clinical Governance Committee who were reporting through to Quality and Effectiveness Committee.
- 18/8/34** The Board was advised of work that the Executive Team was carrying out on improving its approach to closing down actions. Ultimately the action plans arising from the inspection were the minimum the Trust had to do. It was working up a further action plan to take it to 'outstanding' within two years. The non-executive directors requested sight of the various action plans.
- 18/8/35** Board NOTED the updates.

Finance Report – July 2018

- 18/8/36** The Board considered a report of the Director of Finance that set out the Trust's financial position at month 4, which was a deficit of £1.24m, an adverse variance against plan in month of £94k.
- 18/8/37** The cumulative position to the end of month 4 was a £7.4m deficit, which was £64k adverse to plan. However the Trust needed to achieve a £6.6m deficit to deliver the year-end control total, and therefore needed to achieve a better than break-even position for the rest of the year.
- 18/8/38** Effectiveness and efficiency plans were behind by £135k in month due to a variety of operational pressures. There was still an unidentified effectiveness and efficiency total of over £2m. Cash was at a comfortable level (£14.8m) following receipt of Public Sustainability Funding (PSF).
- 18/8/39** Board were alerted to risks against the financial plan, not least the surge in attendances at Accident and Emergency threatened to compromise the Trust's four hour target and, in turn, future PSF monies. This position had gotten more difficult due to NHS England's decision not to allow trusts to count alternative pathways.
- 18/8/40** Further to a question from the Chair, the Board were advised of the current position with regard to the contract position and discussions with the clinical commissioning group over additional resources to match the demand seen and which the Trust had predicted at the commencement of the year.

18/8/41 Further to a question from Linn Phipps, the Board were advised that in order to be ready for Winter, the Trust needed to be clear on what would be paid for by October 2018. The Board noted the possibility of monies from the centre for Winter but this was as yet uncertain.

18/8/42 In addition to the usual finance report, the Board was asked to approve adjustments to the capital plan. The Trust had been advised that the £3m queried by NHS Improvement could now be used for capital development. The monies required for lift refurbishment, amounting to some £210k, were included in the revised plan along with other changes affecting estates, IT and medical equipment.

18/8/43 The Board:

(1) NOTED the Trust's deficit for month 4 (July 2018) was £1.2m, which was an adverse variance against plan in month of £94k. The cumulative position to the end of month 4 was a £7.4m deficit, which was £64k adverse to plan.

(2) NOTED the progress in closing the gap on the Cost Improvement Programme.

(3) NOTED the risks set out in this paper.

(4) APPROVED the changes to the capital programme.

Performance Report as at 31 July 2018

18/8/44 The Board considered a report of the Chief Operating Officer, Medical Director, Director of Nursing, Midwifery and Allied Health Professionals and Director of People and Organisational Development that set out operational and workforce performance in month 4, 2017/18.

18/8/45 Performance against key metrics included:

- 4 hour access - In July, the Trust achieved 92.1% against the target of 95% - another positive achievement given an increase in monthly attendance of over 1,200 patients.
- RTT – In July the Trust performed better than the contract target, reaching 89.6 – the same as June.
- Cancer targets – The 62 day performance achieved the 85% standard, coming in at 86.4%.
- HSMR – The Trust's rolling 12 month HSMR remained better than expected at 88.7.

- C.Diff – One case was recorded in month and below (better than) year trajectory.
- Nursing workforce - The Trust's overall planned hours versus actual hours worked in July was 99%.
- Appraisal rate – The Trust's appraisal completion rate saw an increase to 78.85%.
- SET training – Once again, there had been an increase in compliance with Statutory and Essential Training (SET) and at the end of July the rate was 81.43%.
- Sickness absence – Year-to-date figure at 4.1%.

18/8/46 The month had seen a further (8%) increase in the number of people attending Accident and Emergency and the Trust was working with local businesses to understand why that was the case.

18/8/47 In response to a question from Linn Phipps, the Board was advised on some of the issues causing delays for two week waits. The Chief Operating Officer was scheduled to bring a deep dive on the issue to a future Finance and Performance Committee.

18/8/48 The Board NOTED the Performance Report.

Reports for Information

18/8/49 The following items were NOTED:

- Guardian for Safe Working Quarterly Report
- Chair and NEDS' report
- Chief Executive's report
- Minutes of Finance and Performance Committee, 23 July 2018
- Minutes of Quality and Effectiveness Committee, 21 June 2018
- Minutes of Management Board, 16 July 2018
- Board of Directors Agenda Calendar

18/8/50 In respect of the report from the Guardian for Safe Working, some issues with regards to not taking breaks had been uncovered and an action plan was in place to address it.

- 18/8/51** The Board was advised of the Trust's achievement in relation to the latest PLACE assessment with Doncaster and Bassetlaw scoring better than the national average across all of the domains, including in catering.

Items escalated from Sub-Committees

- 18/8/52** None.

Minutes

- 18/8/53** The minutes of the meeting of the Board of Directors on 31 July 2018 were APPROVED as a correct record.

Any other business

- 18/8/54** There were no items of other business raised.

Governors questions regarding business of the meeting

- 18/8/55** Further to a question from Clive Tattley, the Board was advised of the measures the Trust was taking to improve the reputation of the appointments system.

- 18/8/56** Mark Bright asked whether the Trust's new sterlisation provider had contamination units on its own site and whether Sheffield Teaching Hospitals (STH) would be prepared to mentor the Trust in the set up. The Chief Executive gave an account of his experience in managing the sterlisation contract at STH and confirmed the presence of sterlisation facilities at STERIS. The Board were advised that the Trust had learned from previous outsourcing exercises and were now actively managing their contracts and managing performance.

- 18/8/57** In response to a further question from Mark Bright about staffing impact, the Board was advised of the benefits to staff.

Date and time of next meeting

- 18/8/58** 10.00am on Tuesday 25 September 2018 in the Boardroom, Montagu Hospital.

Exclusion of Press and Public

- 18/8/59** 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