

**Minutes of the meeting of the Board of Directors  
Held on Tuesday 29 January 2019  
In the Boardroom, Doncaster Royal Infirmary**

<b>Present:</b>	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
	Moira 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 (part)
	Sewa Singh	Medical Director
	Kath Smart	Non-executive Director
 <b>In attendance:</b>		
	Marie Purdue	Director of Strategy and Transformation
	Adam Tingle	Acting Head of Communications and Engagement
	Gareth Jones	Trust Board Secretary
	Liz Staveley Churton	Governor
	Clive Tattley	Governor
	Lynne Logan	Governor
	George Webb	Governor
	Mike Addenbrooke	Governor
	Gina Holmes	Staff Side Representative
	Yvonne Butcher	Staff Side Representative
	Nicole Chavaudra	ICP Programme Director (part)

**ACTION**

**Welcome and apologies for absence**

**19/1/1** All directors were present.

**Declarations of Interest**

**19/1/2** No interests were declared in the business of the public session of the meeting.

**Actions from the previous minutes**

**19/1/3** The list of actions from previous meetings were noted and updated.

**Presentation slot –**

**19/1/4** The Board considered a presentation from Nicole Chavaudra, ICP Programme Director of Bassetlaw Clinical Commissioning Group.

**19/1/5** The presentation outlined the key areas of the Bassetlaw Place Plan

2019/2021, with particular updates on the vision for the Place Plan, the ambitions for Bassetlaw, the integrated care partnership priorities and the collaborative partnership model.

**19/1/6** Following a question from Pat Drake around ensuring the Place Plan links with Education, and how gaps in education are being addressed, Nicole Chavaudra responded that relationships had been built with local schools and the education department of the local Council, and a Children's and Young People Network had been established that include staff from Doncaster and Bassetlaw Teaching Hospitals.

**19/1/7** In response to a question from Linn Phipps around measuring outcomes in terms of increasing patient activity, Nicole advised that a 'Miles in May' initiative had been developed for individuals and organisations to sign up to a combined 26 miles per day over the month.

**19/1/8** In response to a question from Kath Smart about engagement and involvement from the third sector, particularly community growth providers and housing, the Board was advised that the chair of the Integrated Care Board is from the third sector in Bassetlaw and Nicole's line management is to the Chair.

**19/1/9** In response to a question from Sheena McDonnell around a shared care record and its deliverability, the Board was advised that there had been key issues in the ability to move data from one system to another and further work had been undertaken with the County Council's interface. Nicole advised funding had been an issue, however support was being sought and a plan had been put into place to further develop a shared system.

**19/1/10** Following a question from the Chief Operating Officer around the expansion of housing in Harworth, and the preventative measures being undertaken in reducing pressure on hospitals and primary care, the Board was advised that the District Council in partnership with a number of Third Sector organisations and the County Council is leading on the engagement work. Nicole extended the invitation to members of the Executive Team to be involved in future discussions and engagement programmes.

**19/1/11** Neil Rhodes asked Nicole what the two key points from the presentation that required Board support, to which Nicole requested support with sharing of the Place Plan bulletins and communications, and for the organisation to sign up to the 'Miles in May' initiative.

**19/1/12** The Board thanked Nicole for the presentation and invited Nicole to attend in six months to provide an update. The Trust Board Secretary to include on the Board Calendar. **GJ**

**19/1/13** The Board NOTED the presentation.

**Use of Trust Seal**

19/1/14

Board APPROVED the use of the Trust Seal in the following instances:

Seal No.	Description	Signed	Date of sealing
103	Agreement for the installation and operation of Automated Teller Machines, between National Westminster Bank PLC and DBTH, Doncaster Royal Infirmary Site.	Richard Parker Chief Executive	23 January 2019
		Jon Sargeant Director of Finance	
104	Agreement in relation to a private patient unit at Park Hill Hospital, between DBTH and Ramsay Health Care UK Operations Limited.	Richard Parker Chief Executive	23 January 2019
		Jon Sargeant Director of Finance	

#### **Audit & Risk Committee Terms of Reference and Work plan Review**

19/1/15

The Board considered the revised Audit and Risk Committee Terms of Reference that set out the following amendments:

- Audit Committees role in reviewing risk management processes in a holistic manner – removal of reference to “non-clinical” from the TOR and title to reflect reference to all risk.
- Removal of the requirement for Audit Committee to review Whistleblowing processes after consultation with the Chair of QEC, Director of HR, and FTSU Guardian. This is now carried out at QEC and Board.
- Clarified in more detail the Audit Committees responsibilities for Counter Fraud.
- The work plan re-aligned to the TOR.

19/1/16

Kath Smart reported that the Terms of Reference and work plan had been reviewed by Internal and External Audit, based on their wider knowledge of Audit Committee and the HFMA Committee Handbook, which sets the standards for Audit Committees.

19/1/17

Board APPROVED the Terms of Reference and work plan.

## **Electronic Patient Record (EPR) Business Case**

- 19/1/18** The Board considered a report of the Chief Information Officer that set out the proposal of an Electronic Patient Record Business Case around task management, bed management, e-Observations, clinical noting and fax-de-commissioning, operable by 2024.
- 19/1/19** The proposal set out the funding requirements of £1.92million with a recurrent revenue of £0.52million. It was noted that the project is expected to deliver recurrent savings in excess of £1million but due to the difficulties in identifying the deliverable efficiency benefits beyond bed reductions demonstrated a payback period of nine years. The Board was advised that bidding would take place to NHS England for this funding and a decision on approval of funding from NHS England is anticipated by end of February 2019.
- 19/1/20** The Chief Information Officer advised that a pilot had taken place at Bassetlaw Hospital with positive outcomes that is expected to see bed management abilities enhance bed flow and capacity across the rest of the Trust.
- 19/1/21** The Chief Information Officer reported that 30,000 faxes per month are sent, or received across the Trust and acknowledged the difficulties posed by the removal of fax machines. Assurance was provided to Board that work continues to take place with NHS England in supporting Community Pharmacists, and other organisations in accessing NHS Mail to ensure patient safety and information flow. Further workflow exercises would be held when the fax has been completely removed from operation.
- 19/1/22** Following a request from Simon Marsh to have a Non Executive Director on the programme board, Neil Rhodes offered his support and will provide feedback on progress to Board, and Finance and Performance Committee.
- 19/1/23** The Finance and Performance Committee had approved the business case on 22<sup>nd</sup> January 2019 and made its recommendation for Board approval.
- 19/1/24** The Board APPROVED the business case and for the Chief Information Officer to proceed with his drawdown of capital funds from NHS England.

## **Finance Report as at 31 December 2018**

- 19/1/25** The Board considered a report of the Director of Finance that set out the Trusts financial position at month 9 as a cumulative £11.5 deficit, which is £35,000 favourable against forecast.
- 19/1/26** The Director of Finance reported a favourable variance against plan of £1,512k and a favourable forecast of £233k in month. The surplus for December 2018 was £59k.
- 19/1/27** The Trust needs to achieve £6.6 deficit to deliver the year-end control total,

and therefore needs to achieve a better than break-even position each month for the rest of the year.

**19/1/28** The Director of Finance reported that December had been a strong financial month for the Trust and had seen work continue ahead of plan and forecast. PSF had been successfully earned in the Quarter with £1.1million CIP delivered in month. £10-12million of CIP is estimated to be achieved.

**19/1/29** As reported via previous Board and Finance and Performance Committee, the Trust had a range of forecast scenarios that were presented which showed a £7.1m gap to the control total before PSF. It was agreed that if no further mitigations could be identified than a change in forecast was to be submitted to NHS Improvement at Month 9. Jon Sargeant reported that additional funding from the CCG and Integrated Care System had been offered to support the gap and further discussions on the offers received were being held.

**19/1/30** Neil Rhodes expressed frustration at starting the year with a financially challenging control total that had caused problems with accounting issues but acknowledged the work of the Trust in closing the gap and the work undertaken with the two local CCG's, and its achievement of CIP. The Chief Executive responded that work had been undertaken with partners at an ICS and Place Level to ensure the system is in a strong position as it enters the new financial year. It was recognised that Doncaster and Bassetlaw Teaching Hospitals had achieved the highest pro rata level of CIP across the South Yorkshire footprint and the Trust is to be commended for its work in this achievement.

**19/1/31** The Board NOTED:

(1) The Trust's surplus for month 9 (December 2018) was £59k, which is a favourable variance against plan in month of £1,512k. The cumulative position to the end of month 9 is a £11.5m deficit, which is £35k favourable to plan and £844k favourable to forecast.

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

(3) The forecast presented and reported to NHSi, of a £3.72m gap from delivering the control total before PSF (£9.4m gap including impact of not achieving Q4 PSF) and the risks set out in the paper.

### **Control Total 2019/20**

**19/1/32** The Board considered a report of Director of Finance outlining the Trusts control total for 2019 / 2020 as notified by NHS Improvement.

**19/1/33** The paper set out the Control Total for the Trust in 2019 / 20 is £15.296million deficit before PSF, FRF and MRET adjustments, and a breakeven control total when including MRET, PSF and FRF allocations. .

**19/1/34** The Board NOTED the control total for 2019/20.

### **NHS Long Term Plan**

**19/1/35** The Board considered a verbal update of the Chief Executive outlining the details of the NHS Long Term Plan. Board had been provided with a link to the NHS Long Term Plan at <https://www.longtermplan.nhs.uk/> and advised of the Executive Summary that detailed the key updates.

**19/1/36** The plan describes how the NHS is to develop over the next 10 years and describes some of the key changes and next steps. The Board noted changes around the Integrated Care System, commissioning landscapes, out of hospital care, and primary and community services.

**19/1/37** The plan outlines a key focus on population health ensuring right care at the right time in the right place, and self-care where such needs exist. Richard Parker advised that he has been nominated as the CEO member of the Population Health Management Group across the ICS.

**19/1/38** A key change was noted for ICS's requirement to have an independent Chair for the Health System and a future assurance role in terms of performance and constitutional standards.

**19/1/39** The Board NOTED the update.

### **Annual Planning Priorities**

**19/1/40** The Board considered a presentation of the Director of Strategy and Transformation in partnership with the Director of Finance that set out the Annual Planning priorities, its process, and key deadline dates.

**19/1/41** Marie Purdue provided assurance to Board that all plans were underway with Corporate and Divisional Teams and meetings had been held with the Divisional Senior Leadership Teams to review the plans for 2019 / 2020.

**19/1/42** Following a question from Pat Drake around the business plans linking with the NHS Long Term Plan, and the CCG's support of funding, Marie Purdue responded that initial conversation with the CCG's related to the Place based plan and the transformation agenda links the population needs to the funding held at CCG's and Local Authorities.

**19/1/43** Kath Smart raised a query around the level of support given to Divisional Senior Leadership Teams in the development of their plans. The Board was advised that the Divisions had received Executive support around the assurance process, had been given standardised business plan templates, access to HR Business plans and the capacity and demand tools used for Integrated Business Plans. It was noted that earned autonomy of the plans had been referred to Management Board and the plan is not an Executive Team responsibility to develop but Executives continue to support teams to

deliver. An invitation was extended to Non-Executive Directors to observe any of the working groups and to contact Marie Purdue if interested in attending.

**19/1/44** Marie Purdue advised that the Annual Plan would be presented to Board on 26<sup>th</sup> March 2019 for approval. **MP**

**19/1/45** The Board NOTED the update.

### **Performance Report at 31 December 2018**

**19/1/46** 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 the operational and workforce performance at month 9, 2018/19.

**19/1/47** Performance against metrics included:

- RTT – The Trust remained below target at 86.6%, which is a decrease of 0.3% on the previous month reporting.
- Diagnostic wait is 99.3% against the standard of 99.5%.
- 2 week waits – The Trust achieved 91.9% and was non-compliant with national target of 93%.
- 4 Hour Access Target – The Trust achieved 91.3% against national standard of 95% but with better performance than 2017/18.
- Cancer targets – The 62 day performance achieved 86.0%, increasing against last month's reporting of 83.0%.
- HSMR – The Trusts rolling 12 month was lower than the expected level at 93.43.
- Appraisals – The Trusts appraisal completion remained at 78.85%.
- SET Training – The Trust's SET training rate increased slightly to 78.85% at the end of December.
- Sickness Absence – The year to date figures has increased slightly at 4.38%.

**19/1/48** Following a discussion around the rise in Accident and Emergency attendance, Alan Chan suggested more work needed to be undertaken in educating people on how to use Accident and Emergency Services correctly. David Purdue advised Board that there had been many campaigns and advertisements on the correct use of the emergency department and advised of publications that had been provided advising of places to go should a patient require help. Board was advised of the Same

Day Health Centre in Doncaster that is an accessible out of hours GP service, the Choose Well campaign and the 75,000 people that had been reached over December via the Trust Facebook page that had seen no positive difference in A&E attendances.

**19/1/49** It was acknowledged that Flu had seen an increase in staff absence and A&E attendance in December and caused an increase in the reporting figures.

**19/1/50** The Director of People and Organisational Development informed Board that the Appraisal Season had again been planned between April to June 2019 due to the positive outcome of last year's season. The Executive Team have appraisal planned for March to set objectives that would be reflected into team objectives throughout the Trust.

**19/1/51** Pat Drake asked what action was being taken to ensure safe staffing in paediatrics. The Board were advised that this was part of the work being undertaken on the journey towards outstanding and a revised tool for paediatric staffing had been implemented. It was reported that the tool had been successfully used at Sheffield Children's Hospital. The pilot of this tool for the Trust commenced in September 2018 with data expected for October, November, December 2018 and January 2019 measuring its success. The results of this data would be shared with the Quality and Effectiveness Committee with responsibility for oversight of progress.

**19/1/52** Sheena McDonnell asked what action was being taken to address the Family and Friends Test response rate, and the low levels of feedback received. The Board was advised that feedback is monitored at the Patient Engagement and Experience Committee and a review of the FTT was being undertaken nationally that was expected later in 2019.

**19/1/53** Pat Drake asked if improvement would be seen with fractured neck of femur outcome now that an additional consultant had been appointed. The Board was advised that the Qii Team had been working with the Trauma and Orthopaedic Teams to empower staff to support the trauma pathway with a focussed piece of work expected to take place on fractured neck of femur.

**19/1/54** Board NOTED the report.

### **Widening Participation Framework**

**19/1/55** The Board considered a report of the Director of People and Organisational Development that highlighted the work undertaken with education and local partners to broaden the access to work and education across the Trust, and the action plan.

**19/1/56** The Board considered a Memorandum of Understanding with Hall Cross Academy, Hungerhill School, Doncaster College and the Trust on the opportunities of collaborative working for post 16 opportunities.

**19/1/57** Board APPROVED the MOU and NOTED the Widening Participation Framework.

### **Estates Quarterly Performance Report**

**19/1/58** The Board considered a report of the Director of Estates and Facilities detailing the performance of the Estates and Facilities Directorate in Quarter 3.

**19/1/59** The key highlights included:

- Appraisals remained at 94.07% exceeding the Trusts target of 90%.
- The Trusts cleanliness scores exceed the KPI of 90%, with DRI maintained at 96% for the third consecutive quarter.
- Sodexo achieved 95% for patient satisfaction for the first time since implementation of the new contract.

**19/1/60** The Board was advised that there remained some issues with accuracy of meals provided by, Sodexo, however plans are in place to rectify future issues and contract management meetings continued to take place. Plans are in place to repeat the ward catering survey in February 2019.

**19/1/61** Following a request made by the Board in October 2018 around planned preventative maintenance, the Director of Estates and Facilities reported that a risk based method was in use to ensure that all PPM's are being recorded on the system.

**19/1/62** Since the implementation of the Trusts Re-Turn Centre, it was reported that the re-using of surplus stock and furniture had saved £44,000.

**19/1/63** Following a discussion around staff satisfaction of completed jobs, Kirsty Edmondson-Jones reported that there had been an increase in satisfaction of jobs completed and particularly since the introduction of the ward Environment Assistants that visit every ward to proactively identify work that the needs to be completed. A survey Monkey had been developed to gain staff feedback and satisfaction to enable greater evidence collection.

**19/1/64** Pat Drake raised a concern that the data showed that jobs are still incomplete and suggested that an audit be undertaken to assess the full completion of the job. The Director of Estates and Facilities advised that the data demonstrated a system recording which had since been rectified. Board was advised that a cleansing of the system on a daily basis is undertaken on outstanding jobs which can be seen on the Estates Visual Management Boards. Further training had been planned for internal staff on how to data cleanse and monitor the system going forward.

**19/1/65** Following a question from Kath Smart around the discharge of health and

safety duties to the Board sub committees, it was explained that the Chairs of the sub-committee should see their own individual responsibilities and take through the appropriate governance structure. The Chair suggested that each committee should refresh their TOR in terms of Health and Safety responsibilities, and provide a recommendation to Board on how they wish to proceed going forward.

**KS, NR,  
LP**

**19/1/66** In response to a question from Linn Phipps in respect of environmental issues, The Chair of the Board suggested a workshop, or seminar for the Board on Capital Programmes and Environmental Impacts to be undertaken in the coming months.

**KEJ /  
GJ**

**19/1/67** Board NOTED the contents of the paper and the progress made.

#### **Chairs Assurance Logs for Board Committee held 22 January 2019**

**19/1/68** The Board considered a report of the Chair of the Finance and Performance Committee following the meeting held on 22 January 2019.

**19/1/69** The Finance and Performance Committee had received assurance on the financial picture and progress to deliver the control total. A further deep dive into the management of Referral to Treatment performance took place. The Director of Estates and Facilities provided her monthly update of progress on improving the quality and timeliness of patient meals.

**19/1/70** The Finance and Performance Committee held a lengthy discussion around the Electronic Patient Record Business Case proposal, which the committee supported and recommended to Board for approval.

**19/1/71** The Board NOTED the update.

#### **CQC Inspection Update**

**19/1/72** The Board received an update from the Director of Nursing, Midwifery and Allied Health Professional on the unannounced CQC inspection with regard to services provided at DBTH.

**19/1/73** Moira Hardy reported that work continued to deliver against the action plan with weekly meetings established, and taking place with ED and Paediatric colleagues. There has been two areas of focus identified by the CQC inspection of Paediatric Nursing levels and Front Door Assessment Service and Streaming model.

**19/1/74** It was reported that advertisements for the recruitment of band 5 and band 6 Registered Childrens Nurses to work in the emergency department had been undertaken. With support from the Training and Education Department, a course for Adult Nurses to undertake a paediatric distance learning courses had been sourced.

**19/1/75** The Board was advised of an application called POP that was being used with paediatric colleagues for the escalation of children's observations in the emergency department based on a priority scoring system.

**19/1/76** The Board was advised that the CQC rating review will reflect the areas assessed and not the overall rating of the Trust.

**19/1/77** Board NOTED the update.

### **Reports for Information**

**19/1/78** The following items were NOTED:

- Chair and NEDS' report
- Chief Executive's report
- Minutes of Management Board, 10 December 2018
- Minutes of Finance and Performance Committee, 23 November 2018 and 17 December 2018
- Integrated Care System Update

### **Items to Note**

**19/1/79** The following item was NOTED:

- Board of Directors Agenda Calendar

### **Minutes**

**19/1/80** The minutes of the meeting of the Board of Directors on 18 December 2018 were APPROVED as a correct record.

### **Any other business**

**19/1/81** Musical Event – Linn Phipps advised of a fundraising Musical Evening to be held at Bassetlaw Hospital on 22<sup>nd</sup> March 2019 at 6pm.

Chief Executive OBE – The Chair of the Board on behalf of members congratulated Richard Parker, Chief Executive, on the award of an OBE in the Queens New Years Honours.

### **Governors questions regarding business of the meeting**

**19/1/82** Referring to the hospital cancellation rate, Mike Addenbrooke expressed concerns on behalf of Governors of the number of cancellations and why 52 theatre cancellations had been recorded in the performance report. Going forward, Mike requested figures rather than percentages to which David

agreed to change the data reporting.

**19/1/83** Referring to the Trust Seal, George Webb queried the contract negotiations that expired at Park Hill Hospital, to which Jon Sargent advised that the contract had been strengthened to generate additional revenue for the Trust.

**19/1/84** Following a discussion around the increase in housing at Harworth, Clive Tatley asked what intelligence the Trust had to whether people will attend Bassetlaw or Doncaster emergency departments. David Purdue advised that no intelligence had been received and the potential impact is based on national assumption around Primary Care conversion rate to the impact is has on hospitals. It was noted that Section 106 of the Local Government Act required developers to work formally with the Council on such arrangements.

**Date and time of next meeting**

**19/1/85** 10.00am on Tuesday 26 February 2019 in the Boardroom, Bassetlaw Hospital.

**Exclusion of Press and Public**

**19/1/86** 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**