

**Minutes of the meeting of the Board of Directors**  
**Held on Tuesday 23 October 2018**  
**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
	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 (part)
	Sewa Singh	Medical Director
	Kath Smart	Non-executive Director
<b>In attendance:</b>	Marie Purdue	Director of Strategy and Transformation
	Kirsty Edmondson-Jones	Director of Estates and Facilities (part)
	Adam Tingle	Acting Head of Communications and Engagement
	Professor Linda Wyld	Honorary Consultant Breast Surgeon
	Matthew Kane	Trust Board Secretary
	Liz Staveley Churton	Governor
	Alan Robinson	Governor
	Mark Bright	Governor
	Yvonne Butcher	Staff Side
	Gareth Jones	Observing

**ACTION**

**Welcome and apologies for absence**

- 18/10/1** All directors were present, with the exception of Jon Sargeant who had been delayed due to traffic issues. The Chair welcomed Gareth Jones who would be joining the Trust on 3 December as Trust Board Secretary.

**Declarations of Interest**

- 18/10/2** No interests were declared in the business of the public session of the meeting.

**Actions from the previous minutes**

- 18/10/3** The list of actions from previous meetings was noted and updated.

**Presentation slot – Clinical research in older people**

- 18/10/4** The Board considered a presentation from Lynda Wyld, Professor of Surgical Oncology at University of Sheffield and Honorary Consultant Breast Surgeon, in the Jasmine Breast Centre at the Trust.

- 18/10/5** Professor Wyld had applied for and received funding to undertake research into treatment for older women with breast cancer. The work was still to be completed but had initially found that, often, surgery had an adverse impact on the patient and their chances of survival and that other forms of treatment including tablets were often a better solution.
- 18/10/6** In response to a question from Pat Drake, the meeting was advised that although the national screening programme finished for women over 70 people could continue with it if they were fit and healthy.
- 18/10/7** In response to a question from Linn Phipps about how research was translated into guidance, the Board was advised that analysis would be undertaken over the next year which would culminate in the publication of a number of papers.
- 18/10/8** In response to a question from the Chair about how Professor Wyld's appointment benefitted the Trust, the Board was advised that there were many benefits in respect of links to staff in the medical school and cross-fertilisation of ideas. The Medical Director praised Professor Wyld's work, whilst at the same time acknowledging some of the realities it presented in terms of treatment.

*Kirsty Edmondson-Jones, Director of Estates and Facilities, left the meeting at this point*

- 18/10/9** The Board NOTED the update.

#### **Use of Trust Seal**

- 18/10/10** The use of the Trust Seal for the entries 99, 100 and 101 in the Seal Register were APPROVED.

#### **Progress against Corporate Objectives 2018/19**

- 18/10/11** The Board considered a report of the Chief Executive which set out quarters one and two 2018/19 progress against the corporate objectives.
- 18/10/12** In total, one objective had been completed, 28 were on track, 25 were amber and none were off track. The Chief Executive confirmed that he had decided the ratings following an initial view by executives.
- 18/10/13** In response to a question from Sheena McDonnell, the Board was advised that the Chief Executive anticipated that most objectives would be completed and that many of the amber ratings would turn green in quarter three. Pat Drake requested that the information better align with the Trust's board committees.
- 18/10/14** Kath Smart expressed surprise that there were no red rated objectives. The Chief Executive advised that, as the year progressed, the picture would become clearer and at that point there may be some red ratings.

**18/10/15** Board NOTED the paper for assurance.

**Chairs Assurance Logs for Board Committees held 20 September 2018**

**18/10/16** The Board considered a report of the chairs of Finance and Performance Committee and Quality and Effectiveness Committee following their meetings on 22 October.

**18/10/17** The Finance and Performance Committee had considered a presentation on agency spend, received assurance on the catering contract, considered a bid for Integrated Care System funding for digital work and emphasised the importance of engaging with divisional directors on performance and finance matters.

*Jon Sargeant, Director of Finance, joined the meeting at this point.*

**18/10/18** Neil Rhodes went on to state that the Trust had achieved its quarter two Provider Sustainability Funding (PSF) for hitting finance and performance targets, but it was an incredibly challenging picture moving forwards.

**18/10/19** There was a brief discussion around the importance to the Trust of reducing the need for locums and hitting performance targets. March was understood to be especially challenging given the target was 95%, a standard that had not been hit nationally for six years. On locums, the Medical Director advised that plans were in place for each specialty to fill vacancies. A new Deputy Medical Director was leading on key initiatives, Getting It Right First Time and Model Hospital.

**18/10/20** The Quality and Effectiveness Committee discussed the path towards getting the Trust to CQC outstanding as well as the most recent report on Learning from Deaths. The Committee had also discussed risks within one particular service area and the value of apprenticeships.

**18/10/21** Board NOTED the updates.

**Strategy Update**

**18/10/22** The Board considered a report of the Director of Strategy and Transformation that highlighted progress against implementation of the Trust's enabling strategies and provided an update on the work the Trust was doing on quality improvement (Qi) practice.

**18/10/23** The main points from the paper were as follows:

- Terms of reference for the Trust's strategy groups had been amended.
- Qi events were taking place across the Trust.

- A purpose pyramid which identified the vision, mission and goals of the improvement work had been developed.
- A Value Stream Analysis (VSA) for Trauma and Orthopaedics had taken place and one for Maternity was planned.

**18/10/24** The Board discussed the value of research in Qi work and were assured that an approach would be developed and reported in Quarter 3. Further to a question from Pat Drake, the Board reflected on how challenging changing behaviours was compared to changing processes. Linn Phipps was keen for NEDs to participate in the Qi work.

**18/10/25** The Board NOTED the content of the report.

*The meeting adjourned at 11.20am for a short comfort break and reconvened at 11.30am.*

### **Finance Report – October 2018**

**18/10/26** The Board considered a report of the Director of Finance that set out the Trust's financial position at month 6 as a £1.1m deficit, which was a favourable variance against plan in month of £1.1m. The cumulative position to the end of month 6 was an £11.9m deficit, which was £1k favourable to plan.

**18/10/27** The forecast at Month 6 scenario indicated a range of potential year end positions, with the realistic case showing the Trust missing the control total by £2.9m (before PSF). Therefore, the Trust needed to take immediate action to close the financial gap and deliver the Trust's financial plan.

**18/10/28** Such measures included meetings with divisions and seeking to find £200k per month from reducing agency spend. Key risks included potential changes to block contracts and the need to agree activity figures in order to access funding to hit Referral to Treatment Targets.

**18/10/29** The Board was advised that the Trust expected to hit approximately £12m of cost improvement plans. The Trust now had in excess of £18m worth of schemes but, within that, there were some key priorities.

**18/10/30** In response to a question from the Chair, the Board was advised that the divisional directors were supportive of the First to Follow Up work and grip and control procedures. Further to a follow-up question from the Chair, the Board was advised that the Trust was expected to hit 90% of its CQUINs.

**18/10/31** The Board NOTED:

- (1) The Trust's deficit for month 6 (September 2018) was £1.1m, which was a favourable variance against plan in month of £1.1m. The cumulative position to the end of month 6 was an £11.9m deficit,

which was £1k favourable to plan.

- (2) The progress in closing the gap on the Cost Improvement Programme.
- (3) The forecast scenarios presented including the risks set out in the paper.

### **Performance Report as at 30 September 2018**

**18/10/32** 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 6, 2017/18.

**18/10/33** Performance against key metrics included:

- 4 hour access – The Trust achieved 93.7% against the national standard of 95%.
- RTT – The Trust performed slightly below our contract target, reaching 88%.
- Cancer targets – The 62 day performance achieved the 85% standard, coming in at 86.2%.
- HSMR – The Trust's rolling 12 month HSMR remained better than expected at 90.89.
- C.Diff – There were no cases recorded in month and below (better than) year trajectory.
- Nursing workforce - The Trust's overall planned hours versus actual hours worked was 99%.
- Appraisal rate – The Trust's appraisal completion rate remained static at 78.5%.
- SET training – The Trust's SET training rate remained static at 82.37%.
- Sickness absence – The year-to-date figure at 4.15%.

**18/10/34** This month's performance report contained a number of additional reports including details of children's autism pathways, delayed transfers of care and ambulance handover data. The Trust was working on improving

ambulance handover times but improvements could take some time as this was not a matter that was entirely within the Trust's control.

**18/10/35** Work continued on understanding why people attended Accident and Emergency. Approximately 2,500 people had responded to the survey in addition to 100k people liking it on Facebook but people's feelings towards the problem was not always matched by changes in behaviour. Linn Phipps reflected on the use of nudge theory that had been popularised by Richard H. Thaler and wondered whether such work could provide a way into tackling rising ED attendance.

**18/10/36** The Chief Operating Officer also reflected on the Trust's work around System Perfect and updated on discussions with HM Prisons Service. It was agreed that the outcomes of the two events to be held with the Prisons would be brought back to a future Board meeting.

**DP**

**18/10/37** In response to some concerns raised by governors, there was a brief discussion on medical outliers. While outliers was always something the Trust aimed to avoid, it had in fact reduced the numbers from 70+ three years ago to approximately three so far this year. Neil Rhodes praised the level of improvement noting that good performance did not always mean 100% nor did it mean zero and this should be recognised.

**18/10/38** There was a brief discussion around the transition to nurse-led paediatrics services within the Trust and it was agreed that this be brought back to a future Board meeting. It was noted that complaints performance had dipped in the previous quarter but it was felt that this may be attributable to the change in divisional structure so would be monitored.

**DP**

**18/10/39** The Board NOTED the Performance Report.

#### **Estates and Facilities Q2 Performance**

**18/10/40** *Kirsty Edmondson-Jones, Director of Estates and Facilities, re-joined the meeting at this point*

The Board considered a report of the Director of Estates and Facilities that set out a quarterly update against the performance of Estates and Facilities Services (E&F) for Quarter 2, July to September 2018.

**18/10/41** In summary, nine measures had seen an increase on the previous quarter; seven had seen a decline and two stayed the same. The report also included an overview of national benchmarked scores from this year's Patient Led Assessment of the Care Environment (PLACE) which had seen the Trust climb into the top 20 for a number of categories.

**18/10/42** The Board considered the report and proposed some changes including data setting out how long estates planned maintenance had been missed and a qualitative commentary for some of the data.

**18/10/43** Further to a question from the Chair, the Board was advised of a fault in the reporting system which had since been rectified. Linn Phipps advised that although estates risks sat within Finance and Performance Committee's remit she was keen for the Quality and Effectiveness Committee to explore how such issues affected quality.

**18/10/44** The Board briefly reflected on some negative news coverage that had sensationalised the true extent of the Trust's estates risk. In context with other trusts, the Trust had seen much fewer incidents relating to estates and facilities in the past year.

**18/10/45** Sheena McDonnell sought more assurance from the report over planned versus responsive repairs, expectations around delivery and health and safety issues.

*Sheena McDonnell & Kirsty Edmondson Jones left the meeting at 12.40pm.*

**18/10/46** The report was NOTED.

#### **Corporate Risk Register and Board Assurance Framework Q2**

**18/10/47** The Board considered a report of the Trust Board Secretary which set out the quarter two position on the corporate risk register (CRR) and board assurance framework (BAF), following review by executives.

**18/10/48** In the quarter, four risks on the BAF had seen ratings fall and one had been de-escalated from the corporate risk register. This included the risk around complaints handling. In view of current performance around complaints, this would be reviewed in the following quarter.

**18/10/49** The BAF continued to be refined with the addition of a 'direction of travel column'. The risks around Brexit continued to be monitored but it was felt that risks on the CRR and BAF around medicines management, workforce and information governance adequately covered this off.

**18/10/50** The report was NOTED.

#### **Reports for Information**

**18/10/51** The following items were NOTED:

- Chair and NEDS' report
- Chief Executive's report
- Minutes of Charitable Funds Committee, 31 July 2018
- Minutes of Management Board, 17 September 2018

#### **Items escalated from Sub-Committees**

**18/10/52** None.

### **Minutes**

**18/10/53** The minutes of the meeting of the Board of Directors on 25 September 2018 were APPROVED as a correct record.

### **Any other business**

**18/10/54** There were no items of other business raised.

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

**18/10/55** Referring to a recent discussion at the Trust's Management Board, Mark Bright asked how the Council of Governors would be involved in any discussions on a wholly owned subsidiary (WOS). The Board was aware that the Trust had agreed to explore the development of a WOS and had planned some listening events – including with governors - as part of that work. These had not taken place following NHS Improvement's request that trusts pause work on WOS development subject to a consultation. It was anticipated that guidance on the creation of a WOS would be issued following the consultation. If approval for a WOS was deemed to be a 'significant transaction' then governors would have an opportunity to directly influence the matter.

**18/10/56** Subject to a further question around how governors could be involved in Qi projects, the Board was advised that governors would be involved in such work through the Patient Experience Committee.

### **Date and time of next meeting**

**18/10/57** 10.00am on Tuesday 27 November 2018 in the Boardroom, Bassetlaw Hospital.

### **Exclusion of Press and Public**

**18/10/58** 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.

*The meeting concluded at 1.00pm.*



Suzy Brain England  
**Chair of the Board**

**Date**  
27 November 2018