



W&HHFT/TB/B/15/047

**Warrington and Halton Hospitals NHS Foundation Trust**  
**Board of Directors**  
**Minutes of the Board of Directors**  
**held on Wednesday 25th February 2015**  
**Trust Conference Room, Warrington Hospital**

**Present:**

Allan Massey	Chairman
Mel Pickup	Chief Executive
Simon Wright	Chief Operating Officer/ Deputy Chief Executive
Simon Constable	Medical Director
Karen Dawber	Director of Nursing and Governance
Tim Barlow	Director of Finance and Commercial Development
Jason DaCosta	Director of IT
Roger Wilson	Interim Director of Human Resources and Organisational Development
Carol Withenshaw	Non-Executive Director
Ian Jones	Non-Executive Director
Terry Atherton	Non-Executive Director
Lynne Lobley	Non-Executive Director
Mike Lynch	Non-Executive Director
Anita Wainwright	Non-Executive Director

**In Attendance:**

Colin Reid	Trust Secretary
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**Apologies**

**W&HHFT/TB/15/030 – Apologies & Declaration of Interest**

- 1 Apologies: as above
- 2 Declarations of Interest: None reported.
- 3 The Chairman welcomed Simon Constable, Medical Director and Trust Caldicott Guardian to his first Board meeting.

**W&HHFT/TB/15/031 – Minutes of Meeting**

- 3 The minutes of the meeting held on 28<sup>th</sup> January 2015 were approved.

**W&HHFT/TB/15/032 – Action Plan**

- 4 All actions contained in the action plan were either on the agenda, discharged or carried forward to a future meeting.

**W&HHFT/TB/15/033 – Chairman's Verbal Update Report**

- 5 The Chairman briefed the Board on the CQC inspection.



6 The Board noted the Chairman's Report.

#### **W&HHFT/TB/15/034 – Chief Executive Verbal Update Report**

7 The Chief Executive provided a verbal report on the following matters:

- 8 a) **Halton Hospital - Urgent Care Centre:** The Chief Executive reported on the opening of the Urgent Care Centre at Halton that would augment services within the Halton footprint and would provide a neighbourhood hub similar to the Widnes Urgent Care Centre. She advised that the team, that would be working within the facility had been heavily involved in the design and set up of the facility and as such the facility had been designed with staff and patients in mind, to support the people of Halton and prevent patients from having to access A&E at Warrington Hospital and St Helens and Knowsley Hospitals NHS Trust. The Chairman supported the Chief Executive's comments and recommended the Board members and those observing the meeting to visit the facility. The Chief Executive advised that the CQC as part of its inspection visited Halton Urgent Care Centre and had been very impressed with the facilities.
- 9 b) **Endoscopy Unit:** The Chief Executive reported on the opening of the new £500k endoscopy unit at Halton General Hospital which would bring an increased range of diagnostic and treatment services closer to home for thousands of Runcorn and Widnes patients each year. She advised that the state of the art unit opens at the Halton following six months of building work. It means that gastrointestinal endoscopies would be provided on both hospitals.
- 10 c) **Industrial Action:** The Chief Executive reported that the industrial action expected in January had been called off at short notice in order to review a new pay offer. She advised that if the new pay offer was rejected, a day of action would take place on 13<sup>th</sup> March 2015. The Chief Executive advised that the event planning team to deal with industrial action would be initiated.
- 11 d) **Francis Recommendation on Whistleblowing:** The Chief Executive reported that on 11 February 2015, Sir Robert Francis QC published his final report following the Freedom to Speak Up review which looked at the raising concerns culture in the NHS. She advised that the report makes a number of key recommendations under five overarching themes with actions for NHS organisations and professional and system regulators to help foster a culture of safety and learning in which all staff feel safe to raise a concern. The Chief Executive advised that the recommendations were being reviewed by the Interim Director of HR&OD and a paper would be brought to the next Board meeting setting out implementation proposals of the recommendations.

***Action TB/15/034: The Interim Director of Human Resources and Organisational Development to present to the March Board the Francis Recommendations regarding the Freedom to Speak up Review and what the Trust was doing to address the recommendations.***

12 The Chief Executives verbal update report was noted.

#### **W&HHFT/TB/15/035 – Verbal Report from the Chair of the Strategic People Committee**

13 Lynne Lobley, Chair of the Strategic People Committee on the work of the Strategic People Committee and referred in particular to the Committees work on reviewing bank and agency and no contractual



workforce requirements. She advised that the committee was seeking to develop divisional dashboards to show requirement and give greater visibility of spend in those areas which would in turn provide assurance that the Trust was utilising temporary staffing appropriately.

- 14 With regard to Assurance, Anita Wainwright advised that the Committee had been considering attendance at the meeting which had been poor and also the Committees reporting sub committees/groups. She explained that there was some concern over the level and content of the papers presented to the Committee and also whether the remit of the Committee was appropriate to provide assurances to the Board. This was also coupled with the appropriateness of the KPI dashboard presented to the Board. Anita Wainwright advised that these areas were currently being considered and any proposals to change the terms of reference and membership of the committee would be presented to the board for approval.
- 15 The Chairman thanked Lynne Lobley and Anita Wainwright for their verbal update and thanked Lynne Lobley for her work as Chair of the Committee which she had recently relinquished to Anita Wainwright.
- 16 The Chairman thanked Lynne Lobley for her verbal report.

#### **W&HHFT/TB/15/036 – Staff Survey Presentation**

- 17 The Interim Director of HR&OD introduced Candice Ryan, HR Business Partner who would present the findings of the annual staff survey 2014. Candice Ryan the presentation the results of the Staff Survey 2014, which had been released publicly through the CQC website on 24 February 2015.
- 18 Carol Withenshaw referring to the reduction in the rate of staff completing the questionnaire asked whether more could be done to increase the number. In response, Candice Ryan advised that each year different staff groups had been targeted to complete the questionnaire, she advised that it was disappointing that the number of staff completion rates had fallen and further work was required to improve completion rates for the 2015 survey. Candice Ryan advised that the national average for completing of the survey was 42%, the Trust rate was 30%.
- 19 Lynne Lobley asked what was being done to share the findings with staff in order to identify and make improvements. Candice Ryan advised that the finding would be shared with staff in pictorial format, following which focus groups would be formed to focus on improvement areas.
- 20 Anita Wainwright noted the content of the presentation and asked what was being done to look at the key relationships that make a job satisfying. In response the Interim Director of HR&OD advised that one of the key areas was the relationships between managers and staff reporting to them. He explained that the Trust was looking to address the way managers are developed such that they were able to deliver appropriate staff expectations and improved engagement. Anita wainwright asked whether there was a KPI to assess performance in staff engagement. In response the Interim Director of HR&OD advised that the HR Business Partners were looking at this requirements to identify appropriate KPIs.
- 21 The Chairman thanked Candice Ryan for her presentation noting that the Strategic People Committee would be receiving updates on improvements arising from the findings of the survey. He asked that the Strategic People Committee receive an update report and if appropriate report any conclusions to the Board later in the year. He felt that the questionnaire provided a rich source of information that needed to be developed.

**W&HHFT/TB/15/037 - Workforce and Educational Development Key Performance Indicators**

- 22 The Interim Director of HR&OD presented the Human Resources / Education & Development Key Performance Indicators (KPIs) Report and reported that there had been little change in Mandatory Training and PDR rates. He advised that the Divisions had, through the Bi-laterals, been instructed to address mandatory training. With regard to the increase in sickness absence, the Interim Director of HR&OD advised that there was a clear policy that needed to be implemented and this required addressing across the Trust. The Interim Director of HR&OD advised that the increase in temporary staffing expenditure needed to be addressed to understand the root cause of the increase.
- 23 The Chairman referred to the high level in medical staff vacancies and asked why this was the case and what was being done to address the number given the high level of cost associated with appointing locums. The Interim Director of HR&OD reported that there had been an increase in medical staffing turnover rates which had also been seen nationally. He advised that the Trust needed to be more creative in the recruitment of medical staff such that the Trust did not need to rely heavily on locum and temporary staffing requirement. Mike Lynch recognised the issues surrounding the recruitment of medical staff and advised that the Trust needed to control what was within its control. He felt that operational pressures would always place a burden on the Trust to make decisions on appointment of locums and temporary staffing and it was within these pressures that the Trust should challenge whether it was appropriate to recruit temporary staff to de-escalate the operational pressures. Lynne Lobley sought clarification on what was being done to address pending retirements within medical staffing. In response the Interim Director of HR&OD advised that the retirements were within elderly and stroke. He advised that the trust was finding it increasingly difficult to recruit for these services. The Chief Operating Officer advised that where recruitment was proving difficult the Trust was looking to develop clinical staff, such as specialist doctors, so that they could fulfil additional roles. This was being taken forward in the Strategic People Committee.
- 24 The Chairman thanked the Interim Director of HR&OD for his report which was noted.

**W&HHFT/TB/15/038 – Staffing Levels - Monthly Staffing level exemption Report**

- 25 The Director of Nursing and Governance presented the Staffing Levels Report which included the Monthly Staffing level exemption Report for January 2015.
- 26 The Chairman asked that for future reports the Director of Nursing and Governance provide narrative such that the Board was able to understand more fully what the exemption report was saying so that the Board would have the necessary assurances that the wards were staffed appropriately. The Chairman asked for any comments on the Report and following review the Staffing Levels Exemption Report was noted by the Board.

***Action TB/15/038: The Director of Nursing and Governance to provide in future staffing level reports a narrative so that the Board can be assured that the correct staffing levels were in place across the Trust's clinical areas.***

- 27 The Chairman asked for any comments on the Report and following review the Staffing Levels Report and Exemption Report was noted.

**W&HHFT/TB/15/039 - Verbal Report from the Chair of the Finance and Sustainability Committee (FSC)**





36 The Director of Finance and Commercial Development referred to QPS and advised on the requirements to have the right staff in place to provide quality of care to patients, this had impacted on the Trusts sustainability position. He further reported on the difficulties in delivery of CIP, in particular the CIP that related to reduction in staffing pay bill. The Director of Finance and Commercial Development referred to the actions being taken to manage the cash position of the Trust which included managing creditor and debtors such that the rate was running at 1:1. He did feel that the Trust would find it increasingly difficult to delay payments to creditors and pressures would come to bear on the Trust from suppliers if they were not managed well.

37 The Chairman thanked the Director of Finance and Commercial Development and felt that it was a sobering report. He noted the difficulties the Trust had encountered over the last two years and he advised that it was predicted that 2015/16 would be the year that the wheel would fall off. The Chairman felt that there was a clear indication that the level of deficits across the acute FT sector could not continue given impact on cash and solvency. He advised that the health sector depended on the whole health economy working together.

38 [Lynne Lobley took the Chair for the remainder of the Finance Report]

Mike Lynch referred to the tariff deflator and asked what the Trust's position was. The Director of Finance and Commercial Development advised that foundation trusts had been given two options by Monitor and provided details of each option which the Trust was asked to choose. He advised that he was still looking at which option would have less impact on the Trust's financial position, explaining that either options had a negative impact.

39 The Chair thanked the Director of Finance and Commercial Development for his report. The Board recognised the financial risks reported in the paper and noted Finance Report to 31<sup>st</sup> January 2015.

#### **W&HHFT/TB/15/041 – Corporate Performance Dashboard and Exception Report**

40 The Chief Operating Officer presented the Corporate Performance Dashboard and Exception Report for January 2015 and explained that the full report had been presented to the FSC prior to the exception report coming to the Board. The Chief Operating Officer advised that it was very important to note that the Trust continued to deliver against all targets with the exception of A&E, which continued to be a pressure across the whole of the sector.

41 The Chief Operating Officer reported that the Trust was the only one in the country to implement the Perfect Week following the Christmas and new year break. He advised that towards the end of the Perfect week period (the perfect week was 10 days) the Trust was delivering a 96% 4hr performance, as the system was able to work together to support the Trust during the period. However since the end of the perfect week period the Trust had seen a worsening in performance as the whole system was not able to continue to provide the support it had during the perfect week. The Chief Operating Officer advised that this showed that the problems facing the Trust was systemic.

42 The Chief Operating Officer advised that during January 2015 the Trust had seen a rise in the diarrhoea and vomiting bug (D&V) which had resulted in 8 wards being closed to new admissions for period of time whilst the infection was managed. The Chief Operating Officer thanked the infection control team who had tirelessly supported with the Wards during this time and needed to be recognised. The Chief Operating Officer advised that as a consequence almost 40% of the available acute beds were either blocked or unavailable due causing severe queuing of patients in A&E and resulting in very high



numbers of patients breaching the 4 hour standard. He reported that the Trust had received the planned CQC inspection during this time and although the pressures were noted, no significant concerns were raised with the team regarding care, quality, experience or safety of our patients accessing emergency or urgent care throughout this period. The Chief Executive reported that flu also impacted on admission numbers in late December and throughout January.

- 43 Mike Lynch recognised the work of the staff in continuing to provide quality of care to patients and felt that it was a pity that successes delivered during the perfect week could not be embedded in practice and felt that the medical staff and management of the Trust were paying the price for failings in the system. Lynne Lobley asked whether the media were aware of the issues regarding the lack of intermediate beds. In response the Chief Operating Officer understood that they were and reported that a review was to be undertaken that would be fundamental in providing data on the right levels of care across the local health economy which would include intermediate care. The Medical Director referring to the comments of Mike Lynch advised that ECIST and Perfect Week were evidence based and effective initiatives in providing the whole system with the information it needed to make decision on the delivery of quality of care. He felt that the initiatives also provided invaluable information on the resilience of the Trust on how it provides care and the challenge was in getting the Trust's house in order as part of a whole system solution.
- 44 The Chairman thanked the Chief Operating Officer for his report which was noted.

#### **W&HHFT/TB/15/042 – Verbal Report from the Chair of the Quality Governance Committee**

- 45 Mike Lynch, Chair of the Quality Governance Committee advised that the Committee had not met since the last Board meeting and therefore had nothing additional to add to the papers being presented today. He did advise that work was underway to implement the Quality Strategy approved by the Board and this would impact on the role of the Quality Governance Committee.
- 46 The Chairman thanked Mike Lynch for his verbal report which was noted.

#### **W&HHFT/TB/15/043 – Quality Dashboard**

- 47 The Director of Nursing and Governance presented the Quality Dashboard and advised that exception reports were included for non-compliant indicators including SHMI, HCAI, Care Indicators, Pressure Ulcer CQUIN, AQ Heart Failure, Friends and Family, Cardiac Arrests and Mixed Sex Occurrences.
- 48 The Director of Nursing and Governance expanded on the exception report advising that there was some disappointment that the MUST risk assessment score had not improved and moved into green. She advised that a Patient Safety Champion would be formulating a recovery plan to ensure that all the wards participate in the self-assessment and also that completion of risk assessments improve with a specific focus on MUST Risk Assessments. The Director of Nursing and Governance advised that as part of the review the pressure ulcer RCA tool had been amended to identify if the MUST score was correctly completed on admission; further increasing focus on this important assessment. With these changes she hoped improvements in completion of the MUST risk assessment would be made.
- 49 The Medical Director referred to the work undertaken by his predecessor regarding the review of mortality during December and January and reported that indications were that there was no underlying issues that required immediate attention. He advised that it was important to gain learnings from all deaths including areas of 'care/compassion', 'coding', 'death certificate' and 'clinical' amongst other areas and advised that work was being progressed to look into areas of



concern. Mike Lynch supported the work being undertaken which would provide assurance to the Board that the Trust understood where there were avoidable deaths and harm. He felt it was important that the Medical Director and Board get to a position where it understands the issues facing the trust and what improvements could be made.

50 The Chairman thanked the Director of Nursing and Governance for her report which was noted.

#### **W&HHFT/TB/15/044 – CQC Inspection**

51 The Director of Nursing and Organisational Development provided a brief verbal report on the closing meeting with the CQC following there inspection and agreed to distribute a briefing note to the Board.

***Action TB/15/044: Trust Secretary to distribute briefing note to the Board on the observations from the CQC inspection.***

#### **W&HHFT/TB/15/045 – Board Committee Report**

##### ***i. Verbal Reports***

##### ***52 a) Audit Committee held on 3<sup>rd</sup> February 2015***

Ian Jones, Chair of the Audit Committee provided a verbal update to the Board on the activity of the Audit Committee, in particular the committee considered the MIAA draft plan, accounting policies for the Annual Report and Accounts 2015 and reviewed the internal audit report. He advised that there was concern expressed at the meeting with regard to staffing levels within AED and noted that a completing date for management action would be September 2015.

##### ***53 b) Charitable Funds held on 3<sup>rd</sup> February 2015***

Lynne Lobley, Chair of the Charitable Funds Committee provided a verbal update to the Board on the activity of the Committee, in particular she noted that income through donations to the charity had fallen which was impacting on funding proposals. Lynne Lobley advised that the post of fundraiser had been advertised and that an appointment is made, she hoped to see donations and sponsorship improving.

##### ***ii. Minutes for noting***

54 Having received verbal update from the Chairs of each of the Committees at earlier Board meetings the Board noted the following minutes:

##### ***a) Finance and Sustainability Committee held on 20th January 2015***

55 The Board noted the activity of the Board Committee.

#### **W&HHFT/TB/15/046 – Any Other Business**

56 None

**Next Meeting:** 25<sup>th</sup> March 2015