

W&HHFT/TB/B/14/040

**Warrington and Halton Hospitals NHS Foundation Trust
Board of Directors
Approved Minutes of the Board of Directors
held on Wednesday 26th February 2014
Trust Conference Room, Warrington Hospital**

Present:

Allan Massey	Chairman
Mel Pickup	Chief Executive
Simon Wright	Chief Operating Officer/ Deputy Chief Executive
Karen Dawber	Director of Nursing and Organisational Development
Tim Barlow	Director of Finance and Commercial Development
Paul Hughes	Medical Director
Carol Withenshaw	Non-Executive Director
Clare Briegal	Non-Executive Director/Deputy Chair
Rory Adam	Non-Executive Director
Lynne Lobley	Non-Executive Director
Mike Lynch	Non-Executive Director

In Attendance:

Colin Reid	Trust Secretary
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Apologies:

Jason DaCosta	Director of IT
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W&HHFT/TB/14/021 – Apologies & Declaration of Interest

- 1 Apologies: as above
- 2 Declarations of Interest: None reported.

The Chairman welcomed Paul Hughes, the Medical Director to his first meeting of the Board, having taken up his position on 1st February 2014. The Board noted that the Medical Director would be responsible officer for the Trust's Medical revalidation and appraisal process taking over responsibility from Dr Phil Cantrell.

W&HHFT/TB/14/022 – Minutes of Meeting

- 3 The minutes of the meeting held on 29th January 2014 were approved.

W&HHFT/TB/14/023 – Action Plan

- 4 All actions contained in the action plan were either on the agenda, discharged or carried forward to a future meeting with exception of Action TB/14/005 & TB/14/013 which would be reported under the Chief Executive Report.

W&HHFT/TB/14/024 – Chairman's Verbal Update Report

- 3 The Chairman introduced John Duffield, the Trust's Chaplin who would like to say a few words concerning the Trust's chapel. The Chaplin provided a brief outline of concerns regarding the

Chapel at Warrington Hospital and outlined a proposal for a new Chapel that could be used to house all religious denominations.

- 4 The Chairman thanked the Chaplin for the update and advised that as with all requests for capital funding, the matter would need to go through the correct Trust processes. This would entail making an application to the Capital Group for funding. Clare Briegal felt that the matter could be something the Charitable Funds Committee could look at if any proposal was unsuccessful through the Trust's approval processes.
- 5 The Chairman congratulated Clare Briegal on her appointment as Chief Executive of the International Netball Federation and reported that having taken up this permanent position she had informed him that she would be unable to give as much time commitment to her work at the Trust. Consequently Clare Briegal had agreed to step down as a Non-Executive Director from 1 July 2014. The Chairman asked that it be put on record that Clare Briegal had been an effective and fully participating member of the Board bringing a wealth of experience, scrutiny and challenge to the Board and would be missed. As a consequence of this development he would be addressing, with the Governor Nominations and Remuneration Committee, proposals for Clare Briegal's replacement during March in readiness for a proposal to be put to the Council of Governors at their meeting on 27th March 2014 which a target date to have a replacement in post from 1 July 2014.
- 6 The Board noted the Chairman's Report.

W&HHFT/TB/14/025- Chief Executive Verbal Update Report

- 7 The Chief Executive provided a verbal report on the following matters:
- 8 **Finance:** The Chief Executive advised the Trust continued to be in negotiations with its Commissioners about what the Trust would receive in payments at the end of the current financial year. She advised that agreements which were acceptable to the Trust had been reached with Halton CCG and St Helens and Knowsley CCG. The Chief Executive advised that Warrington CCG had made a formal offer which was not acceptable to the Trust and would if the Trust accepted it, cause the deficit position to deteriorate further, in part due to the threat of the application of penalties which the Trust had previously been led to believe would be re-invested back into the services provided by the Trust. The Trust was strenuously arguing its case in the hope that Warrington CCG would progress to a position that was more acceptable to the Trust.
- 9 The Chief Executive advised that the basis of Warrington CCG's arguments was that they had a statutory duty to deliver a surplus and that seemed to be the grounds for their stance. She advised that what the CCG seem to forget was that the Trust also had a statutory duty as well and it was imperative from a local health economy perspective that one part of the local economy should not benefit at a cost to another.
- 10 The Chief Executive referred to the last Board meeting when the Board discussed the proposal to seek to hold a joint Board workshop with Warrington CCG in order to understand Commissioner intentions and advised that she felt this was the right thing to do in order that business plans could be triangulated to deliver the best possible service to patients.
- 11 With this in mind the Chief Executive advised that that following the January Board meeting she had emailed John Wicks, Warrington CCG Interim Chief Executive regarding holding a joint Board workshop and had also discussed the proposal with Andy Davies, Warrington CCG Chair. She advised that she had not received a response from John Wicks and that in

discussion with Andy Davies, he had agreed to raise the matter within the CCG however she had not received anything further from him. The Chief Executive advised that she would continue to pursue the holding of the workshop and hoped that Warrington CCG would become more receptive to the proposal.

12 **Better Care Fund:** The Chief Executive reported that draft proposals had been submitted for both Warrington and Halton stipulating the expenditure plans for 2014/15 and 2015/16 on this newly created fund. The Chief Executive reminded the Board that the Better Care Fund (Fund) was created by Government that transferred over £3billion of NHS funding into a pooled Fund, overseen by Health and Wellbeing Boards. The Chief Executive advised that both Warrington and Halton local authorities have chosen to combine the Fund with existing pooled health and social care budgets which would mean that in Warrington the total Fund in 2015/16 was £27.8m, of which £6m would be invested in primary care in the development of GP practices into eight hubs and in Halton £41.5m with £2.7m invested in urgent care systems.

13 The Chief Executive advised that although the Trust had been included in the discussions and formulation of ideas for the schemes, she did not feel that the Trust would benefit from the Fund even though one of the Trust's aims was to be a future provider of out of hospital care.

14 **National NHS Change Day:** The Chief Executive advised on the nationally led NHS Change Day which was anticipated to be the largest of its kind, with a shared purpose of improving health and care. The mission was to inspire and mobilise people everywhere, staff, patients and the public to do something better together to improve care for people.

15 The Chief Executive advised that the Trust would be participating in the event and would be asking staff to make a pledge that would make a difference, no matter how big or small. She explained that a pledge could be part of your everyday routine or something extraordinary so long as it was personal to the person making the pledge.

16 The Chief Executive advised that she had arranged for the Associate Director of Communications to join the meeting and take photographs of the Board and attending Governors making their pledge at the end of the meeting.

17 The Chief Executives verbal update report was noted.

W&HHFT/TB/14/026(i) Finance Report as at 31st January 2014

18 The Director of Finance and Commercial Development presented the Finance Report as at 31st January 2014 and the forecast for year ending 31st March 2014 and provided an overview of the financial position of the Trust.

19 The Director of Finance and Commercial Development reported that the financial performance in January had improved slightly due to an increase in activity income which resulted in a surplus for the month of £504k. Pay costs however, continued to be an area of concern. The Director of Finance and Commercial Development advised that the surplus reduced the cumulative deficit to £2,819k which was £3,607k worse than the planned surplus of £788k for the ten months to January. He felt that it was encouraging that activity levels and the associated income had increased and were higher than planned in month, however actions necessary to reduce the operating expenditure have not yielded the necessary cost reductions. The Director of Finance and Commercial Development advised that the Trust

continued to enforce robust and immediate actions in order to reduce the current level of spend and associated deficit however this had not achieved the required reductions. With regard to the Financial Risk Rating, the Director of Finance and Commercial Development reported that the Trust has a rating of 2 against a planned rating of 3 and a Continuity of Services rating of 2 against a planned rating of 3.

- 20 The Director of Finance and Commercial Development reported that pay costs continued to be higher than budget, with pay overspend driven by continued use of bank, agency and locum staff and the provision of overtime and the use of waiting list initiatives within clinical divisions.
- 21 The Director of Finance and Commercial Development advised that with regard to the income performance from across the CCGs; the forecast positions for Halton and St Helens CCGs had now been agreed, however the Warrington CCG outturn remains under negotiation. He explained that the Trust had assumed all charges would be honored by the CCGs in year, including full payment of both local and national Winter Pressures funding of £1.4m from Warrington CCG. However Warrington CCG's position remains the same as that presented in the report and therefore it was unreasonable and unaffordable to the Trust. The Director of Finance and Commercial Development advised that any settlement under the current offer would see an additional £2m pressure on the deficit of £2.9m agreed with Monitor.
- 22 Rory Adam was pleased to see improvement in activity in January however was concerned that the costs were going in the wrong direction given the controls being put in place. The Director of Finance and Commercial Development agreed that this was a real concern and recognised that the additional costs relating to bank, agency and locum costs had to be controlled.
- 23 Mike Lynch asked whether the Executive had a contingency plan should Warrington CCG not honour their side of the agreement. In response the Director of Finance and Commercial Development advised that the Trust would need to ensure that expenditure in the final five weeks of the year was contained to the barest minimum and would include no overspend. He advised that the Executive was discussing the Trust's ability to either speed up activity or slow it down. If it decided to slow down activity then costs could be reduced. Other areas would also need to be considered such as stopping any capital spend, and change the scope of work and accelerate the work EY were doing around procurement, with the implementation of even tighter controls on spending. The Director of Finance and Commercial Development advised that the Trust was only asking Warrington CCG to honour the amount they had committed to pay when the contact was negotiated. He felt that there were two options open to the Trust should the CCG be unwilling to pay and advised that the Trust may have to have informal discussions with the LAT to help broker an agreement or through some form of formal arbitration.
- 24 Lynne Lobleby referred to the Trust's financial risk rating and asked what was being done to protect the reputation of the Trust. The Director of Finance and Commercial Development advised that he was working with Monitor to address the financial issues faced by the Trust as reported at previous meetings and that following discussions, Monitor had removed the narrative governance rating and had re-instated a green governance rating on the Trust which was a positive sign. He explained that this was due to the Boards decisions to implement controls and measures as soon as it became apparent that the Trust would be having the financial difficulties it was now encountering. With regard to reputation the Director of Finance and Commercial Development advised that there was no significant impact on the quality of care the Trust provided to patients. Furthermore Monitor recognised that Trust continued to deliver against national targets. He did feel that a Monitor's view may have been different had there not been around 44% of FT's of similar size and nature in the same deficit position as

the Trust.

25 Carol Withenshaw referred to the Bank and agency costs which continued to rise even when controls had been put in place and asked what was being done to get the costs under control. The Chief Operating Officer advised that due to pressures reported in the Corporate Performance Report within A&E during January, there had been a requirement to escalate beds which had the consequential effect that bank and agency staff was required to staff the escalated areas. Furthermore with the increased in activity and therefore income there was the consequential costs associated with staffing for the increase activity. With regard to temporary medical staffing, the Chief Operating Officer reported that the Executive, at the bi-laterals, had challenged the Divisional Medical Directors to review locum requirements and seek to fill the vacancies with substantive appointments.

26 The Director of Nursing and Organisational Development advised that the introduction of the nurse pool from 1 April 2014 would help to reduce temporary staffing costs. She felt however that the biggest pressure would come from A&E in being able to retain within the nursing pool staff with specialist A&E nurses and referred to the temporary staffing report presented to the Board on January 2014.

27 Clare Briegal referencing the additional requirements for staffing the AED, wondered whether it would be good practice to review the success of the decisions reached by the Board when it approved the business case for the Acute Medical Unit (AMU). The Director of Finance and Commercial Development advised that a review of business cases would be undertaken and AMU would be amongst those being reviewed. He advised that he would report back to the Board on the outcomes of the reviews within the next financial year.

Action TB/14/026(i): The Director of Finance and Commercial Development to report back to the Board within the next financial year, the outcomes of the business case review.

28 Mike Lynch felt it was important that the Executive understood that the Non-Executive Directors fully supported the Executive in bringing an equitable settlement with Warrington CCG and advised that he and the Non Executives would be happy to support any initiative that was thought appropriate.

29 The Chairman closed discussion on the Finance Report and echoed Mike Lynch's comment and advised that it was imperative that the Trust procure an equitable solution to the financial position and felt that it was important that a joint Board workshop be held with Warrington CCG as soon as possible.

30 The Finance Report was noted by the Board.

W&HHFT/TB/14/026(ii) - Joint Procurement letter review, recommendations and responses

31 The Director of Finance and Commercial Development presented the Joint Procurement letter review, recommendations and responses paper. He advised that the paper was in response to a letter issued jointly by the Department of Health and Monitor in relation to the Government document *Better Procurement, Better Value, Better Care*, published in August 2013.

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33 The Director of Finance and Commercial Development reported that the document set out the procurement development programme for the NHS that focuses on standards within procurement to ensure that the NHS obtains maximum value for every pound spent.

34 The letter initially covers 5 areas: transparency; National Price Comparison System; avoidance of Inflationary Price Increases; nomination of a Non-Executive Director in relation to procurement; and NHS Terms and Conditions of Contract.

35 The Board considered the paper and noted the progress made already in procurement and the actions in place. The Chairman nominated Rory Adam as the Non-Executive Director that the National Procurement Team could connect, which was agreed.

The Chairman felt that it was appropriate that the Board recognise the hard work of the procurement team in delivering CIP above and beyond what had been asked of them.

W&HHFT/TB/14/027 - Service Line Reporting Q3

36 The Director of Finance and Commercial Development presented the Q3 Service Line Reporting (SLR) Report and advised that the divisions were now engaged, with clinicians, in understanding the how the services contributed to the Trust's bottom line. He further advised that SLR would help to support improvements in 2014/15 by helping clinicians to understand whether any addition work they undertook within their service would improve contribution or add additional costs.

37 The Director of Finance and Commercial Development advised that from next year SLA review would form part of the Finance and Sustainability Committee activity.

38 The Chairman referred to the Report and noted that there was two services that had a negative contribution and asked whether these services would provide a positive contribution should changes be made within the Service. In response the Director of Finance and Commercial Development advised that allocation of overheads across services may well impact on contribution and therefore push the service into a negative contribution position.

39 Rory Adam asked whether there was full buy-in from the clinicians and whether the level of divisional accountancy support was sufficient a push through change. In response the Director of Finance and Commercial Development advised that he believed this was the case, however he was concerned that the Trust needed to be careful that it did not overly stretch itself. The Chief Operating Officer advised that cultural leadership from clinicians was now being addressed through SLM and SLR in order to ensure buy-in. Paul Hughes advised that SLR was part of the Clinical Effectiveness agenda and that as part of the process, divisions and their services would be reviewed using SLR.

40 The Board noted the contents of the Report and supported developing SLR as a means for better understanding of the Trust financial position at divisional and business unit level and in providing a recognised tool to financially measure the implication of service changes.

W&HHFT/TB/14/028 - Progress Report from the Innovation and Cost Improvement Committee and minutes

41 The Chief Operating Officer presented the Progress Report from the Innovation and Cost Improvement Committee and minutes of the Committee meetings and highlighted the key issues surrounding the delivery of CIP for the remainder of the financial year.

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The Chief Operating Officer reported that the summary position for the full financial year would be £8.6m against a target of £11m and advised that the underperformance was due to schemes starting later than anticipated such as the 12 hour shift patterns. The Chief Operating Officer was confident that the amount of CIP delivery for the year would not fall and could increase but not more than £100k.

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The Board noted the Progress Report from the Innovation and Cost Improvement Committee and minutes.

W&HHFT/TB/14/029 – Corporate Performance Report

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The Chief Operating Officer presented the Corporate Performance Report and advised that based on the performance up to 31st January 2014, the Trust continued to have an Amber/Green Governance rating, highlighted in Appendix 1. The Chairman asked that the Chief Operating Officer report by exception.

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The Chief Operating Officer advised that January had proved to be a challenging month for AED performance with delays in complex discharges and transfers particularly into intermediate care causing flow delays which in turn had been responsible for increased breaches. This had resulted in the underperformance of 94.09%. He hoped that the Trust would recover the position in February and March.

46

The Chief Executive advised that Ambulance turnaround performance continued to be poor due to problems of recording, reported at previous meetings. He advised that it was important to note that the actual handover average for the Trust remains one of the lowest in the region at approximately 24 minutes which was something NWAS were very supportive of.

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Clare Briegal referred to the spinal referrals reported on page 15 and asked for an explanation of the graphs. The Chief Operating Officer reported that the Trust was one of only a few in the North West that provided a spinal service, consequently there was a potential to develop the service further. The higher number of “Other” referrals relate to the Trust opening the service to mid Cheshire.

48

Clare Briegal asked whether the paper could be reviewed so that a dashboard can be presented with an exception report similar to that produced for the Quality Report. The Board agreed with the proposal and that that future reporting under a Corporate Performance Dashboard would commence at the start of the next financial year.

Action TB/14/029: The Chief Operating Officer and Deputy Chief Executive to review the Corporate Performance Report and present to the Board, at the April 2014 Board meeting, a Corporate Performance Dashboard and Exception Report.

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The Board noted the Corporate Performance Report.

W&HHFT/TB/14/030 – Update on the EY sustainability project

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The Director of Finance and Commercial Development provided a verbal update on the work undertaken by EY to support the Trust in the delivery of the 2014/15 CIP. He advised that EY were completing a deep dive assessing CIP identified for delivery in 2014/15 so that the Trust can be ready to deliver on CIP from 1st April 2014.

- 51 The Director of Finance and Commercial Development advised that the Executive was measuring output from the project every two weeks and reported that there were currently 123 uncosted schemes that required costing which was a positive position to be in.
- 52 Lynne Lobley referred to the work being undertaken and the amount of data that would need to be processed and asked whether EY would continue to support the Trust following the review. In response the Director of Finance and Commercial Development reported that part of EY roll would be to help with implementation and support divisional teams to focus on areas of opportunity. He felt that this support would help the divisional teams to take ownership and delivery of the schemes. However the contract would come to an end at the end of April 2014.
- 53 The Director of Finance and Commercial Development advised that as part of the process the PMO would be restructured and an Executive Director would be responsible to support divisions.
- 54 The Chairman asked that the Non-Executive Directors be appraised on developments on an ongoing basis so that they can be assured that the Trust had a robust CIP for 2014/15. The Director of Finance and Commercial Development reported that the Finance and Sustainability Committee would be appraised of developments and that two Non-Executive Directors were members of that Committee.
- 55 The Chairman thanked the Director of Finance and Commercial Development for the verbal update which was noted by the Board.

W&HHFT/TB/14/031 - Patient Story

- 56 The Director of Nursing and Organisational Development provided an update on the actions identified in the Patient Story presentation presented to the Board at its meeting on 29th January 2014. She reminded the Board that the complaint was partially upheld and the Chief Executive had offered her apologies on behalf of the services involved. Since then, the Director of Nursing and Organisation Development reported, the patient story had been sent to the Outpatients Access Manager and TIA Consultant to be shared in appropriate forums. The Director of Nursing and Organisational Development reported that the story had also been shared at the Patient Experience Group and would be shared with the Governor's Quality in Care Committee.
- 57 The Director of Nursing and Organisational Development advised that the positive feedback reported in the story had been passed to spinal consultant/doctors and the team on A9, and that the complaint data had been added to the consultant's PDR for reflection and learning.
- 58 Lynne Lobley thanked the Director of Nursing and Organisational Development for the update which was very useful to understand how the learnings from the story had been disseminated to the staff in the areas highlighted in the story.
- 59 The Board noted the actions undertaken arising from the Patient Story received at the January 2014 Board meeting.

W&HHFT/TB/14/0032 - Quality Dashboard

- 60 The Director of Nursing and Organisational Development presented the monthly Quality Dashboard and advised that the report contained exception reports: Mortality ratios; C difficile; Mixed sex occurrences; and Regulation 28. She advised further advised that the exceptions

for VTE, Dementia and Discharge Summaries relate to the early extraction of data (18th February 2014) and reminded the Board that they were provisional until final submission to UNIFY on the 28th February 2014. The Director of Nursing and Organisational Development advised that indications was that the UNIFY submission for VTE, Dementia and Discharge Summaries would be compliant.

- 61 Lynne Lobley referred to the recent news reports regarding Dr Fosters views on improving mortality rates in the NHS and the development of 24/7 working which would help support improvements and felt that it was helpful that the Trust was already looking at how it can implement 24/7. She felt that it was important that the Trust needed to follow this through to implement of 24/7 working as soon as it was viably possible. The Director of Nursing and Organisational Development agreed with Lynne Lobley's comments, noting that 24/7 was also something the Commissioners were also advocating and advised that the Strategic People Committee was engaged in understanding the developments of 24/7 working.
- 62 Mike Lynch referred to the Advancing Quality Pneumonia indicators and was pleased to see that the Trust was now compliant. He felt that it was important the Board recognise that the indicators represent a very good guide of patient experience and outcomes. He did note that the Trust continued to struggle against Stroke; however there were signs of improvement. The Director of Nursing and Organisational Development advised that Warrington CCG required the Trust to undertake remedial actions for Stroke which would seek to improve performance.
- 63 The Chairman asked that the Board consider the recommendations contained in the Report.
- 64 The Board:
- i. Noted progress and compliance against key performance indicators in the Improving Quality Strategy;
 - ii. Approved the actions planned to mitigate areas of exception; and
 - iii. Noted the inclusion of Regulation 28 Prevention of Future Deaths Report.

W&HHFT/TB/14/033 – Concerns & Complaints 2013/14 – Update

- 65 The Director of Nursing and Organisational Development gave a presentation which sought to provide the Board with an understanding of how the Trust uses the information it receives from patients about their experience, to improve services and the way in which staff deliver the services. She explained that the emphasis on listening to patients complaints had been highlighted by Robert Francis QC during the Mid Staffs investigation and it was important that the Trust took data from complaints seriously.
- 66 The Director of Nursing and Organisational Development ran through the presentation referring the Board to the way the Trust addresses complaints and highlights key learning from them and making sure they were given high enough priority across the Trust.
- 67 The Director of Nursing and Organisational Development explained how the Patient Experience Team supported the clinical and managerial staff in ensuring that complaints were handled effectively and learning was meaningful and robust. She advised that support would come from the provision of training in complaints investigations and reporting; better reporting of themes and trends; and better resourced Patient Experience Team and consequently the divisions would have ownership and greater control over complaints handling.

- 68 In response to questions posed by Mike Lynch, the Director of Nursing and Organisational Development advised that the Patient Experience Group would be documenting learnings from complaints over time and identifying and analysing data to identify trends that could be addressed to identify improvements across the services within the Trust, all of which would be audited.
- 69 The Director of Finance and Commercial Development, referring to testing performance felt that there needed to be a triangulation between the Concerns and Complaints Policy, the Governance Report and additional trend analysis. The Director of Nursing and Organisational Development agreed that this would be completed and that she would be producing a quarterly Concerns and Complaints Report for the Board.

Action TB/14/033: The Director of Nursing and Organisational Development to provide the Board with Quarterly Concerns and Complaints Report to coincide with the Governance Dashboard Report (see TB/14/34)

- 70 The Concerns and Complaints update was noted by the Board.
- 71 The Chief Executive advised that she had asked the Deputy Director of Nursing [Alison Lynch] to look at the front of house at the Warrington site and focus on patient customer care. She advised that she had asked her to look closely at the design of the entrance area which she hoped would include a more vibrant reception area and improved experience when entering the hospital. The Chief Executive advised that she hoped that once a design had been agreed and costed that a proposal to support the financing of the renovation work would be presented to the Charitable Funds Committee for consideration. Clare Briegal advised that the Charitable Funds Committee was currently reviewing how it can combine funds into one general fund that would allow for larger projects to be financed. She did feel that if a proposal was to come before the Committee it would need to be sure it fit the appropriate charitable criteria for investment.

W&HHFT/TB/14/034 – Governance Report Q3.

- 72 The Director of Nursing and Organisational Development presented the Q3 Governance Report for noting which had been presented and reviewed by the Safety and Risk Sub Committee and the Clinical Governance, Audit and Quality Sub Committee. She advised that the Report had been slimmed down, however it was still a weighty document and work was underway to develop a dashboard that would provide the reader with a one page overview. The Director of Nursing and Organisational Development advised that she hoped to have the dashboard in place by the April Board to coincide with the Quarterly Concerns and Complaints Report.
- 73 Clare Briegal referred to the complaints section in the report and was pleased to see a reduction in complaints communication problems referred to on page 11 of the report which she felt was a good sign. The Board noted that the report had also been received for information by the Audit Committee as part of its review of losses and compensation payments.
- 74 The Chairman asked that the report be presented to the Governor Quality in Care Committee as it contained relevant information that they would receive assurance. The Board noted the Q3 Governance Report.

Action TB/14/034: The Director of Nursing and Organisational Development to present to the April 2014 Board meeting a Governance Dashboard Report (see TB/14/33)

W&HHFT/TB/14/035 - Workforce and Educational Development Key Performance Indicators

- 75 The Director of Nursing and Organisational Development presented the Workforce and Educational Development Key Performance Indicators Report. She advised that the Executive had challenged the divisions at the bi-laterals to address the mandatory training and PDR rates recognising the importance the Board placed on delivery of these indices.
- 76 The Director of Nursing and Organisational Development advised that the Trust had received the results of the staff survey and reported that there had been a positive shift in performance. She advised that a presentation would be given to the Board at either a workshop or future Board meeting.

Action TB/14/035: The Director of Nursing and Organisational Development to present to a future workshop or Board meeting the findings of the Staff Survey 2013.

- 77 The Director of Nursing and Organisational Development referred the Board to the increase in temporary staffing expenditure over the period of the report, noting that this had been discussed earlier in the meeting.
- 78 The Board noted the Workforce Performance Indicators Report.

W&HHFT/TB/14/037 – Board Committee Report

- 79 **i. Audit Committee.**
Rory Adam, Chair of the Audit Committee reported on the Audit Committee meeting held on 3rd February and advised that the Committee had received a progress report from MIAA on the internal audit reviews undertaken during the last quarter of 2013. The Committee also received an update on the production of the Annual Report and Accounts 2013/14 which would need to be submitted to Monitor by 31 May 2014 and laid before parliament in June 2014.
- 80 Rory Adam advised that at the next meeting, to be held at the end of April, the Committee would be asking an Executive Director to attend the meeting to provide the Committee with an explanation of the disclosures in the Board Assurance Framework so that the Committee can be assured, on behalf of the Board, that the disclosures identified the key risks facing the Trust.
- 81 **ii. Charitable Funds Committee**
Clare Briegal, Chair of the Charitable Funds Committee reported on the activity of the Charitable Fund meeting held on 3rd February 2014 and in particular the discussion around funding the Mortuary renovation work. She advised that the Charitable Fund could not afford to fund the overall proposal however had agreed to fund the internal renovations out of the General Fund.
- 82 With regard to the number of funds, Clare Briegal advised that the Committee intended to reduce the number of individual funds by transferring those that could be transferred into a General Fund, therefore giving greater opportunity to fund larger projects.

83 **iii. Strategic People Committee**

Lynne Lobley, Chair of the Strategic People Committee reported on the activity of the Strategic People Committee held on 10th February 2014. She advised that the Committee had received a presentation from A&E regarding the use of agency staffing and a report on medical staffing, both of which provided a level of assurance to the Committee.

84 With regard to policies, Lynne Lobley advised that the Committee had approved a number of policies at the meeting including the whistleblowing policy.

iv. Finance and Sustainability Committee

85 Carol Withenshaw, Chair of the Finance and Sustainability Committee (FSC) reported on the activity of the first meeting of the FSC which was a scene setting meeting for future meetings of the Committee. She advised that the next meeting would receive a presentation on the Trust 2014/15 budget in readiness for Board approval of the Annual Plan at the March Board meeting.

86 Carol Withenshaw referred the Board to the paper which set out the proposed changes to the Terms of Reference of the FSC and sought approval of the Board. The Board reviewed the amendments to the Terms of Reference were approved.

87 The Board noted the activity of the Board Committee.

W&HHFT/TB/14/038 – Any Other Business

88 None

**Next Meeting:
26th March 2014**