



**W&HHFT/TB/B/15/190**

**Warrington and Halton Hospitals NHS Foundation Trust  
Board of Directors  
Final Minutes of the Board of Directors  
held on Wednesday 2<sup>nd</sup> October 2015  
Lecture Theatre Halton Hospital**

**Present:**

Lynne Lobley	Non-Executive Director & Deputy Chair
Mel Pickup	Chief Executive
Karen Dawber	Director of Nursing and Governance
Tim Barlow	Director of Finance and Commercial Development
Roger Wilson	Director of Human Resources and Organisational Development
Simon Constable	Medical Director
Jason DaCosta	Director of IT
Mark Brearley	Interim Director of Transformation
Jan Ross	Deputy Chief Operating Officer
Terry Atherton	Non-Executive Director
Mike Lynch	Non-Executive Director
Ian Jones	Non-Executive Director
Anita Wainwright	Non-Executive Director

**In Attendance:**

Colin Reid	Trust Secretary
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**Apologies**

Steve McGuirk	Chairman
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**W&HHFT/TB/15/169 – Apologies & Declaration of Interest**

- 1 The Deputy Chair opened the meeting and welcomed those attending the meeting and those governors attending as observers.
- 2 Apologies: The Deputy Chair advised that the Chairman was unavailable for the meeting due to a prior engagement.
- 3 Declarations of Interest: None

**W&HHFT/TB/15/170 – Safeguarding Annual Report 2014/15 Presentation– Adult and Children’s**

- 4 The Director of Nursing and Governance introduced Nikki Richardson, Named Nurse/Midwife Safeguarding Children and Lorrain Smith, interim Matron for Safeguarding Adults who would be providing a joint presentation on the work of the safeguarding teams for the last financial year. She explained that the presentations would also form part of the Board training requirements for safeguarding.
- 5 Nikki Richardson, Named Nurse/Midwife Safeguarding Children and Lorrain Smith and interim Matron for Safeguarding Adults provided their presentations outlining the work of the safeguarding teams,



the issues and challenges faced over the period and the plans in place for 2015/16. The presentations also provided the Board with case studies that the safeguarding teams encountered during the year.

- 6 Mike Lynch referring to the adult safeguarding case study asked whether there was capacity and capability of delivering safeguarding requirements in a sustainable way. The interim Matron for Safeguarding Adults responded that the Trust was looking to redesign the team to be leaner and specialised providing support and training to the front line staff. The Director of Nursing and Governance advised that the agenda surrounding children and adult safeguarding was spiralling and there was a need to look at what was available in the services. However, with regard to the case study in question, she advised that the teams came together to provide the best possible outcome for the patient. The Chief Executive asked, with regard to the case study, why the Trust did not provide a case plan before having to go through the court of appeal. In response the interim Matron for Safeguarding Adults advised that the learning and need of the case plan would not have come out without going through the Court of protection, furthermore the Trust had learned a lot of what was required and would be better prepared in the future.
- 7 Terry Atherton referring to appendix 2 in the Adult Report, did not refer to links with Halton CCG and asked whether there were links in place, the interim Matron for Safeguarding Adults advised that there were links already in place and had been strengthened following the Trusts previous Matron for Safeguarding Adults, joining them this month.
- 8 With regard to the presentation from the Named Nurse/Midwife Safeguarding Children, Mike Lynch asked about the capacity and capability to deliver the service noting the increasing levels of domestic abuse. The Named Nurse/Midwife Safeguarding Children advised that the Trust was coming up to a tipping point when extra support would need to be found and that she was anxious about how it would be managed. She advised that she was also leaving the Trust on retirement and that she felt pressures on the service would increase. The Director of Nursing and Governance advised that she was reviewing the safeguarding service to make sure that there was no gaps in provision. In response to a question from Terry Atherton regarding training at appendix 5, the Director of HR&OD advised that there continued to be challenges and the executive needed to reflect on a recovery plan for training throughout the Trust.
- 9 The Deputy Chair thanked the Named Nurse/Midwife Safeguarding Children and the interim Matron for Safeguarding Adults for their presentations and wished the Named Nurse/Midwife Safeguarding Children a happy retirement. The Deputy Chair also passed on her thanks and that of the Board to Dianne Goncalves, Designated Safeguarding Manager.
- 10 The Board approved the Safeguarding Annual Reports 2014/1b for venerable Adults and Children.

#### **W&HHFT/TB/15/171 - Minutes of Meeting**

- 11 The minutes of the meeting held on the 29<sup>th</sup> July 2015 were approved.

#### **W&HHFT/TB/15/172 - Action Plan**

- 12 With regard to action TB/15/148: The Director of Nursing and Governance advised that she had liaised with the Communications Team and had obtained permission from the patients to allow the Trust to show the video on the website and allow it to be circulated outside of the Trust.

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The Trust Secretary advised that with regard to action TB/15/164, he was working on a Board development timetable and that the Communications Strategy would be included in the timetable.

#### W&HHFT/TB/15/173 - Chair Report

- 14 The Deputy Chair referred to the **Annual Members Meeting** held on 16<sup>th</sup> September and asked David Ellis, Public Governor attending the meeting as observer if he could say a few words on his thoughts regarding the meeting. David Ellis advised that he felt the evening went reasonably well given the format change and allowed for some direct engagement with members. He advised that there were some things that could have been done better and that the meeting and content would be discussed at the next Governor Communications and Membership Committee meeting.
- 15 The Deputy Chair thanked David Ellis for his comments.

#### W&HHFT/TB/15/174 - Chief Executive Report

- 16 The Chief Executive provided a verbal update and reported on the following:
- 17 **Health Service Journal Awards:** The Chief Executive reported the Trust's acute care team and the 'hello my name is...would you like a drink?' project had been shortlisted for the Health Service Journal Awards 2015. She explained that it was the first time that the Trust had had two teams shortlisted in the awards that celebrate the best initiatives benefitting patients in the NHS.
- 18 The Chief Executive advised that the acute care team had been shortlisted in the acute (hospital) sector innovation category for the work done in redesigning the way that the Trust monitor patients and respond to any patient whose condition deteriorates on the wards and includes new systems of summoning emergency response from doctors, redesigning out of hours and weekend support and reviewing patients. She explained that evidence had shown that the redesigns had led to falls in the number of patients having cardiac arrests and in overall mortality.
- 19 The Chief Executive reminded the Board of the presentation it received on the 'hello my name is...would you like a drink?' campaign which was initiated by Janet Green, nurse practitioner. She explained that the campaign was designed to ensure that patients were constantly hydrated by encouraging staff to always ask patients if they needed water and ensuring that it is in easy reach for them. The campaign is shortlisted in the compassionate patient care category.
- 20 **Monitor Enforcement Undertaking:** The Chief Executive reported on the Monitor Enforcement Undertaking and advised that the Board had submitted to Monitor on 25<sup>th</sup> September 2015 the initial part of the undertaking that required a turnaround plan, CIP delivery and proposals concerning the Trust's capacity and capability to delivery it. The Chief Executive advised that the Chairman, Director of Finance and Commercial Development, Medical Director and herself would be meeting with Monitor on 7<sup>th</sup> October to discuss the submission and what was needed for submission of a detailed plan for 2016/17.
- 21 **Vanguard:** The Chief Executive reported on the DH vanguard initiatives that had been rolled out across the NHS to support innovation and new ways of working as part of Steven's 5 year forward review. She advised that there had been a number of different tranches that could be applied for and that the Trust had previously applied for two: Community provider; and urgent care vanguards, both of which had been unsuccessful.



- 22 The Chief Executive advised that the Trust had applied for the latest tranche with Alder Hey to provide better ways of working in collaboration for paediatrics. She further advised that the Trust was involved in a second vanguard application led by Liverpool Women's to review the way maternity services could be provided more effectively and efficiently across the Mersey footprint.
- 23 **Movements in senior staff:** The Chief Executive advised that following the resignation of Simon Wright, Chief Operating Officer the Trust had appointed Sharon Gilligan. Sharon was to join the Trust on 1<sup>st</sup> December 2015 and that Jan Ross would be acting up in the post until then.
- 24 The Chief Executive advised that the Trust had appointed Lucy Gardner as the Director of Transformation from 1<sup>st</sup> February 2016. The appointment of Lucy would be under a secondment arrangement with Ernst Young and would be for an initial period 12 months.
- 25 **Letter from Ed Smith, Chair of the steering group for the national implementation programme for improvement and leadership development:** The Chief Executive asked that the Board note the content of the letter provided within the Board papers.
- 26 The Deputy Chair thanked the Chief Executive for her verbal update which was noted.

#### W&HHFT/TB/15/175 – Verbal Report from the Chair of the Finance & Sustainability Committee (FSC)

- 27 Terry Atherton, Chair of the FSC provided a verbal report on the activity of the Committee. He reported that the Committee met on 22 September 2015 and had received papers set out in the work plan. With regard to the work plan he advised that it would need to be amended to take account of the enforcement undertaking, recognising that the Board would require assurances on the financial and sustainable parts of the delivery of the enforcement notice.
- 28 Terry Atherton advised that there was a tranche of key issues arising from the meeting and reported that with regard to the Trust's financial position, August had showed a slight improvement in the outturn forecast. There continued to be negative variances in income and costs, citing that non-elective income was significantly below plan and that pay costs continued to be higher than plan, although there was some exceptions relating to Lorenzo and the urgent care centre which reduced pay costs to plan. Terry Atherton advised that the FSC had also received a paper on the new guidance from Monitor regarding nurse agency staffing levels and following review the Committee felt it appropriate that the Board received a paper setting out the assurance arrangements in place to deliver the requirements of guidance.
- 29 Terry Atherton advised that the CIP Assurance Report, showed that CIP delivery was weighted to the back end of 2015/16. He advised that this was a potential problem as there would be no time to consider other measures, should the Trust be unable to deliver the planned savings.
- 30 Terry Atherton advised that there was still a strain on whether the Trust would be able to deliver the A&E 4hr target this quarter although there had been a slight improvement in in-month performance. He reported that there was a real need to agree with Warrington CCG that they continue to fund the Star Unit as the benefit of the unit was quantifiable. He felt that having the Star unit would be imperative in order to deal with the winter pressures.
- 31 As part of the FSC's remit, Terry Atherton advised that the Committee had received assurances from the Board Overview Group on the delivery of the Lorenzo implementation programme. The Chief



Executive advised that the Board would receive a presentation on delivery of Lorenzo before the end of October so that they could be assured that Lorenzo would be implemented to time.

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The Deputy Chair thanked Terry Atherton for the update which was noted.

#### **W&HHFT/TB/15/176 – Finance Report – 31 August 2015**

33 The Director of Finance & Commercial Development presented the Finance Report for the period to 31 August 2015.

34 The Director of Finance and Commercial Development advised on the progress made in the mediation process for the settlement of the 2014/15 contact with Warrington CCG. He advised that a settlement had been reached however a settlement agreement had not been signed.

35 Referring back to the Financial Report the Director of Finance and Commercial Development advised that the Trust performance was £355k better than plan, however for the period ending 31st August the Trust had recorded a deficit of £8,518k, which was £755k worse than the planned deficit of £7,764k. With regard to Capital, the Director of Finance and Commercial Development advised that there had been an overspend year to date however by the year end it would be in line with plan.

36 The Director of Finance and Commercial Development reported on the change in the financial risk rating reported to Monitor under the Risk Assessment Framework and consequently the trust was now reporting a Financial Sustainability Risk Rating of 2 against the old CoS rating of 1.

37 The Deputy Chair noted the work of the FSC with regards to the challenges around the Financial position of the Trust and the additional Board meeting held on the 22 September 2015 at which there was discussion regarding the delivery of a turnaround plan and CIP and thanked the Director of Finance and Commercial Development for his report and that of the Chair of the FSC.

38 The Board noted the current status of the financial position of the Trust.

#### **W&HHFT/TB/15/177 – Corporate Performance Report – 31<sup>st</sup> August 2015**

39 The acting Chief Operating Officer presented the Corporate Performance Report and referred the Board to the performance matrix which showed the Trust was performing well against most national and local targets with the exception of A&E which had improved but was still below the 95% national target.

40 The acting Chief Operating Officer advised that A&E continued to be a concern and advised that early indications were that the Trust would not deliver the 95% for quarter 2 but would be in the region of 94% once the urgent care centre performance was consolidated into the A&E performance figures.

41 Mike Lynch asked whether there had been any learning following a review of the breaches. The acting Chief Operating Officer advised that she was looking at this data and each breach to identify any proactive changes that could be made. She further advised that other actions were being taken to address working practices and advised that there was a need to address consultant rota's and making sure staff were being used at the right time to provide an efficient and effective service. The Medical Director supported the comments of the acting Chief Operating Officer and advised that there was significant work being undertaken to look at working practices in A&E to identify evidence based findings so that effective changes can be made.



42 The Director of Nursing and Governance referred to Appendix 1 of the report which identified, from July, that the Trust was red rated. She understood that the change from green to red was as a result of the publication of the CQC investigation Report, however given that the Trust had undertaken all necessary actions arising from the report She wondered whether the Trust was being too harsh on itself and that the rating should be amber. The Director of Nursing and Governance advised that she would check the position.

43 In response to Terry Atherton's comments earlier in the meeting regarding the Star Unit, the acting Chief Operating Officer reported that Warrington CCG funding of the Star Unit would continue until the end of October 2015 after which there had not been any additional commitment from Warrington CCG to fund it over the winter months. She advised that discussions were ongoing as all parties recognise the benefits of the Star Unit in improving patient flow.

44 In response to concerns raised by Mike Lynch, the Medical Director reported that there were areas within the gift of the Trust from a cultural and system point of view in making improvements in AED. He advised that the Trust needed to address the problems of consultant vacancies and locum which was not an ideal position. The Medical Director advised that all avenues were being perused to try and fill gaps. He further advised that as part of the winter planning process, there have been some very positive meetings with Warrington CCG.

45 The Deputy Chair thanked the acting Chief Operating Officer for her report which was noted.

#### **W&HHFT/TB/15/178 – Verbal Report from the Chair of the Quality Committee (QC)**

46 Mike Lynch, Chair of the Quality Committee reported on the activity of the Committee since his last report to the Board. He advised that there was a desire within the QC to strengthen Board assurance within the terms of its responsibilities and with that in mind there continued to be challenge and scrutiny of the activity of the QC reporting committees and groups. He advised that a QC workshop was held to support its assurance requirements, the output of which was being considered.

47 The Deputy Chair thanked Mike Lynch for his verbal update which was noted.

#### **W&HHFT/TB/15/179 – Quality Dashboard – 31 August 2015**

48 The Director of Nursing and Governance presented the Quality Dashboard and reported by exception. She advised that going forward; taking into consideration the output of the QC workshop the dashboard would see some additional changes.

49 The Director of Nursing and Governance highlighted the key areas of concern, in particular she reported that an additional MRSA colonisation had occurred in August. The matter was being investigated to identify whether there was a correlation with the previous case in the same Ward. The Director of Nursing and Governance ran through the remaining exception reports highlight the key actions taking place to address noncompliance.

50 With regard to Cdiff, the Medical Director referred to the removal of 8 cases that had previously been reported as hospital acquired cases following review by the Review Panels decision. He advised that the decision to uphold the appeal was due to the work the infection control team had done in around the RCAs which clearly showed that there was no lapse of patient care at the Trust.



51 The Board noted the recommendation contained in the report and:

- 52 1. approved the revised template, with regard to format and content;
2. noted that the data for a number of indicators can change month on month. This applies to incidents (including pressure ulcers and falls), as incident type and severity can alter once reviewed, complaints and concerns as complaints can become concerns (and vice versa), with the agreement of complainants, and to mortality data which is rebased;
3. noted progress and compliance against the key performance indicators; and
4. noted the actions planned to mitigate areas of exception

#### **W&HHFT/TB/15/180 - Mortality Report Q1**

53 The Medical Director presented the Quarter 1 Morality Report and advised that as he reported going forward he hoped to see an improving position. He advised that SHMI remained an outlier, however both HSMR and crude mortality were not. Ian Jones referred to the spike in crude mortality rate in June and asked whether there was any indication as to why this had occurred. The Medical Director advised that he was looking into this and would provide an update under the Q2 report which he would bring to the Board in November.

54 Mike Lynch referred to the R code rate and recognised its impact on SHMI, however it also told the Trust something about working practices. The Medical Director agreed with the comment and advised that part of the problem continued to be how deaths were coded and changes would need to be made in the use of R codes such that improvements would be made.

55 The Deputy Chair thanked the Medical Director for his report which was noted.

#### **W&HHFT/TB/15/181 - Director of Infection Prevention and Control (DIPC)– Annual Report 2014/15**

56 The Director of Nursing and Governance presented the Director of Infection Prevention and Control – Annual Report 2014/15 and explained that although the Medical Director was now the DIPC, she was DIPC during the period of the Report. She advised the Board that the Report was a consolidation of the quarterly reports received during the year with additional prescribed information included.

57 The Deputy Chair referring to isolation wards asked whether the Trust continued to struggle to provide these. The Director of Nursing and Governance advised that due to the nature of the Trust's estate the Trust did struggle to provide isolation wards and has had to use side wards or refit offices so that they could be used for that purpose. The acting Chief Operating Officer advised that this had also been discussed with stakeholders around patients being treated at home in an environment that can isolate any threats, referring in particular to care homes where patients have their own room and could be better treated in isolation therefore reducing the spread of infection in a hospital environment.

58 Mike Lynch asked that the Board recognise the work of the Infection Prevention and Control team. The Board noted the Director of Infection Prevention and Control – Annual Report 2014/15 and thanked the Infection Prevention and Control team for all their hard work and support to the divisions.

#### **W&HHFT/TB/15/182 - Verbal Report from the Chair of the Strategic People Committee (SPC)**

59 Anita Wainwright, Chair of the Strategic People Committee reported on the activity of the SPC. She advised that the last meeting took place on the 10<sup>th</sup> August with the next meeting due to take place on 12 October.



60 Anita Wainwright advised that the Committee opened up with a staff story from an apprentice trainee which opened up some good discussion and debate on the Trust's approach to apprentice training. She further advised that as previously reported there continued to be good discussion around the direction of travel of the Committee in terms of its responsibility to provide assurance to the Board. The Director of HR&OD advised that the Committee was refining what its role was and how it obtained assurance through its reporting sub committees and groups. He explained that one area that was being considered was to place an operational committee between the SPC and the SPC's current subcommittees. This would allow for all operational matters to flow through that Committee rather than directly into the SPC, which would leave the SPC to undertake a more strategic direction of travel.

61 The Deputy Chair thanked Anita Wainwright and the Director of HR&OD for the verbal update which was noted.

### W&HHFT/TB/15/183 – Workforce and Educational Development key Performance

62 The Director of Human Resources and Organisational Development presented the Workforce and Educational Development Key Performance report. He advised that the report had been revised to give greater clarity on performance and provides under section 4, the status to a page of the workforce KPIs.

63 With regard to compliance, the Director of HR&OD advised that as at 31 August 2015, 78% of staff had or had a plan to have their PDR completed in 15/16 and only 4% of staff definitely do not have a plan to have their PDR completed in 15/16. He explained that were a plan had not been submitted, the manager had been advised that this was not acceptable behaviour and that the executive expected compliance and that performance management action would be implemented if this continued. The Board considered and supported this stance and recognised the need for the SPC to do a deep dive to identify the real cause of non-compliance. The Director of HR&OD advised that in support of the dashboard and compliance all managers have been made aware of the timetables to provide information to the SPC and Board so there should be no excuses that they were not aware of requirements.

64 Referring to the Report the Director of HR&OD reminded the Board that where staff have periods of sickness absence there was a requirement for the manager to undertake a return to work interview. He advised that although these were taking place there was a need to improve and record better the detail behind the absenteeism in order to address trends and correlations in order to make improvements. The Director of HR&OD felt that sickness absence would be more visible if the interviews were undertaken appropriately and were more stringent. The Chief Executive noted the requirements for interviews and recognised that stress was also a factor in sickness rates and asked whether the interviews took stress into account. The Director of HR&OD advised that improvements would be required to capture the reasons for absenteeism so that lessons could be learned and improvements made. It was therefore important that the information collected from the interviews provided good information that could be analysed around all forms of absenteeism including stress.

65 With regard to average recruitment times the Chief Executive noted that the Trust was attracting slightly more new starters than it had people leaving and that the average recruitment time was reducing, which she saw as a positive. However she did feel that with regard to recruitment there were cases when blockages exist in the system that needed to be unblocked so that recruitment was seen as seamless. The Director of HR&OD recognised what was said and advised that measures were in place to identify blockages so that they could be removed.



- 66 The Deputy Chair thanked the Director of HR&OD and welcomed the new dashboard for reporting workforce KPIs. The Board noted the contents of the report and proposed next steps.

**W&HHFT/TB/15/184 – Monthly Ward Staffing Report & W&HHFT/TB/15/185 - Monitor Guidance to Boards on Nurse Agency Staffing Levels and Trust response.**

- 67 The Director of Nursing and Governance presented the Monthly Ward Staffing Report and advised on the key areas within the monthly staffing report. She advised that the information demonstrates the staffing information per ward and details planned staffing versus actual, stating which shifts have not met their staffing ratio and reasons. Where staffing compliance was not at 100%, the paper also details the reasons why and the action taken to address the shortfall. The Director of Nursing and Governance advised that on a daily basis professional judgement was used to ensure that the wards had the appropriate staff and skill mix in place to ensure that safe quality care was delivered to patients and their families. The Director of Nursing and Governance reported on the activity and drive to recruit permanent nursing staff and explained that in the new year a team would be going to Romania on a recruitment drive for up to 20 qualified nurses.
- 68 The Director of Nursing and Governance advised that the Trust continued to work with NHS Professionals (NHSP) to address current gaps in pay and discussions were ongoing with NHSP and Clare Pratt, interim Deputy Director of Nursing and the Director of HR&OD. Anita Wainwright asked whether the Trust's own staff would do additional shifts. The Director of Nursing and Governance advised that some staff were reluctant due to delays in receipt of pay for the additional shifts as payment would be provided through the current monthly payment system and that the level of pay which may be less than their normal rate of pay. The Director of Nursing and Governance reported that this would be explored as it would be more beneficial to use the Trust's own staff who were aware of the Trust's policies and processes. Anita Wainwright asked whether such a move could also work with a consultants/Dr's bank. In response the Medical Director felt that it may help juniors. The Director of Finance and Commercial Development noted the benefits of using the Trust's own staff however warned of potential pitfalls of setting precedents. He felt that the Trust needed to be clear what the pitfalls were before deciding on a plan of action. The Director of HR&OD advised that he was looking into how the Trust could address the discrepancies in payment when using the Trust's staff and also whether there was something that could be done in speeding up payments for the additional shifts worked. He advised that this would probably mean that the Trust would look at setting up its own nursing bank. Mike Lynch asked how the Board would get to understand the risks of all the proposals. The Director of HR&OD advised that the proposal and risks would be reported through the SPC to provide assurance to the Board. The Chief Executive asked that rather than have a bank, the Trust utilised a pool system and asked whether this had been considered. The Director of HR&OD advised that this had previously been seen as financially prohibitive in the past however he was looking again at whether this was now the case.
- 69 The Director of HR&OD summed up what actions the he was taking that would go through the SPC and would be reported up from the SPC to the Board any recommendations.
- 70 The Board noted the content of the Monitor Guidance to Boards on Nurse Agency Staffing Levels and the assurances given regarding; Monitor's rules regarding agency usage; Monitors request that boards are made aware of a number of safeguards in place; the increased amount of concerns raised regarding nurse staffing levels and the action taken/ being taken by the Director of Nursing to address.



- 71 The Board noted the contents of the Monthly Staffing report and approve the staffing exception report.

#### **W&HHFT/TB/15/186 - Verbal Report from the Chair of the Charitable Funds Committee (CFC)**

- 72 The Deputy Chair, Chair of the Strategic People Committee reported on the activity of the CFC and reported that the Charity now had a fundraiser who had been appointed on a fixed term 12 month contract. The Charity was seeking to raise its profile and the fundraiser had started to undertake this need. The Deputy Chair reported that there had been some work on the Governance requirements of the charity surrounding approval of bids and the need to increase the amount of donations particularly from the corporate sector.

#### **W&HHFT/TB/15/187 - Other Board Committee Reports**

- 73 Having received verbal update from the Chairs of each of the Committees, the Board noted the following:
- a) Finance and Sustainability Committee held on 20 August 2015
  - b) Quality Committee on 7<sup>th</sup> July 2015

#### **W&HHFT/TB/15/188 - Any Other Business**

- 74 There was no further business for discussion the Chairman closed the meeting.

**Next Meeting: Wednesday 28<sup>th</sup> October 2015.**