

**Warrington and Halton Hospital NHS Foundation Trust
Board of Directors
Final Minutes of the Board of Directors
held on Wednesday 26th June 2013
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 Corporate Development
Jason DaCosta	Director of IT
Allan Mackie	Non-Executive Director / Deputy Chairman
Carol Withenshaw	Non-Executive Director
Clare Briegal	Non-Executive Director
Rory Adam	Non-Executive Director
Lynne Lobley	Non-Executive Director

In Attendance:

Colin Reid	Trust Secretary
Chris Ridehalgh,	Acting Deputy Director of Finance
Caroline Salden	Interim Director of Commercial and Corporate Development

Apologies:

Steve Barrow	Acting Director of Finance
Mark Halliwell	Interim Medical Director

W&HHFT/TB/13/0102 – Apologies & Declaration of Interest

- 1 Apologies: As above.
- 2 Lynne Lobley declared an interest in agenda item W&HHFT/TB/13/0103, due to her role as a Lay member of Mersey Deanery Senior Management Team. No other Declarations of Interest had been reported

W&HHFT/TB/13/0103 – Education and Development Annual Report

- 3 Dr Deb Mandal, Director of Medical Education and Wendy Johnson, Associate Director of Education and Development presented the Education and Development Annual Report 2012/13 and explained that the Report outlined the educational and development activity undertaken from April 2012 to March 2013 and also included information regarding Education Quality Assessment Visits, including the Mersey Deanery Annual Assessment Visit, Edexcel Assessment Visit and the NHSLA Level II Inspection.
- 4 The Chairman asked that the Board take the Report as read and asked Dr Mandal to highlight the key achievements during 2012/13 and the key objectives and future working for 2013/14. The Chairman thanked Dr Mandal for his presentation and sought comments.

- 5 Lynne Loble, Non-Executive Director referred to provision of training from Health Education England and felt that this would be important from the Trust's point of view in delivering training in the future. She further advised that the Quality Surveillance Group would be using the Mersey Deanery visit as a means of understanding the level of training being provided by the Trust. Wendy Johnson advised that the NMC were also doing similar visits over the next 12 months to assess the delivery of training of Nursing and Midwifery staff.
- 6 The Chairman noted the comment and recognised that the Medical Education team was part of a wider Education and Development team providing services across all staff in the Trust.
- 7 The Chief Executive suggested that when providing a copy of the Education and Development Annual Report 2012/13 to the Mersey Deanery, the Deanery is advised that the Report was presented and noted by the Board.

W&HHFT/TB/13/0104 – Minutes of Meeting

- 8 The minutes of the meeting held on 28th May 2013 were approved.

W&HHFT/TB/13/0105 – Action Plan

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

W&HHFT/TB/13/0106 – Chairman's Verbal Update Report

- 10 The Chairman provide a brief verbal report on the Following:
- 11 **FTN Chairs meeting:** The Chairman advised that he attended the recent FTN Chairs meeting at which discussion concentrated around competition, funding and A&E. an additional meeting had been set up in September to address concerns expressed.
- 12 **Governors:** Monitor had been working with the FTN and FTGA to develop new guidance for Governors following the enactment of the Health and Social Care Act. He understood that the guidance would address the concerns surrounding how Governors were able to hold to account individually and collectively the performance of the Board and other additional duties. The publication date for the new guidance had not been identified, however it was hoped to be available in September 2013.
- 13 The Chairman referred to the decision of the Council to keep the term of office of elected governors to two terms of 3 years.
- 14 **Non-Executive Director:** The Chairman reported that this meeting would be Allan Mackie's last meeting as a Non-Executive Director and Deputy Chairman. The Chairman advised that he could not have asked for a better Deputy Chairman than Allan and thanked him for all his help and support over the last 8 years he was involved with the Trust. The Chairman stated that in the early days when the Trust was applying for FT status, Allan had helped drive the process forward and had the trust of both Board and Governors. The Board echoed the sentiments of the Chairman.

W&HHFT/TB/13/0107 – Chief Executive Verbal Update Report

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

- 16 **Medical Director/Divisional Medical Director:** The Chief Executive updated the Board on the appointment of the Medical Director and that of the Divisional Medical Directors. She explained that with regard to the Divisional Medical Directors each would take up their roles on 1st July 2013.
- 17 **Director of Finance:** The Chief Executive reported that following the decision of Rob Foster not to join the Trust, as reported at the last meeting, she had discussed the role with Tim Barlow who had agreed to start on 11th September 2013. The Chief Executive advised that Tim would be invited to attend the July meeting.
- 18 **Maternity Services:** The Chief Executive reported that Maternity Services had moved back to the £450,000 renovated maternity Unit in Croft Wing. She advised that the unit looks fantastic and provides the best facilities for mums-to-be from across the area. At the same time as the move, Maternity Services had set up a Facebook page to promote the Service and the new facilities and to date received over 1,500 'likes' on Facebook reaching over 62,000 people. The Chief Executive thanked to all the team involved in the successful move to Daresbury, the building work and the move back to Croft.
- 19 **Dementia:** The Chief Executive reported that the Trust had applied for a Department of Health Capital Grant to provide specialised dementia friendly ward. She explained that a lot of effort had gone into the application and hoped it would be as successful as the maternity application.
- 20 **Healthwatch:** The Chief Executive referred to the letters received from Healthwatch Warrington and Healthwatch Halton and explained that each were finding their feet at the moment having been set up following enactment of the Health and Social Care Act 2012. The Chief Executive advised that she will be arranging meetings with both organisations.
- 21 The Chief Executives verbal update report was noted.

W&HHFT/TB/13/0108 - Patient Story

- 22 A video patient story was shown relating to the treatment and care of a chronic leukaemia patient who has attended Warrington Hospital to receive a blood transfusion and had received care in A1, C22 and PIU.
- 23 The Board noted the very positive comments the patient made during the video, in particular the care he had received throughout his stay at the hospital, particularly in A1, and that communication between staff and him regarding the treatment he would be receiving was excellent.
- 24 The Chief Executive following the video presentation felt that with such a very positive story the Trust should aspire to the level of service the patient received across the whole spectrum of services.
- 25 Lesley Mackay, Associate Director Infection Prevention and Control joined the meeting to present the Infection Prevention Report.

W&HHFT/TB/13/0110 - Infection Prevention Control

- 26 The Director of Nursing and Organisational Development introduced Lesley McKay, Associate Director Infection Prevention and Control who would present the Infection

Prevention Report.

- 27 The Associate Director Infection Prevention and Control advised that during April and May the Trust reported 9 hospital apportioned cases and a further 3 hospital apportioned cases of C difficile had been reported for June. The rise in cases was a concern and a variety of actions had been implemented. This included; safety alert highlighting how to manage potentially infectious diarrhoea; enhanced environmental cleaning with chlorine based disinfectant; antibiotic prescribing audits; and hand hygiene and personal protective equipment compliance review.
- 28 The Associate Director Infection Prevention and Control advised that during May 2 incidences were noted in a bay on the medical side of ward B18. Further investigation revealed the cases were different strains and confirmed the incident was not an outbreak. The Associate Director Infection Prevention and Control reported on the use of use of a novel antibiotic for treatment of recurrent disease and that the Antibiotic Pharmacist and Microbiology Consultants were reviewing the use of probiotics as a preventative measure for a selected group of patients.
- 29 With regard to antibiotic prescribing, Carol Withenshaw asked whether doctors were aware of the different types of antibiotics and their impact on C difficile. In response the Associate Director Infection Prevention and Control advised that all doctors receive training and also had access to desktop guidance. Carol Withenshaw referred to the length of stay (LOS) indices which showed an increase during April and May and asked whether LOS had an impact on the incidences of C difficile. The Chief Operating Officer advised that LOS could have an impact as patients stay longer in the Trust would be potentially open to infections.
- 30 The Chairman asked whether the Director of Nursing and Organisational Development was confident that the level of incidences of C difficile would be brought under control quickly. The Director of Nursing and Organisational Development advised that she was confident that the incidences of C difficile would be brought under control, however she believed that the Trust trajectory of 19 for the year would now be much more challenging to achieve. She was very disappointed that 12 patients had contracted such a horrible condition whilst in the hospital and had challenged the Wards to bring it under control.
- 31 The Chairman thanked Associate Director Infection Prevention and Control for her report noting that other aspects of the report was included in the Quality Dashboard which would be discussed next on the agenda and asked the Associate Director Infection Prevention and Control to stay for that item. The Board noted the Infection Prevention Control Report.

W&HHFT/TB/13/0109 – Quality Dashboard

- 32 The Director of Nursing and Organisational Development presented the monthly Quality Dashboard and reported that the report contained six exception reports: HSMR and SHMI; MRSA; C difficile; Falls; and Discharge summaries to GPs.
- 33 With regard to HSMR and SHMI, the Director of Nursing and Organisational Development advised on the activity the Trust was undertaking to address the concerns and referred the Board to the statements made in the paper and that the Divisions had been requested to undertake a review of mortality at specialist levels and also assess whether the correct coding had been used.
- 34 In response to a question from Lynne Lobley regarding assurance that all deaths were being reviewed, the Director of Nursing and Organisational Development advised that the

instances of deaths per day were relatively low and that a small number of all deaths would be reviewed to understand any areas of concern. Rory Adam asked that the Board receive additional feedback on what was being done to improve the Trust's SHMI. The Chairman agreed that this would be appropriate and asked the Director of Nursing and Organisational Development to arrange a presentation at the July Board meeting that explained the actions undertaken to address the trust's mortality rates.

35 **Action TB/13/109: The Director of Nursing and Organisational Development to provide the Board with the Trusts actions being undertaken to address HSMR and SHMI performance.**

36 The Board noted progress and compliance against key performance indicators in the Quality Improvement and Patient Safety Strategy and agreed the actions planned to mitigate areas of exception.

W&HHFT/TB/13/0113 – Head of Midwifery Annual Report

37 Mel Hudson, Associate Director of Nursing, WC&CSS / Head of Midwifery presented the Head of Midwifery Report and advised that the Annual Report set out the activity of the midwife and midwifery services during 2012.

38 Lynne Lobley referred the issues that had been reported to the Board around staffing following the temporary move to Daresbury Wing whilst the Maternity Unit was being renovated and asked whether these issues had been addressed satisfactory. In response the Director of Nursing and Organisational Development advised that the staffing issues had been fully addressed and with the move back to Croft Wing earlier this month and that staff morale was very high.

39 The Chairman thanked the Associate Director of Nursing, WC&CSS for her excellent Report which was noted.

W&HHFT/TB/13/0114 – Paediatrics Strategy

39 Dan Grimes, Assistant General Manager- Radiology, Women's & Children's and Dr Chris Bedford, Consultant Paediatrician & Clinical Lead joined the meeting and gave a presentation on the Paediatric Services Strategy 2013 – 2016. The Chairman thanked Dan Grimes and Dr Chris Bedford for their presentation, noting that the strategy document was well written and build on the ground work of a well-respected service provided by the Trust.

40 Clare Briegal referred to the strategy and in particular how the Board could measure performance and asked what performance measures could be tracked by the Board. In response the Chief Operating Officer advised that there was a number that could be used and would depend on what the Board wanted to track. The Chief Executive advised that the Bi-lateral meetings would be reviewing performance and felt there was a need to understand what was important to measure performance against and this would be discussed. The Chairman felt that it was important that the board receive a follow up report on a quarterly basis on delivery of the Strategy and asked that such update be added to the work plan for the Board.

41 **Action TB/13/114: The Director of Nursing and Organisational Development to present an update on the delivery of the Paediatrics Strategy on a quarterly basis.**

- 42 The Chairman thanked Dan Grime and Dr Chris Bedford for their presentation. The Board approved the Paediatric Services Strategy 2013 – 2016.

W&HHFT/TB/13/0111 – CQC QRP Report

- 43 The Director of Nursing and Organisational Development presented the CQC QRP Comparison Report and reported that there were no areas of concern. The Board considered and noted the Report.

W&HHFT/TB/13/0112 – Complaints – Process & Procedure Report

- 44 The Director of Nursing and Organisational Development presented the Complaints – Process & Procedure Report and reported that at the Board meeting in July the Complaints Strategy would be presented.

- 45 Lynne Lobley asked whether it would be appropriate to do a deep dive to obtain assurance that there were no concerns regarding the new process and policies being adopted by the Trust. It was noted that the Audit Committee could identify whether this was appropriate and would be raised at the next Audit Committee meeting. The Board noted that Report.

- 46 **Action TB/12/112: The Director of Nursing and Organisational Development to present to the Board the handling of Complaints and Concerns Policy**

W&HHFT/TB/13/0115 – Workforce Performance Report

- 47 The Director of Nursing and Organisational Development presented the Workforce Performance Indicators Report and advised that mandatory training and appraisal rates remaining unchanged from the April Board Report and were either red or amber rated. Sickness absence had shown a slight increase from the last report and continued to be higher than the new target although was lower than that reported the same time last year.

- 48 The Director of Nursing and Organisational Development advised that temporary staffing continues to be a concern with a significant increase in expenditure from that reported in April. The Chairman, recognising the issues surrounding delivery of the CIP, felt that this was worrying and the Board needed to understand why temporary staffing costs was increasing when the Trust had seen a reduction in sickness absenteeism. Carol Withenshaw asked whether the Executive had looked at how approvals for temporary staffing were signed off and whether tighter control was required. The Director of Nursing and Organisational Development advised that due controls were in place however the need for additional staff was, as previously reported, due primarily to escalation and vacancies, particularly to support gaps in rotas.

- 49 With regard to performance in staff appraisals, the Board recognised that the Strategic Workforce Committee was assessing the issues on delivery of appraisals for all staff.

- 50 The Board reviewed the Report and Dashboard and noted the performance to date.

W&HHFT/TB/13/0116 Finance Report as at 31st May 2013

- 51 The Acting Deputy Director of Finance presented the Finance Report as at 31st May 2013 and the forecast for year ending 31st March 2014.

- 52 The Acting Deputy Director of Finance advised that year to date the Trust was reporting a deficit of £1,069k, which includes income from Macmillan for the capital developments at the Delamere Centre of £289k. He explained that in order to arrive at an underlying financial performance of the Trust these donations required to be excluded. The underlying financial performance was therefore a deficit of £1,358k, which was £53k higher than the planned deficit of £1,305k. The Financial Risk Rating was scored at a 1, compared to the planned rating of 2 and the proposed Continuity of Services rating was scored at a 2 which is in line with plan.
- 53 Referring to operating Income and expenditure, the Acting Deputy Director of Finance advised that year to date operating income was £377k below plan and in month was £25k (0.1%) below plan. Operating expenses in month was £15k above plan and year to date £325k below plan. The Acting Deputy Director of Finance advised that increase in pay costs in month was largely due to waiting list payments and bank and agency medical and nursing staff and advised that as discussed earlier in the meeting action needed to be taken to ensure that pay expenditure was brought back in line with budgets, especially as pay was a key feature of the cost savings target.
- 54 The Acting Deputy Director of Finance advised that overall the performance to date was broadly on line with plan. However, in order to ensure that the planned surplus and planned financial risk rating was achieved it was essential the risks were mitigated and activity levels delivered within budget.
- 55 The Chairman referred to the reduced income from A&E and asked what this was the case given the activity within that department. In response the Chief Operating Officer advised that there had been a change in the tariff for patients admitted from A&E to A1. This local tariff may have impacted on the amount of income received. The Chief Operating Officer advised that the Trust needed to assess the impact of this change.
- 56 The Chairman thanked the Acting Deputy Director of Finance for his report which was noted by the Board.

W&HHFT/TB/13/0117 – Progress Report from the Innovation and Cost Improvement Committee and minutes

- 57 The Chief Operating Officer presented the Progress Report from the Innovation and Cost Improvement Committee and minutes of the Committee meetings.
- 58 The Chief Operating Officer reported that in month 2 the 2013/14 CIP programme had achieved £789k year to date against a planned target of £776k. With regard to annual forecasts he reported that there was a potential shortfall of £170k against the £11m target.
- 59 The Chief Operating Officer ran through the report highlighting the work of the ICIC and PMO and explained that the 2013/14 schemes continued to progress with 44% of PIDs approved and a further 9% was scheduled for approval. He explained that where schemes had been approved; 85% of milestone activity had been completed in line with plan.
- 60 The Chief Operating Officer reported that there were a number of issues relating to schemes where PIDs had not been submitted and therefore overdue. These had been escalated accordingly actions taken to have them submitted within target timescales.
- 61 The Chief Operating Officer referred the Board to the Report and in particular the work being undertaken to refresh the dashboard which would provide additional information and clarity

on delivery of the overall CIP programme, risks and issue status, key scheme milestones and progress against PID delivery.

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

W&HHFT/TB/13/0118 – Corporate Performance Report

- 63 The Chief Operating Officer presented the Corporate Performance report which was currently being developed to provide greater information surrounding the performance of the Trust in national and local performance indicators. He advised that, based on the performance in the first quarter, the Trust had an Amber/Green rating, as highlighted in Appendix 1.
- 64 With regard to Accident and Emergency national targets the Trust continued to perform well and for quarter 1 achieved a 95.14% performance against the 95% target for throughput within 4hours. The Chief Operating Officer advised that A&E teams should be congratulated in continuing to perform when nationally this was not the case for other trusts.
- 65 The Chief Operating Officer referred to the infection control indicators which showed red for both MRSA and C difficile and referred to earlier discussions regarding these indicators and actions being undertaken to address the performance.
- 66 With regard to the national cancer targets the Chief Operating Officer reported that the Trust had continued to perform against all targets and which was testament to the dedication and hard work of the staff.
- 67 Referring to the local indicators the Chief Operating Officer advised that in most cases the Trust was performing well. He referred the Board to the LOS indicators and advised that since the introduction of task teams the 21 day or more cohorts had seen a reduction in numbers.
- 68 With regard to DNA's, the Chief Operating Officer reported that this still remained a problem for the Trust, with patients not attending arranged appointments. He advised that the system of reminding patients by text messaging was still being progressed however there were still barriers in adopting the system fully surrounding data protection.
- 69 The Board noted the Corporate Performance Report.

W&HHFT/TB/13/0119 – New structural arrangements for Emergency Preparedness Response & Recovery

- 70 The Chief Operating Officer presented the new structural arrangements for emergency preparedness, response and recovery (EPRR) and explained that with the introduction of the Health and Social Care Act 2012 significant changes to the health system had introduced wide structural changes in the way in which Emergency Preparedness would be managed both nationally and locally. The Chief Operating Officer advised that the paper provides details of the revised arrangements for the emergency preparedness, resilience and response agenda and summarises the key changes which have been introduced and the likely impact for the Trust.
- 71 The Chief Operating Officer ran through the paper and referred to the Memorandum of Understanding (MOU) which had been developed and sets out the agreed contribution to

EPRR within the Cheshire, Warrington and Wirral Area Team. The MOU describes the role of the CWW Area Team, Provider Units and CCGs in providing mutual aid and utilising resources in response to incidents of a multi-agency nature across the region.

- 72 The Chief Executive advised that a number of CCG's have found themselves under pressures to develop systems however Warrington and Halton CCG's were not under the same pressures due to our diligence and performance in developing our emergency preparedness.
- 73 The Board noted the new structural arrangements for Emergency Preparedness Response & Recovery which was introduced in April 2013.

W&HHFT/TB/13/0120 – Communications & Membership

- 74 The Associate Director of Communications presented the Trust Membership Strategy 2013-2016 which sets out the Trust's member recruitment, member and public engagement and wider membership communication activities over the next three years. He explained that the Council of Governors had approved the strategy at its meeting on 30th May 2013.
- 75 The Associate Director of Communications explained that the Strategy focused on a number of aspects, in particular on retention of current membership and addressing demographic issues and on widening engagement for active members and the wider public in accordance with the Health and Social Care Act and Francis Report recommendations. He also advised that it was proposed to increase minimum age for membership from 12 to 16. However, so as not to disadvantage those current members who were within that age bracket already it was proposed to allow them to retain affiliate membership category. The impact of doing this was being considered and if appropriate the constitution would be amended to support the proposal. The Strategy also set the Trust's on going communications activity to be monitored by the Council of Governors Communications and Membership Committee.
- 76 The Board approved the Trust Membership Strategy 2013-2016.

W&HHFT/TB/13/0121 – Board Committee Report

- 77 **Governance Committee:** The Chair of the governance Committee presented the minutes of the meeting of the Committee held on 14th May 2013 and referred to the key points on the cover page of the paper.
- 78 **Strategic Workforce Committee:** The Chair of the governance Committee presented the minutes of the meeting of the Committee held on 8th April 2013 and referred to the key points on the cover page of the paper.

W&HHFT/TB/13/0122 – Any Other Business

- 79 None

Next Meeting: 31st July 2013