

**ROYAL UNITED HOSPITAL BATH NHS TRUST
MINUTES OF THE MEETING OF THE TRUST BOARD HELD IN PUBLIC
WEDNESDAY 23 JANUARY 2013
ROOM C, EDUCATION CENTRE, RUH**

Present:

Voting Directors

Brian Stables, Chairman
James Scott, Chief Executive
Michael Earp, Non-Executive Director (Vice Chairman)
Catherine Phillips, Director of Finance
Francesca Thompson, Chief Operating Officer
Tim Craft, Medical Director
Nigel Sullivan, Non-Executive Director
Joanna Hole, Non-Executive Director
Mary Lewis, Director of Nursing

Non-Voting Directors

Lynn Vaughan, Director of Human Resources
Howard Jones, Director of Estates and Facilities
Joss Foster, Commercial Director

In attendance

Eric Sanders, Trust Board Secretary

BD/13/01/01 Chairman's Welcome and Apologies

The Chairman welcomed Francesca Thompson to the Trust Board meeting in her role as Chief Operating Officer and Mary Lewis, in her role as Acting Director of Nursing.

Apologies had been received from Nicholas Hood, Non-Executive Director, and Moira Brennan, Non-Executive Director.

BD/13/01/02 Written Questions from the Public

No questions were presented from the public.

BD/13/01/03 Declarations of Interest

Each director present confirmed that they had no direct or indirect interest in any way in the proposed transaction to be considered at the meeting.

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BD/13/01/04 Minutes of the Public Trust Board meeting 19 December 2012

The minutes of the previous meeting were approved as a true and correct record of the meeting.

BD/13/01/05 Action List and Matters Arising

The action updates were discussed and those indicated as closed were approved. The following actions were further discussed:

PB180 – The Trust Board requested an update in March 2013.

PB186 – The Director of Nursing provided an update on complaint themes which were related to the perceptions and expectations of patients not being met, waiting time for treatment and test results. It was understood that these issues were related to the high levels of activity undertaken by the Emergency Department. The Trust Board agreed to close the action based on the update provided.

PB193 and PB194 – The Trust Board agreed to close the actions.

BD/13/01/06 Patient Story: Cardiac Patient

The Director of Nursing introduced the story from a patient who had been treated on the Cardiac Ward. The patient praised the care received from staff but raised concerns about the facilities on the stroke ward and with the food provided. The patient was diabetic and had a number of allergies. The staff had addressed these issues and had arranged for the Hotel Services Manager and chef to meet with the patient to discuss his concerns and alternative menus.

The Chairman queried how care was being integrated and coordinated. It was confirmed that care plans took into account all of the information provided about a patient.

The Director of Estates and Facilities agreed to work with the ward staff to identify actions to further address the concerns related to nutrition.

Action: Director of Estates and Facilities

BD/13/01/07 Quality Report

The Director of Nursing presented the report and highlighted:

- The report gave an update on the clostridium Difficile action plan and provided the Trust Board with assurance on delivery;
- Staff feedback had been sought on their engagement with quality initiatives and this, whilst limited in terms of scope, showed good levels of engagement;
- There was a concern with the timeliness of responses to complaints and the levels of reopened complaints;

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The options to increase the uptake of Meridian questionnaires were discussed and it was highlighted that these were not sustainable. Further work was required to ensure any solution was sustainable.

The Director of Finance highlighted the significant change in the responses to the Net Promoter Score. The Trust Board agreed to discuss the item fully under item 8.

A Non-Executive Director (Michael Earp) queried the continued issues with angioplasty identified through PALS. The Chief Operating Officer confirmed that the issues related to higher than plan activity and ensuring that elective activity and non-elective activity was balanced appropriately. To alleviate the pressure, additional lists were being provided at weekends.

The Medical Director highlighted the rate of compliance with the World Health Organisation Safer Surgery Checklist which was being sustained above 99%. The audit was Trust wide which differed to other comparator Trusts who undertook sample audits.

The Trust Board noted the report.

BD/13/01/08 Implementation of the Family and Friends Test

The Director of Nursing presented the report and highlighted:

- An options appraisal had been presented to Management Board for discussion. Management Board had recommended a mixed methodology approach initially;
- This was a nationally mandated requirement which needed to be implemented from 1 April 2013;
- Monthly submissions on responses would be required with all data published from July 2013;
- A national CQUIN scheme related to the test was being developed;
- A steering group was in place to implement the project, chaired by the Director of Nursing. In addition further clinical engagement was being sought.

A Non-Executive Director (Michael Earp) suggested the use of text messaging to prompt/remind patients to complete the survey.

The Trust Board noted the report and approved the approach outlined.

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BD/13/01/09

Performance Report – Trust Operational Performance

The Chief Operating Officer presented the report and highlighted:

- The Trust was rated Amber-Green against the Monitor Governance Risk Rating, and was Performing against the Acute Trust Performance Framework;
- The Trust had performed below the 95% target for A&E 4 Hour Performance for four months. The first week of January 2013 had been very busy resulting in the health community declaring black escalation. Subsequent performance had improved;
- The performance against the Delayed Transfers of Care target had improved but there remained concerns about the high levels of patients who had been assessed as being ready to be discharged but insufficient actions had been escalated by the community;

The Trust Board discussed the significant discretionary effort from staff to continue to manage the hospital through high levels of activity and the poor weather. The Chief Executive was asked to thank staff on behalf of the Trust Board.

Action: Chief Executive

A Non-Executive Director (Michael Earp) sought assurance that the safety of medical patients, who were being treated in surgical wards, was not being compromised. The Medical Director described the process for ensuring the safety of these patients which included dedicated ward rounds by medical staff, safety systems to identify high risk patients and mechanisms within the site office to allocate beds based on risk and need.

The Board noted the report and approved the Single Operating Model return for December 2012.

BD/13/01/10

Emergency Pathway Performance Report

The Chief Operating Officer presented the report and highlighted:

- The paper had been produced to provide the Trust Board with information on the actions being taken to address the 4 Hour A&E performance as reported in the Operational Performance report;
- The 4 Hour Recovery Plan had been refreshed and included a range of options to address performance;
- Information on A&E attendees and admissions was provided which demonstrated that there had been an increase in attendees of >5.2% and >2.5% for admissions, compared to the previous financial year;
- The increases primarily stemmed from Wiltshire and Somerset;
- An analysis of the information had identified that the target performance had been impacted by how patients, who had been assessed as “green to go”, were being managed and suitably transferred back into the community;

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The Director of Finance requested further information on the attendance to admissions ratios by Clinical Commissioning group to understand whether there was any variance at that level.

Action: Chief Operating Officer

A Non-Executive Director (Joanna Hole) sought assurance that the forecast position for quarter 4 2012/13 was achievable and sustainable. The Chief Operating officer confirmed that this forecast was challenging and detailed plans had been developed and were being monitored by the weekly 4 Hour Taskforce.

A Non-Executive Director (Nigel Sullivan) queried the one area which would have the biggest impact on improving performance. The Chief Operating Officer confirmed that the issue with “green to go” patients was the biggest risk to achieving the target and was where the Trust was focusing its attention.

The Trust Board noted the report and the risks to a sustained performance delivery.

BD/13/01/11 Finance Report

The Director of Finance presented the report and highlighted:

- The Trust had increased its surplus by £82k in month to £3.7m year to date. This was against an in month plan to breakeven;
- Income generation was behind plan, primarily related to not achieving planned elective activity levels;
- A further £900k of surplus was required to achieve the year-end target and Management Board was focusing its attention on this key issue;
- The Trust’s cash position was ahead of plan due to delays in the capital expenditure programme.

The Board noted the report and the opportunity for a more detailed review in the private session of the Trust Board.

BD/13/01/12 FT Standing Financial Instructions, Scheme of Reservation and Delegation

The Director of Finance presented the Standing Financial Instructions, Scheme of Reservation and Delegation for approval. The documents had been prepared in advance of being authorised as an NHS Foundation Trust. The Audit Committee had reviewed the documents at their meetings in September and December 2012. All amendments requested by the Audit Committee had been incorporated into the documents presented for approval.

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The Commercial Director requested that the documents were reviewed, at their next update, to reflect the requirements of the Trust to react to commercial opportunities when they arise.

The Trust Board approved the Standing Financial Instructions, Scheme of Reservation and Delegation.

BD/13/01/13 Communications Quarterly Update

The Trust Board noted the report.

BD/13/01/14 Estates & Facilities Sustainability Report – Quarter 3

The Director of Estates and Facilities presented the report and highlighted:

- No update had been received on the planned capital expenditure to upgrade the maternity facilities in the Princess Ann Wing;
- There had been a delay to the development of the Oasis into a new Board Room. This was now expected to be completed in May 2013;
- Due to unexpected plant failure during the year there had been a financial impact and therefore a review of investment priorities had been carried out to ensure that the department was able to operate within its defined financial envelope;

A Non-Executive Director (Nigel Sullivan) queried whether there was a total preventative maintenance programme in place. It was confirmed that a programme was in place however due to historic lack of investment in backlog maintenance these issues were more frequent than expected.

The Trust Board noted the report.

BD/13/01/15 Audit Committee Update

The Trust Board noted the report.

BD/13/01/16 Charity Committee Update

The Director of Finance presented the report and highlighted that the new gamma camera was now in operational use. Due to proposed changes to the organisational form of NHS Charities, the Full Corporate Trustee needed to debate the issue. This debate would be scheduled for June 2013.

The Commercial Director queried the consideration of the Charity Strategy by the Full Corporate Trustee. It was agreed to align the planned debate about the form of the charity with a review of the Charity Strategy.

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The Trust Board noted the annual report from the Charities Committee and approved the Terms of Reference.

BD/13/01/17 Management Board Update Report

The Chief Executive presented the report and the Terms of Reference for approval. The membership of the Management Board had been considered at the last meeting of the Management Board and it was identified that the Programme Management Office lead and Chief information Officer should be included in the membership as described in the Terms of Reference.

The Trust Board noted the report and approved the Terms of Reference subject to the amendments to the membership as highlighted.

BD/13/01/18 Business Plan Quarterly Review

The Trust Board noted the report.

BD/13/01/19 Chief Executive's Report

The Trust Board noted the report.

BD/13/01/20 Chairman's Report

The Chairman gave a verbal update and confirmed that two induction sessions had been held for the Council of Governors, with separate sessions for the public/stakeholder governors and for staff governors. Subject to authorisation by Monitor, the first formal meeting of the Council of Governors was due to be held on 8 March 2013.

The Trust Board noted the report.

BD/13/01/21 Meeting Review

The Chairman postponed the discussion until after the private session of the Trust Board later that day.

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BD/13/01/22

**Resolution to exclude members of the public and press
pursuant to the Public Bodies (Admission to Meeting) Act 1960**

The Trust Board approved the resolution.

The next Trust Board meeting was due to be held on Wednesday 27 February 2013 in
Room C, Education Centre, RUH Bath

The meeting was closed by the Chairman at 12:10

Signed

Date

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