

# ROYAL UNITED HOSPITAL BATH NHS TRUST MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS HELD IN PUBLIC ON WEDNESDAY 29 MAY 2013 ROOM C, EDUCATION CENTRE, RUH

#### Present:

### **Voting Directors**

Brian Stables, Chairman
Catherine Phillips, Director of Finance
Francesca Thompson, Chief Operating Officer
James Scott, Chief Executive
Joanna Hole, Non-Executive Director
Mary Lewis, Director of Nursing (Acting)
Tim Craft, Medical Director
Moira Brennan, Non-Executive Director
Nigel Sullivan, Non-Executive Director
Nicholas Hood, Non-Executive Director

### Non-Voting Directors

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

#### In attendance

Roxy Poultney, Membership & Governance Manager

### BD/13/05/01 Chairman's Welcome and Apologies

Apologies had been received from Michael Earp, Non-Executive Director (Vice Chairman).

### BD/13/05/02 Written Questions from the Public

No questions had been received.

#### BD/13/05/03 Declarations of Interest

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

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 1 of 10

### BD/13/05/04 Minutes of the Board of Directors meeting held in public on 24 April 2013

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

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

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

PB208 – The Chairman confirmed that this action would be discussed at the Trust Board away day in June.

PB209 – The Board of Directors agreed to amend the action by date to June 2013 PB211 – The Acting Director of Nursing confirmed that the Hotel Services Manager would report to the Infection Control Taskforce to provide details of any areas that did not have sufficient hand washing facilities. The Board asked for a further update on the work-programme next month.

**Action: Acting Director of Nursing** 

PB212 – The Chairman requested that a further update was provided in June.

**Action: Chief Operating Officer** 

PB216 – The Chairman stated that this item would remain open as it was due to be discussed at the Trust Board away day in June.

PB218 – The Chairman asked the Chief Executive to complete this action.

**Action: Chief Executive** 

# BD/13/05/06 Annual Governance Statement 2012/13 and Head of Internal Audit Opinion 2012/13

The Director of Finance presented the report and highlighted:

- The Trust had been rated as Performing for 2012/13 for the Acute Trust Performance Framework. This confirmed that the Trust had met all of the National Priorities as set out in the NHS Operating Framework.
- The Trust would be classified as Amber-Green against the Monitor Governance Rating.
- The Trust had achieved its planned financial surplus for 2012/13.
- The Trust had identified one significant issue to report as part of the statements which was "Sustaining Operational Performance".
- The Annual Governance Statement detailed information about:
  - o The CQC visit page 16.
  - o The achievement of QIPP page 18.
  - o The deferral of the Trust's NHS Foundation Trust application page 18.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 2 of 10

The Chairman suggested that some detail about the Trust's patient safety visits and the level of assurance this provided to the Board of Directors should be included in the Annual Governance Statement. The Chief Executive agreed to amend the statement.

**Action: Chief Executive** 

The Board of Directors approved the Annual Governance Statement 2012/13 subject to the minor amendments.

### BD/13/05/07 Annual Accounts and Annual Report 2012/13

The Director of Finance presented the Annual Accounts 2012/13 to the Trust Board for ratification following their approval by the Audit Committee on 23 May 2013. The Director of Finance highlighted that the Trust's performance against its Statutory Breakdown Duty was £9.2m and the Trust had therefore met its planned surplus in order to repay the remaining legacy debt.

John Golding, Grant Thornton, complimented the finance team for submitting the accounts ahead of the deadline and within the ever tightening timescales required by the Department of Health. The external auditors had reviewed the accounts and were happy to give a clean, unqualified audit opinion on the accounts, and a positive value for money conclusion. Only a small number of minor disclosure adjustments had been noted.

The Chair of the Audit Committee confirmed that the Audit Committee had reviewed and approved the accounts on behalf of the Trust Board and were happy with the information provided.

The Chairman thanked the Director of Finance for delivering the best set of annual accounts the Trust had ever seen as well as thanking the finance team for their hard work and support provided to the external auditors. The Chairman also thanked Grant Thornton for their efficiency and professionalism in carrying out the audit.

The Trust Board approved the Annual Accounts 2012/13.

### BD/13/05/08 Patient Story: A child and parents story

The Head of Patient Experience introduced the patient story, supported by Sue Wheeler, Junior Sister, Children's Ward. The patient described his stay and treatment at the hospital which was a very positive account.

A Non-Executive Director (Joanna Hole) noted that the patient had access to books during his stay at the Trust and asked if there was an infection control issue surrounding this. It was confirmed that often books can cause infection control issues, but the Ward had a number of books which were wipe clean to mitigate this.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 3 of 10

The Chief Operating Officer stated that it would be good practice to learn from children and gather their feedback about their stay at the Trust. The Junior Sister confirmed that patient surveys had been carried out in the past regarding the meals that young patients received as feedback indicated that the food was not always "child friendly". She confirmed that she had worked closely with the Hotel Services Manager to adjust the menu and the response had been extremely positive. The Trust Board noted the surveys that had been done to date and requested that the Acting Director of Nursing and Head of Patient Experience contact other Trusts to look for ways to improve the measurement of patient feedback within Paediatric service.

**Action: Acting Director of Nursing** 

The Junior Sister highlighted that the Trust had a classroom on-site which enabled children who were well enough to go to school for a few hours a day. Teachers could be provided for patients who were not well enough or unable to get to the classroom, this was particularly important for teenagers who may have been sitting exams.

A Non-Executive Director (Nigel Sullivan) asked if there were any obstacles preventing the Children's Ward from functioning to its capacity. The Junior Sister stated that with changes within the day surgery pathway, day surgery patients and acute patients were co-located. The Chief Operating Officer confirmed that she would look into ways to mitigate the volume of Day Surgery Patients and Acute Patients on the Children's Ward.

**Action: Chief Operating Officer** 

The Chairman thanked the Head of Patient Experience and nurse for presenting the story.

# BD/13/05/09 Matron Presentation – Improving patient experience and pathways

The Chairman welcomed the Matrons from the Medical Division who highlighted the following:

- Three Dementia coordinators were providing a seven-day service to support staff
  to ensure that the highest quality care is given to elderly patients with a known
  diagnosis of dementia and to improve the experience of patients and their carers.
- With the support of the Kings Fund Project, the Trust had received a grant to refurbish Combe Ward and the garden area to create a "dementia friendly" environment. The ward would be transformed by creating a ward reception with seating area, a staff base would be established in each bay and bold and fresh colour schemes would be used.
- The former CDCU had been renamed to the Medical Therapies Unit in order to enable the ambulatory care unit to treat emergency patients as intended. This area had been restored with monitors for elective use, a connected treatment room for investigations, five recliner chairs and four trolleys (No beds). All

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 4 of 10

- overnight cardiology elective patients were now transferred to Cardiac ward post recovery.
- The Medical Day Case Unit had previously been unable to function as intended due to escalation use. Elective therapy patients had been cared for in Ambulatory Care which led to a reduced access for emergency patients and poor experience.
- The Acute Oncology Service (AOS) went live on 8<sup>th</sup> April 2013. This service provided advice on appropriate investigations/treatment plans and allowed the review of inpatients with acute oncology presentations.
- The AOS brought together skills and expertise of staff working in ED, Medicine, Surgery and Oncology to improve the care, safety and experience of patients with cancer by avoiding admission, facilitating early discharge and preventing readmission.

The Chief Executive urged the Non-Executive Directors to visit Combe Ward to see what it currently looked like so that they could compare the difference once the refurbishment was completed. The Director of Estates and Facilities confirmed that work was on-going with the architects to ensure that the best plans are used, but work was expected to begin on the 19<sup>th</sup> July 2013. The Membership & Governance Manager said that she would invite the Non-Executive Directors to visit Combe ward.

**Action: Membership & Governance Manager** 

A Non-Executive Director (Nick Hood) questioned whether all dementia patients were confined to one ward. It was confirmed that patients with dementia could be anywhere at the hospital, but were generally on older people's wards.

The Chief Operating Officer asked if the Dementia Coordinators were collecting data. It was confirmed that they were, but that information from ED needed to be included.

A Non-Executive Director (Nigel Sullivan) questioned whether the Trust had enough money and time invested in the Medical Nurse Practitioners. It was confirmed that the Trust was incredibly supportive towards the Medical Nurse Practitioners and invested in two years of training for them.

The Director of Finance suggested that an update regarding the Acute Oncology Service was brought back to Trust Board in a years' time to review its success as it was such a good example of patient safety.

The Chairman thanked the matrons for attending and presenting to the Trust Board.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 5 of 10

### BD/13/05/10 DIPC Report 2012/13 and Infection Control Annual Programme 2013/14

The Acting Director of Nursing presented the report and highlighted:

- 2012/13 was the fourth year in succession where the Trust had achieved the trajectory for C.difficile cases.
- The Trust exceeded the MRSA target by 3 cases, and as a consequence, an MRSA recovery plan had been developed.
- A drive to reduce HCAI was aligned to the Trust's Quality objective to continuously improve the quality of the Trust's services, focusing on patient safety, clinical outcomes and patient experience.
- The Infection Prevention and Control initiatives and activities during 2012/13.
- The Infection Prevention and Control action plan for 2013/14.

A Non-Executive Director (Nigel Sullivan) stated that the action plan was a very comprehensive document but the report required more focus. He highlighted that the report identified the amount of MSSA bacteraemias and E.coli bacteraemias the Trust had had during the last year, but that there were no national targets set for them, so questioned how the Trust assessed risk and assurance. The Acting Director of Nursing confirmed that there were currently no national or regional benchmarking data available. A Non-Executive Director (Moira Brennan) suggested that the report should contain previous years' figures so that the Trust can monitor its progress.

**Action: Acting Director of Nursing** 

A Non-Executive Director (Nigel Sullivan) asked if there was a concern regarding the amount of confirmed or suspected norovirus cases on Haygarth Ward during 2012/13. The Acting Director of Nursing confirmed that Haygarth was a Gastroenterology ward.

The Chief Executive asked the Acting Director of Nursing to revise the document.

**Action: Acting Director of Nursing** 

The Trust Board approved the report subject to amendments.

### BD/13/05/11 Quality Report

The Acting Director of Nursing presented the report and highlighted:

- Good progress had been made against the CQC action plan which was being monitored every two weeks by a steering group. The actions were shown as green against the plan, with some ahead of delivery trajectory.
- On 1<sup>st</sup> May, the Dementia screening question was added to the Millennium Vulnerability Assessment which formed part of the initial risk assessment completed by the nurse on admission.
- In March, 45% of complaints were responded to within 25 working days which was a significant decrease in performance to the target of 90%.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 6 of 10

- The improvements to the Complaints process to date.
- The Pressure Ulcer steering group had agreed terms of reference, developed a
  work plan and drafted an action plan for this year which was aligned to the
  CQUIN reduction of pressure ulcers.

A Non-Executive Director (Joanna Hole) questioned when support staff would be in place to support the distribution of FFT and Meridian surveys. It was confirmed that support staff for both FFT and Meridian were already in post. Joanna Hole asked if the wards were clear on the potential financial penalty of not completing the FFT forms as following a recent patient safety visit this was not the case. The Acting Director of Nursing confirmed that all matrons and ward managers should be aware of the potential financial penalties but would reinforce this to all managers and departments.

**Action: Acting Director of Nursing** 

A Non-Executive Director (Joanna Hole) asked the other Non-Executive Directors if they attended patient safety visits. Moira Brennan stated that she had not been invited to any patient safety visits; the Director of Finance confirmed that she would ask her PA to invite her to all future meetings.

**Action: Director of Finance** 

The Chief Operating Officer highlighted that the quality of nursing care within the Medical Division was flagged as a complaint theme during April. The Acting Director of Nursing noted the concern and stated that she would investigate and provide an update to Trust Board next month.

**Action: Acting Director of Nursing** 

The Chief Executive asked the Trust Board to consider when risk severity should be reported within the Quality report without compromising openness and transparency. The Trust Board discussed this and agreed that a detailed breakdown of risk severity should be presented on a quarterly basis, and that risks should be broken down into minor, moderate and major **after** an investigation had been completed.

**Action: Acting Director of Nursing** 

The Board of Directors noted the report.

### BD/13/05/12 Performance Report – Trust Operational Performance

The Chief Operating Officer presented the report and highlighted:

- Performance against the 4 Hour A&E target was 78% in April 2013, and therefore overall performance was rated amber-green against the Monitor quality governance rating.
- 18 weeks RTT showed a Trust level green performance for all 3 indicators.
- Specialty level performance was rated amber with a score of 16 points against the ATPF indicator.
- There had been 4 cases of C.Diff in month, which is above trajectory.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 7 of 10

• The Trust had not opened an escalation bed since the Spring to Green initiative in May.

A Non-Executive Director (Nigel Sullivan) expressed concern that the actual number of C.Difficile cases had exceeded trajectory. The Chief Operating Officer stated that the Trust was concerned, but that the C.Difficile recovery plan was now in place to monitor this.

The Board of Directors noted the report.

### BD/13/05/13 Finance Report

The Director of Finance presented the report and highlighted:

- For the month of April, the Trust reported a surplus of £107k, which was £57k adverse to plan.
- Income year to date was £622k below plan; this included a total of £579k of SLA under-recovery.
- The year to date QIPP position showed that the Trust had delivered savings of £186k year to date against a plan of £363k, an achievement of 51%.

A Non-Executive Director (Moira Brennan) highlighted three errors within the report:

- Page 6 current liabilities should read: "year to date have increased by £2.2m" (not decreased)
- Page 7 Capital should read: "The continuation of the Pathology Laboratories building" (not "completion").
- Page 7 Financial risks, QIPP delivery should read: "A number of red rated" (and not raged).

The Board of Directors noted the report.

### BD/13/05/14 Non-Clinical Governance Committee Update Report

Non-Executive Director, Joanna Hole presented the report and highlighted that the Non-Clinical Governance Committee did not gain assurance from the update received from the Head of Health and Safety regarding a security incident relating to stolen cash due to non-completion of recommendations raised. The Health and Safety Manager was asked to complete all actions by July 2013.

The Board of Directors noted the report.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 8 of 10

### BD/13/05/15 Management Board Update

The Board of Directors noted the report.

### BD/13/05/16 Draft Joint Health and Wellbeing Strategy – Consultation Response

The Commercial Director presented the report and highlighted:

• Whilst the draft strategy included some of the key priorities for the Trust over the next 12 months, the issue of sustaining the existing health and care system to support an ageing population was not covered.

The Trust Board discussed the response and approved the feedback. The Board of Directors noted the report and gave the approval for the Commercial Director to respond to the BaNES Health and Wellbeing Board.

**Action: Commercial Director** 

### BD/13/05/17 Chief Executive's Report

The Chief Executive presented the report and highlighted:

- Sir James and Lady Deidre Dyson had generously donated £4m to the development of the Trust's new Cancer Centre.
- Dr Carol Peden, Associate Medical Director for Quality Improvement and Dr Louise Shaw, Consultant Stroke Physician, represented the RUH at the Dr Foster Global Comparators meeting in New York in April. This programme brought together more than 30 hospitals from around the world to share their data on HSMR, length of stay and readmission rates using the Dr Foster database and methodology.
- His congratulations to Dr Richard Graham, Consultant Radiologist and Joint Clinical Lead for Radiology, who had been shortlisted for a 2013 Military and Civilian Health Partnership Award in the Healthcare Reservist of the Year category which aims to promote and publicly recognise the efforts of health professionals from the public, private and voluntary sector(s) across the UK in providing care to service personnel, veterans and their families.

The Board of Directors noted the report.

#### BD/13/05/18 Chairman's Report

The Chairman presented the report and highlighted:

- The first Shadow Council of Governor working groups took place on 16<sup>th</sup> May 2013 and focused on Quality and Strategy and Business Planning.
- The Non-Executive annual appraisal process was now complete.
- The Trust had hosted a visit from Chris Hopson, Chief Executive of the Foundation Trust Network which went extremely well.

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 9 of 10

The Chairman asked the Commercial Director to feedback to staff Chris Hopson's positive comments.

**Action: Commercial Director** 

The Board of Directors noted the report.

# BD/13/05/19 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 meeting was closed by the Chairman at 12:30

The next Trust Board meeting was due to be held on Wednesday 24 July 2013 in the RUH Boardroom, Oasis Centre, RUH Bath

| Signed | <br> |
|--------|------|------|------|------|------|------|------|
| Date   | <br> |

Author: Roxy Poultney, Membership & Governance Manager	Date: 21 June 2013
Document Approved by: Brian Stables, Chairman	Version:1.1
Agenda Item: 4	Page 10 of 10