

**Minutes of a Public meeting of the Trust Board held on
Wednesday 29th April 2015 at 10.45am
Research & Development Boardroom, Maternity Unit,
Level 7, Northwick Park Hospital**

Present

Mr Peter Worthington	Chairman
Jacqueline Docherty DBE	Chief Executive
Ms Patricia Williamson	Non-Executive Director
Professor David Taube	Non-Executive Director
Ms Stella Dutton	Non-Executive Director
Ms Jeanne Spinks	Non-Executive Director
Mr Simon Crawford	Chief Finance Officer
Dr Charles Cayley	Acting Medical Director
Mr Chris Pocklington	Chief Operating Officer
Mrs Carole Flowers	Chief Nurse

In Attendance

Mr Paul Stanton	Director of Human Resources
Mr Kevin Connolly	Chief Information Officer
Mr Paul Kingsmore	Director of Estates and Facilities
Mr Christopher Blake	Director of Commercial Development
Ms Tina Benson	Director of Operations
Mr David Weston	Head of Communications
Ms Yvonne Leese	Director of Community Services
Ms Fiona Coogan	Director of Infection Prevention and Control
Mr David James	Board Secretary

Apologies

Ms Caroline Corby	Non-Executive Director
Mr Martin West	Non-Executive Director

Item	Discussion	Action
1.	Welcome and Declarations of Interest	
1.1	Patricia Williamson informed the Board she had been commissioned to assist with Human Resource activities at the Hitchingbrooke Healthcare NHS Trust and that the TDA was aware of this assignment.	
2	Minutes of the previous Meeting(s), Ref. 15/04/01	
2.1	There were no amendments	
2.1.1	The minutes were then approved as a true and correct record and were	

	authorised for signature by the Chairmen.	
3	Matters Arising and Action Points,	
3.1	The action points were addressed and the updated list will go to the May 2015 Board	
4	Chairman's Report, Verbal	
4.1.	The Chairman welcomed Jacqueline Docherty as the new Chief Executive of the Trust.	
5	Chief Executives Report. Ref 15/04/02	
5.1	Jacqueline Docherty first thanked everyone for her warm welcome to the Trust. She stated one of the key themes she had noted is the number of staff vacancies and high use of bank and agency staff required to fill the gap. There will be a concerted effort over the next few weeks and months to address these issues.	
5.1.1	It was stated that it is vital for the organisation and the care of patients that the Trust is regarded as an organisation of choice to work for with a well supported substantive work force.	
5.1.2	It was announced that the senior executive team will be making Friday morning their regular time to do site walkabouts across the organisation.	
5.1.3	Discussions with commissioners continue in regard to the 2015/16 settlement but it was important that departments within the Trust should work within their means to ensure budget control.	
5.1.4	Jacqueline Docherty stated there was no deterioration in performance within the emergency pathway over Easter, but there was a slight dip during the subsequent holiday period.	
5.1.5	A number of tenders have been issued by commissioners including: Community cardiology; School immunisation programme and Ealing 'Health at Home' services. It is vital that the Trust reacted swiftly and within timeframe for these and subsequent tenders.	
5.1.6	Winter planning has commenced with commissioners with the aim of making the most of the Trust's bed capacity. This will be enhanced by an additional 63 bedded unit on the Northwick Park site later in 2015.	
5.1.7	It was noted that 35% of staff received flu vaccinations last winter, although the national target was 75%. Greater effort will be required next winter to hit the national target.	
5.1.8	Theatre two at Ealing Hospital was officially opened by Jacqueline Docherty in early April after a £750k makeover which will help to ensure high standards of patient care.	

<p>5.1.9</p> <p>5.1.10</p> <p>5.1.11</p> <p>5.1.12</p>	<p>It is hoped that the Ealing CCG will make a decision on the transition of the maternity services from Ealing Hospital in late May 2015 with a targeted closure date of Ealing Hospital maternity from end July, 2015</p> <p>A number of “International” days are planned for May 2015 including the ‘Day of the Midwife’ and ‘Hand Hygiene Day’ which will be opportunities for the Trust to mark the skills and roles required by present day midwives and nurses.</p> <p>Starlight Children’s Foundation visited Ealing Hospital recently for an afternoon of stories and entertainment, which was well received by staff and patients.</p> <p>Consultant Microbiologist Dr Guduru Gopal Rao and Consultant Neonatal Paediatrician Dr Richard Nicholl were recently featured in the Mail on Sunday discussing the benefits of screening all expectant mothers for the bacterial infection Group B Strep (GBS).</p> <p>The Board</p> <p>Noted the Report</p>	
	<p>Items for Approval</p>	
<p>6</p> <p>6.1</p> <p>6.1.1</p> <p>6.1.2</p>	<p>NHS Trust Development Authority Oversight Submission. Ref 15/04/03</p> <p>Kevin Connolly reported to the Board. He reported that there may be a format change in future to the submission, but TDA advice on this matter had yet to be received.</p> <p>A number of comments and suggestions were made to amend the text in the submission.</p> <p>Amendments were made in sections: one, four, six, eight, ten, thirteen and fourteen prior to submission to the TDA.</p> <p>The Board</p> <p>Agreed</p> <p>Amendments to sections: one, four, six, eight, ten, thirteen and fourteen.</p> <p>Approved the submission pending those changes</p>	
<p>7</p> <p>7.1</p>	<p>Merger Programme SRO Update Report April 2015, Ref 15/04/04</p> <p>Simon Crawford introduced the paper. It provided an update on progress since the March Board, including: The current status and remaining timeline of the process for completing the 2015/16 operating plan and</p>	

	<p>accompanying contract negotiations; A summary of the draft operating plan for review and endorsement to Trust Board for approval to submit to the NHS Trust Development Authority (TDA) on 14th May 2015; A brief review of anticipated areas of feedback on the operating plan; An update on the clinical integration programme and an update on the programme and risk register and issue log.</p> <p>7.1.1 As the deadline for the submission of final plans to the TDA is the 14th May 2015 the Trust Board was asked to approve Chairman’s action after further review by the FI&E Committee to sign off the final draft operating plan prior to submission.</p> <p>7.1.2 Simon Crawford reported that work is underway with the executive leadership to agree the most appropriate programme structure, governance arrangements and resource model to enable a transition from the existing merger and integration programmes established to bring the two legacy Trusts together.</p> <p>7.1.3 Stella Dutton asked for a timetable for completion of the clinical integration foreshadowed by the merger. It was agreed a paper addressing the issue would come back to the Board in May.</p> <p>7.1.4 Jacqueline Docherty observed that senior leadership in the Trust had to be empowered to get the integration work completed without director level sign off for every development.</p> <p>7.1.5 Jeanne Spinks asked why there was limited mention of recruitment and retention in the 2015/16 operating plan. She was advised that the issue was a factor in the divisional plans underpinning the overall plan.</p> <p>7.1.6 Patricia Williamson stated the annual operating plan needed to be accompanied by a positive narrative and to be completed at pace. The Board were in agreement and these actions were to be added to the papers recommendations.</p> <p>The Board</p> <p>Noted</p> <p>The contents of the report;</p> <p>That a draft operating plan, revised activity, finance and workforce schedules and self-assessment checklists were submitted to the TDA on 7th April and are currently being assessed;</p> <p>Milestone dates up to the final submission deadline for final operating plans on 14th May progress with contract negotiations;</p> <p>Areas where the operating plan may require further strengthening;</p> <p>That work is underway with the executive leadership to agree how to transition the programme of merger and integration activities into a single transformation programme and;</p> <p>Changes to the programme risks and issues.</p>	<p>SC</p>
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	<p>Reviewed the operating plan and</p> <p>Agreed Chairman's action for approval of the final plan, after further FI&E Committee scrutiny, to the TDA by 14th May 2015</p> <p>Supported</p> <p>The work be integration work be completed 'at pace'</p> <p>A positive annual plan narrative to be developed and communicated</p>	
	Items for Discussion	
7	Safety, Quality and Performance. Ref 15/04/05	
7.1	Chris Pocklington reported to the Board. In relation to A&E the 'All Types' target of 95% has been maintained at Ealing Hospital site during March 2015 and some improvement noted at Northwick Park Hospital moving from 85.85% in February 2015 to 86.81% March 2015.	
7.1.1	Christopher Pocklington reported that the performance team are reviewing gaps in target information in the Board report and these will be developed and agreed with the Executive team. Key gaps remain in activity information which should link back to the agreed baseline activity in the commissioning contracts for 2015/16 and TDA rating, which will be implemented this year as the Trust completes performance templates on monthly basis.	
7.1.2	Stella Dutton asked in regard to A&E why the trajectory for recovery for the Trust was not being maintained. Christopher Pocklington responded that the non-admitted cohorts' management needed to be improved and "check and challenge" meetings were being held with the A&E team to address this issue.	
7.1.3	Patricia Williamson asked if the changes that have occurred in the emergency pathway have been embedded. Christopher Pocklington responded that feedback from the A&E was positive and they were expressing pride in their achievements. Jacqueline Docherty added that the team needed to be supported and helped to develop resilience to cope with surges in demand.	
7.1.4	Jeanne Spinks asked why there was such a significant number of fixed term staff leaving the Trust. Simon Crawford and Paul Stanton advised that with the achievement of the merger staff employed for that purpose were now leaving.	
7.1.5	Patricia Williamson noted the Trust wide detail in the report, but asked if there were specific issues linked to sites within the Trust. Christopher Pocklington responded that whilst Ealing Hospital had done well to recover its position but further work was required to integrate Community services into the Trust. Charles Cayley added further work was required on bed use on the Central Middlesex site.	
7.1.6	Patricia Williamson noted the responses but requested, in future, greater	

<p>7.1.7</p> <p>7.1.8</p>	<p>site specific clarity within the report, which was noted.</p> <p>Yvonne Leese commented that Community services reporting needed to be improved to assist with Board and this work was in process. Care of the elderly posts were recognised as hard to fill, but the integrated nature of the new Trust with community and acute elements would be of benefit in terms of recruitment</p> <p>Jacqueline Docherty commented community locations could be used as training locations which would increase clinical involvement. Charles Cayley responded that there were trainees at the Central Middlesex site and if there was a transfer of beds from the Willesden and Denham community sites that would enhance the situation.</p> <p>The Board</p> <p>Noted the Report</p>	
<p>8</p> <p>8.1</p> <p>8.1.1</p> <p>8.1.2</p> <p>8.1.3</p> <p>8.1.4</p> <p>8.1.5</p>	<p>Director of Finance Report. Ref 15/04/06</p> <p>Simon Crawford advised the Board on the organisation's financial performance at Month 12 (March). The results show a control total deficit of (£55.9m) which is (£20.7m) adverse against budget, (£7.9m) when adjusted for non-receipt of merger income. The Board were advised the planned deficit meant the Trust has not met its statutory duty to 'break even'. Although a deficit plan was agreed, the deficit will have a detrimental impact on the Trust's performance ratings.</p> <p>Pay costs were overspent by £27.8m to the end of March 2015 with 478 more WTE employed than the budgeted establishment. Pay in March, when adjusted to exclude redundancy costs, showed an excess spend of £3m. High agency premiums in medical and nursing covering vacancies and additional nursing acuity costs were the main causes of the overspend.</p> <p>Bed capacity had been increased in December 2014 to support the emergency pathway, partially funded through winter resilience monies, however these beds still remain open. Agency staff costs represented 12.3% of the Trust's total pay bill, with bank expenditure accounting for 8.5%. Substantive vacancies are circa 1,375 WTE's against a budgeted establishment of 9,338 WTE.</p> <p>Non pay items were £3.2m overspent largely linked to activity. The CIP requirement for 2014/15 was £26.1m; Savings delivered to the end of March 2015 were £23.3m of which £15.8m were recurrent.</p> <p>Jacqueline Docherty stated the accounts for 2014/15 would have an effect on 2015/16 and therefore there had to be a commitment to hit the new financial targets for the 2015/16 as further slippage was not acceptable.</p> <p>The Board noted the summary report of the Finance, Investment & Estates Committee 27th April, 2015 meeting.</p>	

	<p>The Board:</p> <p>Noted:</p> <p>The Financial position at Month 12.</p> <p>The summary report of the Finance, Investment & Estates Committee 27th April, 2015</p>	
9	<p>Progress with Budget Setting 2015/16. Ref 15/04/07</p> <p>9.1 The paper was introduced by Simon Crawford. The paper described the budget setting process and progress to date, which was on-going, with the aim to complete in early May 2015. The paper proposed an Income and Expenditure deficit budget of £69m for 2015/16.</p> <p>9.1.1 The Board were asked to note the cash shortfall and the need for Public Dividend Capital support as well as the going concern implications if it is not received.</p> <p>9.1.2 David Taube asked how the staff were being involved in the budget setting process. Simon Crawford responded that there had been divisional meetings, team meetings and some limited ward involvement.</p> <p>9.1.3 Jacqueline Docherty observed that the focus at ward level should be quality and safety, but engagement would continue with staff forums and team meetings.</p> <p>The Board</p> <p>Noted:</p> <p>The budget setting process and progress to date.</p> <p>The current proposed Income and Expenditure deficit budget of £69m</p> <p>The draft headline capital plan for 2015/16.</p> <p>The cash shortfall and the need for PDC support and implications if not received.</p> <p>Agreed</p> <p>To receive a final update at the May Board that will reflect the annual plan submission to the TDA in May 2015</p>	
10	<p>Draft Quality Account 2014-2015 and Plan. Ref 15/04/08</p>	

<p>10.1</p> <p>10.1.1</p> <p>10.1.2</p>	<p>Carole Flowers introduced the paper. The Trust is required, by 30th June 2015, to publish the Quality Account for the year ending 31st March 2015.</p> <p>The paper set out an outline framework and timetable for the production of the 2014/15 Quality Account. A key element is to ensure appropriate and adequate engagement of all stakeholders, both internal and external to the Trust.</p> <p>It is proposed that the Trust continue to support the on-going priorities in 2015/16, which were: Reduce patient harm, Sustain and improve patient experience and support timely access to the emergency care pathway The Board acknowledged that a stakeholder event will take place at the end of April 2015 and the final version would come to the Board in June 2015. Carole Flowers welcomed comments both at the Board and after the meeting.</p> <p>The Board:</p> <p>Noted</p> <p>The first draft version of the Quality Account and</p> <p>The required timetable for completion and publication of the Quality Account.</p> <p>Agreed</p> <p>The proposed priorities for 2015/16</p> <p>Reduce patient harm, Sustain and improve patient experience and Support timely access to the emergency care pathway</p>	
<p>11</p> <p>11.1</p> <p>11.1.1</p> <p>11.1.2</p>	<p>NHS Trust Development Authority Assurance Framework for 2015/16. Ref 15/04/09</p> <p>Simon Crawford presented the report. An updated version of the TDA accountability framework was published on 2nd April 2015. The existing structure of the framework remains unchanged, comprising three elements: An oversight process – linked to the performance regime within which Trusts are placed; A development offer – comprising a range of support and development opportunities available to Board members and to the organisation as a whole and an approvals process for FT applications and capital investments</p> <p>Under the 2015/16 framework there are 5 levels and it is likely that LNWHHT will receive a rating of 2 although that is still to be confirmed. A rating of two would trigger a range of potential prescribed interventions and support.</p> <p>A rating of 2 by the TDA would probably lead to: Measures to mitigate financial risk and the forecast deficit; Workforce plans to enable the</p>	

<p>11.1.3</p>	<p>recruitment and retention ambitions within the operating plan, with a high priority to secure staffing for the modular wards being commissioned at Northwick Park; Proactive preparation for the forthcoming CQC/CIH inspection of the Ealing site and community services hosted by LNWHT; Detailed plans to realise CIP and transformation savings, together with rigorous mechanisms to performance manage delivery; Detailed plans to recover and maintain performance in A&E, RTT and cancer waiting times and measures to strengthen Board oversight</p> <p>It was noted by the Board that any escalation from the Trust rating of 2 could lead to a rating of 1 and special measures being taken by the TDA.</p> <p>The Board</p> <p>Noted;</p> <p>The contents of the report outlining the key elements of the TDA assurance framework for 2015/16</p> <p>That the Trust is likely to be allocated an escalation rating of 2 and the implications of this set out in section 3 of the Report</p> <p>Agreed</p> <p>To assess the support and development options that are available and formulate a request to the TDA that best meets the needs of the organisation</p>	
	<p>Items for Information</p>	
<p>12</p> <p>12.1</p> <p>12.1.1</p> <p>12.1.2</p> <p>12.1.3</p>	<p>Infection Prevention and Control Quarterly Report January – March 2015, Ref 15/04/10</p> <p>Fiona Coogan introduced the report related to the period January – March 2015 and it summarised the activities in infection prevention and control. Mandatory surveillance data was included and local performance benchmarking against the key national healthcare associated infection targets.</p> <p>At the end of quarter 4, Northwick Park/Central Middlesex had reported 27 cases against a target of 18 and Ealing reported 13 cases against a target of 8.</p> <p>Clostridium difficile objectives for 2015/16 have been set at no more than 37 cases.</p> <p>Priorities for quarter 1 of 2015/16 are: Implementation of the new Infection Control Nursing team structure following the consultation process; Review and development of the Core Policies as required by the Health and Social Care Act (2010); Sustaining performance against HCAI targets; Developing and progressing actions identified in Department of Health UK Five Year Antimicrobial Resistance Strategy 2013 – 2018 and the launch of the Catheter Passport</p>	

	<p>The Board</p> <p>Noted:</p> <p>The end of quarter 4 report and the summary relating to the number of Clostridium difficile infections and the negotiation with commissioners for a number to be reclassified as non-trajectory cases.</p>	
13	<p>Trust Seal Report Quarter 4, Ref 15/04/11</p> <p>13.1. The Trust's Standing Orders require that periodic reports are made to the Board detailing the use of the Trust's Seal. The Seal will generally be used for contracts in excess of the financial limits delegated to the Chief Executive under the Standing Financial Instructions, and for property matters, including disposals, acquisitions and leases.</p> <p>The Board</p> <p>Noted the Report</p>	
14	<p>Approved Sub Committee Minutes</p> <p>14.1 Finance Investment and Estates Committee Minutes of the meeting held on 23 February 2015</p> <p>The Board</p> <p>Noted the Minutes</p> <p>14.2 Clinical Performance & Patient Experience Committee Meeting held on 6th March 2015</p> <p>The Board</p> <p>Noted the Minutes</p> <p>14.3 Charitable Funds Committee Minutes of the Meetings held on 19th September 2014, 12th December 2014 and 13th March 2015 and Summaries</p> <p>The Board</p> <p>Noted the Minutes</p> <p>14.4 Audit , Governance & Risk Committee Minutes of meeting held on 26th November 2014 and 28th January 2015</p> <p>The Board</p> <p>Noted the Minutes</p>	

15	AOB	
13.1	There were None.	
16	Questions from the Public	
16.1	A member of the public reported that a porter on the Northwick Park site had refused to offer wheelchair support to a patient arriving via car. Stating that he was not allowed to do so. Paul Kingsmore responded this was not the case and the matter would be looked into and addressed.	PK
16.2	A member of the public suggested that the display boards in A&E showing potential wait times should also state there are alternative locations to receive care such as 'Walk In' centres. Tina Benson agreed to look into the possibility.	TB
16.3	A query was made over the extent of use by the public of hand wash gels. Observation by the questioner suggested that this was not extensive. Historically Fiona Coogan stated there had been an issue with the alcohol in the gel causing misuse, but Paul Kingsmore reported that signs were in place highlighting dispenser locations and their use seemed to be widespread.	
16.4	There was concern expressed at the delay in relocating Ealing Maternity Services which gave a negative impression for the whole site. Jacqueline Docherty stated patient safety was focus of the Trust in this matter.	
16.5	Finally a question was asked if the Trust were to make a response to the enquiry into Shaping a Healthier Future Chaired by Michael Mansfield QC in early May. Jacqueline Docherty replied that option was still being considered.	
	Date and time of next meeting	
	Wednesday, 27th May 2015 at 10.45am, Meeting Rooms 1& 2 ACAD Park Royal Management Suite, Central Middlesex Hospital	

Approved as a true and correct record.
Signed
----- Peter Worthington, Chairman
Date: