

WRIGHTINGTON, WIGAN AND LEIGH NHS FOUNDATION TRUST
MINUTES OF A MEETING OF THE BOARD OF DIRECTORS
HELD ON 28 MARCH 2018, 9.45AM
AT ROYAL ALBERT EDWARD INFIRMARY, WIGAN LANE, WIGAN, WN1 2NN

Members' attendance record:

		26/04/2017	31/05/2017	28/06/2017	26/07/2017	27/09/2017	25/10/2017	29/11/2017	20/12/2017	31/01/2018	28/02/2018	28/03/2018	2017-18 attendance
Mr R Armstrong	Chair	✓	✓	✓	✓	✓	A	✓	✓	✓	✓	✓	91%
Dr S Arya	Medical Director	✓	✓	✓	✓	✓	A	✓	✓	✓	✓	✓	91%
Mrs A Balson	Director of Workforce	✓	A	✓	✓	A	✓	✓	✓	✓	✓	✓	82%
Mr N Campbell	Non-Executive Director	✓	✓	✓	✓	A	✓	✓	✓	A	✓	✓	82%
Mrs M Fleming	Director of Operations & Performance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
Mr R Forster	Director of Finance and Informatics	✓	✓	✓	A	✓	✓	✓	✓	✓	✓	✓	91%
Mr A Foster	Chief Executive	✓	A	✓	✓	✓	✓	✓	✓	✓	✓	✓	91%
Mr M Guymmer	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	A	✓	✓	✓	91%
Mrs C Hudson	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
Mrs P Law	Director of Nursing	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
Mrs L Lobley	Non-Executive Director	---	---	---	---	---	---	---	---	---	---	✓	100%
Mr J Lloyd	Non-Executive Director	✓	A	✓	✓	✓	A	✓	A	✓	A	✓	64%
Mr R Mundon	Director of Strategy	A	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	91%
Mrs C Parker-Stubbs	Non-Executive Director	✓	✓	✓	A	✓	A	✓	✓	✓	✓	✓	82%
Mr N Turner	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	100%
Prof T Warne	Non-Executive Director	✓	A	✓	A	✓	✓	✓	✓	✓	✓	✓	82%

Key: ✓: attended | A: apologies sent | ✕: did not attend | --- not a member of the board at the date of the meeting

In attendance:

Miss C Alexander Director of Governance
Mr P Howard Company Secretary

61/18 Chairman and quorum

Mr R Armstrong took the chair and noted that due notice had been given to all directors and that a quorum was present. The meeting was declared duly convened and constituted.

62/18 Apologies for absence

Apologies for absence were received as shown in the members' attendance record, above.

63/18 Declarations of interest

There were no opening declarations of interest.

64/18 Minutes of the previous meeting

The minutes of the previous meeting held on 28 February 2018 were agreed as a true and accurate record.

65/18 Patient experience video

The Director of Nursing introduced the patient experience video, which was a continuation of the video shown at the previous meeting. She noted that the patient's story illustrated a poor discharge experience and the board acknowledged that there were numerous lessons to be learnt. Confirmation was provided that the patient's feedback had been shared with the ward concerned and, in response to a question from the Director of Operations and Performance, the Director of Nursing confirmed that the action plan arising from the original complaint was subject to monitoring through the Divisional Quality Executive Committee.

Mr N Campbell highlighted the importance of ensuring that staff feel supported in their learning and also noted that there were many examples of good practice which should also be drawn out when being shared with staff. In response, the Director of Nursing confirmed that the ward staff had played a key part in the development of the action plan.

In response to a question from the Director of Workforce, the Director of Nursing noted that the majority of learning points were specific to the Division of Surgery but confirmed that learning from complaints is shared across the organisation where relevant.

The Director of Finance reminded the board of the importance of response letters to patients and their relatives and the need to ensure the provision of considered, appropriate responses in all cases.

The board received the patient experience video and noted the content.

66/18 Chair and Chief Executive's opening remarks

The Chair informed the board that he had recently attended a training event run by NHS Providers to ensure that boards remain compassionate and effective. He noted that a number of areas of good practice had been shared during the event and would be reviewed for implementation within the foundation trust as appropriate.

The Chief Executive referred directors to his written report which had been circulated in advance of the meeting. He highlighted the performance challenges which had continued into March, with an in-month performance of 73% against the 4-hour wait standard. He noted the additional scrutiny from Greater Manchester which had concluded that the

deterioration in performance is a result of capacity, which he commented is a result of four main factors: (a) increased volumes of admitted elderly frail patients with high acuity, (b) a failure of demand management schemes, (c) lack of bed capacity in hospital and in the community, and (d) workforce shortages. Confirmation was provided that deteriorating performance had been experienced across the whole of the region and the Chief Executive advised that NHS England had required the submission of a Greater Manchester recovery plan by the end of the month. Locally, the improvement plan is predicated on an admission avoidance model for frail elderly patients, with increased step-up capacity, improved internal flow and support from experts provided by Greater Manchester and NHS Improvement.

The Chief Executive also noted that the results of the Unison consultative ballot on the package of assurances around the development of WWL Solutions had been received. The board would be considering its response during the private section of the meeting.

The board received the report and noted the content.

67/18 Reports of committees

The board received reports from the following meetings which had been held since the previous meeting of the board:

- (a) Quality and Safety Committee, held on 14 March 2018;
- (b) Workforce Committee, held on 14 March 2018;
- (c) Finance and Investment Committee, held on 20 March; and
- (d) Audit Committee, held on 21 March 2018

Prof T Warne opened by summarising the Quality and Safety Committee meeting, and drew the board's particular attention to the discussion around patients with a fractured neck of femur and the focus on ensuring timely access to theatres.

Mr J Lloyd summarised the Finance and Investment Committee meeting, which had focused on budget setting for the new financial year and at which the three divisions had provided a summary of their forecasts and assumptions as well as a discussion around the proposed 2018-19 budgets.

The Workforce Committee meeting was summarised by Mr N Campbell, who highlighted in particular the risk around a significant number of registered nurses aged 55 and above who are required to undertake revalidation with the Nursing and Midwifery Council in the next twelve months. The committee had acknowledged the risk that a number of these nurses may opt to retire rather than complete the revalidation and that, through the professional practice team, the foundation trust would be providing support to these staff to encourage revalidation.

A summary of the Audit Committee meeting was provided by Mrs C Hudson, and particular note was made of the outcome of the job planning review and the need for an updated recruitment and selection policy in light of a recent internal audit. The Director of Workforce confirmed that retrospective checks had been completed where issues had been identified within the internal audit report.

The board received the reports and noted the content.

68/18 Performance report as at 28 February 2018

The Director of Nursing opened by highlighting the fact that there had been no serious falls or grade 3 pressure ulcers during February, and that there had been a reduction in the number of serious incidents reported. She also highlighted the positive results from the real-time patient survey. With regard to lowlights, the Director of Nursing confirmed that a *C. difficile* infection had been reported in February 2018. With regard to falls, whilst the overall number had reduced by 19% in-year and the number of multiple fallers had reduced by 50%, the Director of Nursing clarified that this often meant that those patients who do fall experience more serious harm as a result of their underlying condition.

The Director of Operations and Performance provided a summary of the operational metrics and confirmed that the foundation trust remains above the national average for cancer and 18-week performance; reporting a top 10% performance and one of the highest in Greater Manchester. With regard to the Emergency Department 4-hour wait target, the Director of Operations and Performance noted that whilst there had been a strong start to the month, significant pressures across the unscheduled care system had ultimately impacted on this metric. She echoed the earlier comments of the Chief Executive around national performance against this standard and provided further commentary on the requirement for the devolved health economy in Greater Manchester to provide a recovery plan to NHS England.

With regard to the locality improvement plan, the Director of Operations and Performance advised that the focus within the foundation trust will be on improving patient flow and maintaining the already-high standards surrounding length of stay and delayed transfers of care, whilst concurrently undertaking a more strategic piece of work around capacity and demand. In response to a question from Mrs C Hudson, the Director of Operations and Performance confirmed that the organisation currently monitors readmissions and that the foundation trust is an outlier in terms of readmissions within 7 and 30 days of discharge. This could either indicate that the patient had been discharged too soon, or that there is insufficient care provision within the community.

The Director of Finance commented that it is encouraging that the regional debate was beginning to focus on capacity; particularly since the foundation trust currently has the lowest bed base in the region.

Mrs C Parker-Stubbs discussed a current documentary television series which shows the inner workings of an acute hospital. A recent episode had highlighted the national cancellation of elective activity and the associated impact on surgeons' workloads. The Director of Operations and Performance confirmed that, if surgeons are not required in theatre, they are required to deploy onto the wards or within the Emergency Department to provide additional support to unscheduled care teams.

The Chair summarised by emphasising that, whilst a system issue, the foundation trust's performance against the 4-hour wait performance should not be externalised and that efforts should continue to be made to improve. The need for the board to receive a plan in the near future, covering both internal actions and the need for support from other organisations, was acknowledged.

The board received the report and noted the content.

69/18 Financial position as at 28 February 2018

The Director of Finance presented a report which had been circulated with the agenda to update the board on the foundation trust's financial position as at 28 February 2018. He confirmed that a pre-impairment trading deficit of £2.7m was being reported, which represents a £1m adverse variance against plan. A year-to-date use of resources assessment of 3 was being reported in line with the plan, with an adverse variance of £988k against planned operating expenditure, a favourable year-to-date variance of £1.88m in respect of capital expenditure and a favourable variance of £5.7m in relation to the cash position.

The Director of Finance advised that, following discussion with NHS Improvement, some changes could be expected within the month 12 figures as a result of reaching agreement in respect of the trauma and orthopaedic tariff. He also paid particular tribute to the delivery of £10.8m of cost improvement plans, although the non-recurrent nature of the majority of the savings was acknowledged.

With regard to the contract for 2018-19, the Director of Finance confirmed that agreement had not been reached with Wigan Borough Clinical Commissioning Group and that, as a result, a formal contract dispute had been submitted.

A discussion was held on the potential for some activity to be re-categorised as type 2 activity and confirmation was provided that this is supported by the locality and is subject to discussion with NHS Improvement. The board offered its support to the proposal and noted the importance of ensuring a level playing field amongst provider organisations, whilst iterating the need to ensure that the highest standard of clinical care continues to be provided.

The board received the report and noted the content.

70/18 Care Quality Commission inspection report and NHS Improvement use of resources report

A report summarising the outcome of both the inspection by the Care Quality Commission and the use of resources assessment undertaken by NHS Improvement in November 2017 had been circulated with the agenda. Mrs C Hudson commented that the nature of the local press coverage had been disappointing, with no acknowledgement of the significant improvements that had been made. The board agreed that the reporting had not been balanced and the Chair agreed to write to the editor of the Wigan Observer to express the board's concerns. Mr N Turner suggested that a copy of the letter should also be sent to the Press Complaints Commission.

ACTION: Chair

The board expressed its collective thanks to all who were involved in the Care Quality Commission inspection and the NHS Improvement assessment, which he noted had coincided with a particularly busy period for the organisation. Confirmation was provided that the inspection results would be publicised.

The board received the report and noted the content.

71/18 Staff survey report

The Director of Workforce presented a report which had been circulated with the agenda to outline the results of both the national staff survey which had been completed in autumn 2017 and the local staff engagement pulse survey which had been conducted in January 2018. A strong performance was noted, and with some specific issues being progressed via the Inclusion and Diversity Steering Group.

The board received the report and noted the content.

72/18 Safe staffing report

The Director of Nursing presented the regular safe staffing report which had been circulated with the agenda and noted that more staff had joined the organisation than had left during February 2018. She confirmed that, in common with many other NHS organisations, nurse staffing remained the foundation trust's greatest risk on the risk register and advised that work is currently being undertaken to develop a new retention strategy. She also reminded the board of the intention to undertake international recruitment, with an initial aim of recruiting 100 nurses from India over the next 12 months.

Mrs C Hudson requested that a short narrative on nursing apprenticeships be included in future iterations of the report.

ACTION: Director of Nursing

Mrs C Parker-Stubbs suggested that, where there is little likelihood of Highfield Ward being de-escalated in the near future, this should be set up as a ward on the staffing software and reflected within the report.

The board received the report and noted the content.

73/18 Board assurance framework

The Company Secretary presented the board assurance framework and the board considered the scores proposed by the various committees, or by the executive team where the relevant committee had not met.

The board approved the assurance framework as presented.

74/18 Gender pay gap report

A report summarising the foundation trust's gender pay gap information, as required under the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017, had been circulated with the agenda. The Director of Workforce provided some context and reminded the board that the figures were not related to equal pay issues, with the foundation trust having systems and processes in place to address this. The report documented the difference between the average hourly pay for males and females in each of the prescribed salary quartiles.

In response to a question from the Director of Operations and Performance, the Director of Workforce acknowledged that the report did not contain any benchmarking information against other NHS organisations due to it not having been available at the time of writing. This would be included in future versions of the report.

The board received the report and noted the content.

75/18 Identification of key risks and successes

The board discussed and agreed the key successes as:

- strong cancer and 18-week referral-to-treatment performance
- reduction in hospital standardised mortality ratio figures
- results of the Care Quality Commission inspection and the NHS Improvement use of resources assessment
- the staff survey results
- the real-time patient survey results

The key risks were identified as:

- Emergency Department 4-hour wait target performance – whilst tactical measures are currently being put in place, the board will require additional information on the strategic measures required to be implemented either internally or across the locality
- uncertainty around the 2018-19 budget
- revalidation amongst nurses aged over 55
- safe staffing report, and the need to consider medical staffing and apprenticeship information

76/18 Questions from the public

Questions from the public were received.

77/18 Exclusion of the press and public

The board resolved that representatives of the press and other members of the public be excluded from the remainder of the meeting, having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.

78/18 Date, time and venue of next meeting

The next meeting of the Board of Directors will be held on 25 April 2018, 9.45am, at Royal Albert Edward Infirmary, Wigan Lane, Wigan, WN1 2NN.

Action log: Board of Directors

Date of meeting	Minute ref.	Item	Action required	Assigned to	Target date	Update
31 Jan 2018	11/18	NW Sector Partnership Business Case	Arrange for Programme Director to attend a future meeting.	Company Secretary	ASAP	In progress
28 Mar 2018	70/18	CQC inspection and NHSI assessment reports	Write to the Editor of the Wigan Observer, copied to the Press Complaints Commission, around the unbalanced nature of reporting on the CQC inspection report.	Chair	ASAP	
28 Mar 2018	72/18	Safe staffing report	Include a short narrative on nursing apprenticeships in future versions of the report.	Director of Nursing	25 Apr 2018	