

Chairpersons Report

Chairpersons Name	Robert Armstrong		
Committee Name	Trust Board		
Date of Meeting	22.02.17		
Name of Receiving Committee	Na.		
Date of Receiving Committee meeting	Na.		
Strategic Items for referral to Trust Board	Na.		
Items for escalation?	Yes	No x	If yes, to which Committee

Please detail up to 3 key successes or achievements discussed at the meeting				
1. The patient story and the learning that had been taken and implemented				
2. The achievement of national targets in January				
3. Good financial performance in M10				
4. The unanimous support for the Talksafe initiative to be progressed				
5. Significant assurance from MIAA around nurse revalidation				
6. The refinement of the Carter targets and the ongoing progress with this				
7. Appointment of Professor Kumar to President of ENT UK				
Details of the top three risks identified during the course of the meeting and initials of primary member of staff actioning				
1.	HSMR			AF
2.	Care home beds			AF
3.	CIP performance			RM
4.	Risk of initiative overload			AB / PL
5.	Cyber security			RF
6.	Staff engagement			AB
7.	Adult safeguarding			PL
Attendance at the meeting (please highlight):	Excellent (well attended)	Acceptable (some apologies) X	Unacceptable (quorate)	Unacceptable (not quorate)

Was the agenda fit for purpose and reflective of the Committees terms of reference?	Yes
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Narrative report of the key issues of the meeting
<p>A focus on the risks and opportunities facing WWL. The organisation is starting from a strong position in terms of quality and finances; this provides the springboard for transformation next year. The Board wanted to understand what is being done about HSMR and awaits the report from the Task group. The Board recognised the tremendous work being done in the hospital and with partners to deliver the best possible service to Wigan Citizens. The Board congratulated Prof Kumar on his appointment as President elect of ENT UK. The Board recognised the excellent work that has been achieved in delivering Q3 finances. The Board also recognised that with the exception of A&E, WWL delivered continuing strong performance in hitting national measures and targets.</p>

Chairman: Robert Armstrong

Chief Executive: Andrew Foster CBE

Reviewed December 2016, next review December 2017

Key outcomes from the reports taken at the meeting	
<ul style="list-style-type: none"> • Focus on potential Cyber Security threats flagged from Audit – IM&T to pick up the detail and risks. • Care Home reform and the impact on WWL and patient flow, Care home report to be concluded and report on the progress of the Borough wide Care home reform group to be presented at April Board • Agreement to roll out Talksafe as a WWL safety initiative 	
Agreed actions from the meeting	Name of primary lead for the actions
A verbal update on the mortality group work to be taken at the April Q&S	P Law / S Arya
Feedback from the Care Home Reform Board to be taken at the April Board	P Law / R Mundon
The report on care homes to be taken at the next meeting	M Fleming
Trend analysis to be taken at the next meeting	M Fleming
A year end Carter report to be taken at the April meeting	R Mundon
A report on business continuity plans in the event of cyber attack to be taken at IM&T Strategy Committee	R Forster

FT1116/17 CHAIRMANS OPENING REMARKS

R Armstrong welcomed all to the meeting.

FT1117/17 APOLOGIES

As noted above.

FT1118/17 DECLARATION OF INTERESTS

None were declared.

FT1119/17 PATIENT STORY

The Board received and noted the second part of Mrs Cunliffe's story. This documented the response from the Trust in relation to Mrs Cunliffe's concerns.

P Law noted that the Trust was now offering more meetings with patients / relatives to address concerns as it was often difficult to have effective discussions by letter. S Arya agreed and noted that meetings were often welcomed by patients and relatives.

A Foster noted that part of the concerns had been around the perception of his own behaviours when he had visited A&E. He had taken learning from this and, when visiting A&E or other areas, ensured that he acknowledged patients / relatives.

R Armstrong felt that the format of the patient story had been very effective and welcomed the chance to see both the complaint and the response. P Law advised that she would incorporate this into some of the patient stories moving forward.

FT1120/17 CHIEF EXECUTIVES REPORT AND MATTERS FOR BOARD TO NOTE

The CEO report was received and noted.

A Foster noted the coverage of the NHS in the media of late and the reports that it was in crisis. He was concerned that this could lead the public to believe the NHS was falling apart; however, he assured the Board that this was not the case. He advised that the vast proportion of WWL continued to perform very well and there were only a couple of areas that were under significant pressure. A&E was one of these areas but it was noted that the team continued to do their utmost to perform well under the circumstances and had been showing signs of recovery.

A Foster was pleased to report that Professor Nirmal Kumar had been appointed as President of ENT UK. This was a fantastic achievement for both Professor Kumar and the Trust and was the first time that a clinician from a District General Hospital had been appointed to such a position. The Board joined in sending their heartfelt congratulations to Professor Kumar.

FT1121/17 BUDGET PLANNING UPDATE



Trust Board 22feb -
Budget update.potx

R Forster gave a presentation to the Board which provided the final budget for 2017/18 and 2018/19. He noted that this had been fully scrutinised over the preceding months and had been submitted to NHSI on 23rd December.

The Trust had secured a 2 year block contract with the CCG which provided the Trust with the opportunity to make real transformational change. Savings achieved could be kept for re-investment.

The Executive team had commenced the work to develop transformational schemes which would ensure that WWL continued to deliver high quality services whilst reducing costs. There would be a robust governance process in place to monitor delivery.

R Armstrong thanked R Forster for a useful presentation.

FT1122/17 PERFORMANCE MONITORING

PERFORMANCE REPORT M10

P Law noted the following highlights / lowlights in relation to quality:

- 100% of patients providing feedback said that they were treated with compassion during their stay
- There had been no grade 3 or 4 pressure ulcers
- CDTs were up to 21 which was 2 above trajectory. However, lapses of care remained at 3
- There had been 3 StEIS incidents in month, one of which had been a serious fall
- Involvement in discharge was the only red on the patient experience table. A lot of work was being undertaken around this which was hoped to result in improvement

M Fleming noted the following highlights / lowlights in relation to performance:

- All national targets with the exception of A&E had been achieved in M10
- WWL performance against cancer targets remained strong
- Wrightington theatre effectiveness was at 73% despite the difficulties in the new barn theatres
- Infections and virus had closed 3 wards on the acute site and had also impacted on residential and nursing homes
- WWL failed the Q3 trajectory for A&E but was appealing to access the S&T funding on the basis of the increased demand for frail, elderly beds
- Length of stay had increased and the Trust had access to 15 fewer community beds

CHAIRS REPORT FROM Q&S COMMITTEE

T Warne advised that the Q&S Committee had worked through a very busy agenda. There had been an excellent presentation on CREWs which had given a glimpse into the future direction of information access. A wide discussion had taken place around staff capacity to consider this information. A pilot would be undertaken and reviewed. This would form part of a bigger piece of work to drive up quality on wards. The Committee had also considered mortality data which was not improving. The Committee had acknowledged that the Trust was not clear on actions and so it was agreed that a mortality group would be convened to look at this and report back to a future Committee. There had been a good report from R Mundon with regard to REMC and a verbal report from C Parker Stubbs on her recent Leadership Safety Walkabout. Staff had reported their concerns at the increasing acuity of patients and had also expressed concern that

they had not felt as involved in some decision making as they might. This concern was being addressed outside of the meeting.

R Armstrong queried when feedback from the mortality group could be expected. P Law advised that a verbal update would be taken to Q&S Committee in April.

R Armstrong queried whether WWL was involved in looking at community bed shortages in the Borough and when this would report back. P Law advised that a care homes reform board had been established which she and R Mundon would attend. R Armstrong noted that the Board would be interested to receive feedback from this at the April meeting.

ACTION: A verbal update on the mortality group work to be taken at the April Q&S
Feedback from the Care Home Reform Board to be taken at the April Board

FINANCE REPORT M10

R Forster noted that M10 had been a good month in terms of finances with a £200k profit achieved in month and a £3.1m surplus year to date. CIP performance was £1.9m behind plan and capital expenditure was £2.5m behind plan. The cash position had improved and was now above £10m. The use of resource rating was at 2 and the Trust continued to project achievement of the £3.7m surplus.

R Forster then provided some context to the Board around the overall NHS financial position. The North region was doing the best in the country and WWL was one of the better performers in the North region.

T Warne queried what impact a change of business rates would have on the Trust. R Forster advised that this would be minimal.

C Hudson congratulated all involved in securing this good budget position. She noted that J Lloyd had asked her to pick out some key messages from the F&I Committee meeting. The Committee had approved some expenditure in relation to the demolition of the Limes building at Leigh. This had been a long standing safety concern and it had been agreed that this needed to be addressed. The Committee also noted its continued concerns around CIP delivery.

R Armstrong noted that CIP delivery was a concern for the Board but there was hope that the plans for next year would deliver. He was pleased to note the agreement in relation to the demolition of the Limes as this had been a long standing issue for the Trust.

CHAIRS REPORT FROM F&I COMMITTEE

The report was received and noted.

BAF REVIEW

The Board undertook a full review of the BAF. The Board noted the scores recommended by the relevant sub committees and supported these.

Jointly with the CCG, develop a locality-based transformational, integrated care and finance plan, including a 3-year financial plan for the Trust which meets Carter and sustainability fund requirements and is focused on patient benefits by Q3

R Mundon noted that a plan was in place along with the Carter arrangements and contract. This now needed to be delivered. It was agreed to keep the score at 12.

Establish a Vanguard AAC testing the viability of a workable hospital chain/group considering governance implications, and considering the technology to develop a digital clinical enterprise. Implement findings based on workability, affordability, effectiveness and value for money

R Forster advised that the final invoice had now been raised for outstanding Vanguard money from Salford. On this basis, he suggested that the risk was reduced to $2 \times 2 = 4$. This was supported by the Board.

FT1123/17 MINUTES OF THE MEETING HELD ON 25.01.17

The minutes were agreed to be an accurate record.

FT1124/17 ACTION LOG

Action updates were received and noted.

The Board had received an interim report on care homes but this was being checked for accuracy and would return in full to the next meeting.

Trend analysis would be taken at the March Board.

It was noted that the ToR for the new Shared Services meeting had been agreed by WWL and the other Trusts involved.

ACTION: The report on care homes to be taken at the next meeting

Trend analysis to be taken at the next meeting

FT1125/17 CARTER

The report was received and noted.

R Armstrong noted that the new format of the report was welcome. He felt that the Board would be interested to see a year-end Carter report which summarised the progress that had been made and the achievements. R Mundon agreed that this report would be prepared for the April Board.

ACTION: A year end Carter report to be taken at the April meeting

FT1126/17 TALKSAFE

C Greenhalgh attended the Board meeting to seek support for the continuation of the project.

She advised that a paper had been taken to Q&S Committee and the Committee had agreed to the principle of continuing this initiative whilst also acknowledging that this was a significant

undertaking. A more detailed paper had been requested to go to Board to seek support in continuing to develop the programme.

The Board noted their overall support for the continuation of the project but consideration needed to be given to the logistics of training, given the pressures on staff.

FT1127/17 ITEMS RECEIVED FOR INFORMATION

- F&I Committee – *These had been received and noted.*
- Audit Committee – *C Hudson advised that the Audit Committee meeting had covered a number of issues. The Committee had been pleased to note significant assurance around nurse revalidation. There had also been a good audit report on supplier contract management. A deep dive into the IT disposal policy had revealed a number of issues around the policy itself and, more widely, cyber security. The IT disposal policy had since been re-written and the team were working to respond to the issues raised by MIAA in terms of cyber security. The report on cyber security had been referred to the IM&T Strategy Committee for further scrutiny. The Trust had also received limited assurance with regard to Adult Safeguarding. The pressures on the team were significant and there were issues around training and IT systems that needed to be considered. The report had been forwarded to the Q&S Committee for further scrutiny.*

The Board felt it would be useful for the IM&T Strategy Committee to take a report on the continuity plans in place in the event of a cyber attack to gain assurance that these were in place.

- Q&S Committee – *T Warne advised that the Committee had received an interesting report on sharps which indicated that a number of the injuries were caused by third parties. A resolution to adopt a 'Name and Train' approach had been agreed.*
- Workforce Committee – *N Campbell noted that WWL was a well led organisation with good values that were well embedded. The Workforce Committee had received a staff story from 2 members of the A&E team which had revealed the pressures staff were under. He further noted that there had been a dip in staff engagement for the first time in a number of years. Whilst this was not a significant cause for concern, it was felt that the Board needed to be alert to this. Recruitment, retention and temporary staffing were also discussed by the Committee. Whilst there continued to be issues around this, the Committee had been assured that this wasn't impacting directly on patient care.*
- Safer Staffing report – *the report was received and noted. P Law noted that, whilst there were issues around recruitment, the Board could be assured by the report that all areas were safely staffed for the majority of the time.*

ACTION: **A report on business continuity plans in the event of cyber attack to be taken at IM&T Strategy Committee**

FT1128/17 QUESTIONS FROM THE PUBLIC

P Carroll noted the £14m cost improvement programme for the next year and queried how this would be achieved without impacting on beds and the ability to provide services. A Foster advised that the locality plan for Wigan was looking at investment in the community which would keep people out of hospital. If this was successful then there would be the ability to reduce the

number of beds. However, there were a number of schemes that would form the delivery of the cost savings.

R Armstrong emphasised that beds at WWL would not be reduced unless it was absolutely safe to do so.

FT1129/17 KEY SUCCESSES / RISKS

Key successes were agreed to be:

- The patient story and the learning that had been taken and implemented
- The achievement of national targets in January
- Good financial performance in M10
- The unanimous support for the Talksafe initiative to be progressed
- Significant assurance from MIAA around nurse revalidation
- The refinement of the Carter targets and the ongoing progress with this
- Appointment of Professor Kumar to President of ENT UK

Key risks were agreed to be:

- HSMR
- Care home beds
- CIP performance
- Risk of initiative overload
- Cyber security
- Staff engagement
- Adult safeguarding

FT1130/17 BOARD EFFECTIVENESS FEEDBACK

Not undertaken this time.

FT1131/17 EXCLUSION OF THE PUBLIC

Resolved:

Those representatives of the press and other members of the public are 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.

FT1132/17 DATE OF NEXT MEETING

29th March 2017, 9.45am, Room 3 of the Medical Education Centre.