

**WRIGHTINGTON, WIGAN AND LEIGH NHS FOUNDATION TRUST**  
**MINUTES OF A MEETING OF THE BOARD OF DIRECTORS**  
**HELD ON 31 JANUARY 2018, 11.00AM**  
**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
Mr R Armstrong	Chair	✓	✓	✓	✓	✓	A	✓	✓	✓		
Dr S Arya	Medical Director	✓	✓	✓	✓	✓	A	✓	✓	✓		
Mrs A Balson	Director of Workforce	✓	A	✓	✓	A	✓	✓	✓	✓		
Mr N Campbell	Non-Executive Director	✓	✓	✓	✓	A	✓	✓	✓	A		
Mrs M Fleming	Director of Operations and Performance	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Mr R Forster	Director of Finance & Informatics	✓	✓	✓	A	✓	✓	✓	✓	✓		
Mr A Foster	Chief Executive	✓	A	✓	✓	✓	✓	✓	✓	✓		
Mr M Guymer	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	A	✓		
Mrs C Hudson	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Mrs P Law	Director of Nursing	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Mr J Lloyd	Non-Executive Director	✓	A	✓	✓	✓	A	✓	A	✓		
Mr R Mundon	Director of Strategy	A	✓	✓	✓	✓	✓	✓	✓	✓		
Mrs C Parker-Stubbs	Non-Executive Director	✓	✓	✓	A	✓	A	✓	✓	✓		
Mr N Turner	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Prof T Warne	Non-Executive Director	✓	A	✓	A	✓	✓	✓	✓	✓		

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    Associate Director of Governance and Assurance  
Mrs E Bradbury     Associate Non-Executive Director  
Mr P Howard        Trust Secretary  
Dr A Twist           Divisional Medical Director (Surgery)

**1/18 Chairman and quorum**

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.

**2/18 Apologies for absence**

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

**3/18 Declarations of interest**

There were no opening declarations of interest.

**4/18 Minutes of the previous meeting**

The minutes of the previous meeting held on 20 December 2017 were agreed as a true and accurate record.

**5/18 Patient experience video**

The Director of Nursing introduced the patient experience video, which emphasised the importance of getting the basics right.

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

**6/18 Chair and Chief Executive's opening remarks**

The Chief Executive referred directors to his written report, which had been circulated in advance of the meeting. He highlighted the performance challenges in early January 2018 and noted that this would be discussed in more detail as part of the performance report item later in the agenda.

The Chief Executive also noted that there had been three positive external reviews of the foundation trust during the month: a review of the Sterile Services and Decontamination Unit, a report on ophthalmology by the Getting It Right First Time team and an unannounced inspection of maternity services by Wigan Borough Clinical Commissioning Group.

The board received the report and noted the content.

**7/18 Reports of committees**

The board noted that the Finance and Investment Committee had met immediately prior to the board meeting, and J Lloyd provided a verbal overview of the business transacted. He highlighted the fact that the foundation trust had achieved £1.35m of sustainability and transformation funding for quarter 3 of the 2017-18 financial year, which represents 70% of the available funds. The remaining 30% had not been achieved as a result of A&E performance. He also highlighted the fact that the committee had acknowledged the pressure under which staff continue to operate, and the fact that a future deterioration in 18-week referral-to-treatment performance is anticipated as a result of a national directive to suspend elective cases and focus on emergency activity.

The board received a report and the draft minutes of the Quality and Safety Committee meeting on 10 January 2018. T Warne summarised the content and particular note was made of the development of a ward and department accreditation programme using a multi-

professional, inter-disciplinary approach. Confirmation was also provided that three detailed internal audits had been considered by the Committee at the request of the Audit Committee. The Committee found that action plans had been devised and had begun to be implemented, and the outcomes from the medical devices audit would also be considered by the WWL Solutions working group.

The Workforce Committee had not met during the month of January 2018, but the Chair had met with the Director of Workforce and had provided a report to summarise these discussions. The Director of Workforce noted that two items had been escalated to the Workforce Committee by the Audit Committee and confirmed that a full update would be provided at its next meeting in March 2018, but that significant progress had already been made in addressing the identified issues.

An ad-hoc meeting of the IM&T Committee had also been held during January 2018, and C Parker-Stubbs provided a verbal summary of the discussions. The primary purpose of the meeting had been to review the current position with the Hospital Information System ("HIS") within the Accident and Emergency Department.

## **8/18 Performance report**

The Chair noted that the performance report had also been discussed at the meeting of the Finance and Investment Committee immediately before the meeting, and that as a result only the key issues would be discussed by the board.

The Director of Nursing opened by highlighting the fact that the number of C. difficile cases attributable to lapses in care had remained at 3, and noted that robust investigations into such incidents are undertaken and overseen by the Quality and Safety Committee. She also noted that there had been no grade 3 or 4 pressure ulcers for 12 months. With regard to the never events reported in December 2017, clarification was provided that a request to de-escalate one of the incidents had been submitted to the Commissioners.

The Director of Operations and Performance provided a summary of the operational metrics. She noted the recent movement of the Minor Injuries Unit to be collocated with the Primary Care Centre and cited an example of where this had resulted in 30% of patients being streamed away from the Accident and Emergency Department on one particular date. She also highlighted the fact that the foundation trust had remained within the top 10% of all organisations for cancer diagnostics.

Detailed update reports on scheduled and unscheduled care had also been circulated with the agenda, and the Chair commended the quality of the reports.

The board received the reports and noted the content.

## **9/18 Financial position as at 31 December 2017**

The Director of Finance presented a report which had been circulated with the agenda. He confirmed that the foundation trust is reporting a pre-impairment year-to-date trading deficit of £2.3m, which represents a £110k adverse variance against plan. He noted that the cash position remained strong, with a year-to-date position of £10.6m against a plan of £4.2m and that the Use of Resources rating had been assessed as a 3, which was the planned in-month and year-to-date position. Confirmation was provided that the control total for quarter

3 had been met, which had resulted in the receipt of £1.35m of sustainability and transformation funding.

The need for the wider system to address the issue of demand was acknowledged, whilst at the same time ensuring that the foundation trust operates as efficiently as possible.

The board received the report and noted the content.

#### **10/18 Healthier Wigan Partnership Alliance Agreement**

The Director of Strategy and Planning presented a report which had been circulated with the agenda. He confirmed that the paper was a common document that is being provided to all boards and governing bodies in the locality to seek agreement of an Alliance Agreement. He confirmed that the agreement was based on a national template and that, whilst not legally binding, it would demonstrate a commitment to working with other partners across the borough. Clarification was provided that the agreement would not impact on the sovereignty of individual organisations and, in response to a question from the Chair, confirmation was provided that the agreement would not influence day-to-day management of the organisation.

The board was content in principle but noted the fact there were some commercially-sensitive elements to the discussion, and therefore agreed to continue discussions once representatives of the press and members of the public had been excluded.

#### **11/18 North West Sector Partnership business case**

The Director of Strategy and Planning presented a report which had been circulated with the agenda to seek agreement of the business case for new models of care as appended to the report. He noted that the document was intended to describe how Healthier Together would be implemented in the local area. In response to a question from the Chair, the Director of Strategy and Planning confirmed that no changes to services, other than those described in the document, were proposed at the present time.

In response to a comment from J Lloyd around surgical trainees, the Director of Workforce advised that modelling would take place in the next few weeks and that a mix of operational and HR teams would agree the operational model.

The Chief Executive commented that the document was not particularly a business case, but rather a summary of the intended approach. He suggested the need to write to the authors and remind them about the unresolved issues that had been identified and which remain to be addressed.

#### **ACTION: Chief Executive**

The Director of Workforce highlighted the fact that the document does not address any revenue implications and focuses mainly on the consultant workforce, without much consideration of other matters, such as nursing or estates and facilities.

T Warne queried the impact of the proposed approach on 7-day services and expressed his concern around patients potentially facing an additional ambulance journey.

The Director of Finance noted that, with regard to financial matters, the financial assurance statement that has already been agreed would be the prime document and that this would need to be reflected in any correspondence to the business case authors.

C Hudson commented that the document did not address any requirement for public consultation and requested that an additional paper on the surgical element be brought for further discussion at an appropriate point in time.

The Chair summarised by noting that the original issues raised with the report authors had not been addressed, that the matter of ambulance journeys remained unresolved, and the matter of reciprocal flows also remaining outstanding. He also supported the view of the Director of Finance that the financial information from the Finance Executive Group would be used as the agreed position.

Following discussion, the board received the report and noted the content. It expressed its general support for the principles of better surgery and better outcomes, but required clarification on other areas which would be shared in correspondence to the authors. The board also suggested that the Programme Director be invited to a future meeting to discuss the matter in more detail.

**ACTION: Trust Secretary (to schedule)**

#### **12/18 Safe staffing report**

The Director of Nursing presented the monthly safe staffing report and highlighted the fact that the fill rate for registered nurses had decreased from November to December. She also noted that an escalation ward had been opened during the period, which is not reflected in the report as there is no formal staffing establishment allocated to the ward.

The Director of Nursing noted that 36 newly qualified nurses would commence employment in March 2018. She also reminded the board that she had recently written to retired nurses as reported at the previous meeting, and advised that seven nurses had agreed to return and undertake shifts. In response to a comment from C Hudson, the Director of Nursing advised that a focused piece of work is currently being undertaken around nursing staff leavers and the Director of Workforce clarified that the exit interview questionnaire had recently been revised to assist in better understanding reasons for leaving.

M Guymer commented that the report had provided the board with a real understanding of pressures over the last six months, and noted the need for the report to reflect the use of escalation wards to better understand the position.

The board received the report and noted the content.

#### **13/18 Board assurance framework**

The Trust 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.

Particular note was made of the new risks that had been proposed by the Quality and Safety Committee, and confirmation was provided that there had been no changes proposed by the Finance and Investment Committee to its risks when it had considered them immediately prior to the meeting.

The board approved the assurance framework as presented.

#### **14/18 Items for information**

The board received the following items for information and noted the content:

- (a) Mortality update for Q3 2017-18
- (b) 'Flu update

#### **15/18 Identification of key successes and risks**

The board discussed and agreed the key successes as:

- The example of 30% deflections from the Accident and Emergency Department
- Quality of the unscheduled care report
- Remaining in the top 10% for cancer diagnostics
- Achievement of the Q3 2017-18 control total
- Quality of the mortality update

The key risks were identified as:

- Service transformation projects not delivering the intended benefits
- Pressure on beds and staff
- Whilst the rollback of HIS was a success, there is a risk associated with the reinstatement of the system
- Financial position for Q4 2017-18

#### **16/18 Questions from the public**

Questions from the public were received.

#### **17/18 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.

#### **18/18 Date, time and venue of next meeting**

The next meeting of the Board of Directors will be held on 28 February 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	Write to authors and set out the unresolved issues and those matters highlighted by the board	Chief Executive	ASAP	<b>Action complete.</b>
31 Jan 2018	11/18	NW Sector Partnership Business Case	Arrange for Programme Director to attend a future meeting.	Trust Secretary	ASAP	In progress.