

WRIGHTINGTON, WIGAN AND LEIGH NHS FOUNDATION TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

HELD ON 30 JANUARY 2019, 12.00NOON

AT MACDONALD KILHEY COURT HOTEL, CHORLEY ROAD, STANDISH, WIGAN, WN1 2XN

Members' attendance record:

		25/04/2018	30/05/2018	27/06/2018	25/07/2018	26/09/2018	31/10/2018	28/11/2018	19/12/2018	30/01/2019	27/02/2019	27/03/2019
Mr R Armstrong	Chair (in the Chair)	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Dr S Arya	Medical Director	✓	✓	✓	✓	✓	A	✓	✓	✓		
Mrs A Balson	Director of Workforce	✓	A	✓	✓	✓	✓	✓	✓	✓		
Mr N Campbell	Non-Executive Director	✓	✓	✓	A	---	---	---	---	---		
Dr S Elliot	Non-Executive Director	✓	✓	✓	✓	✓	A	✓	✓	A		
Mrs M Fleming	Chief Operating Officer	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Mr R Forster	Director of Finance and Informatics	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Mr A Foster	Chief Executive	✓	✓	✓	✓	✓	✓	✓	A	✓		
Mr M Guymmer	Non-Executive Director	✓	✓	A	✓	✓	✓	✓	✓	✓		
Mr I Haythornthwaite	Non-Executive Director	✓	✓	✓	✓	✓	A	✓	✓	✓		
Mrs C Hudson	Non-Executive Director	✓	✓	✓	✓	✓	✓	---	---	---		
Mrs L Loble	Non-Executive Director	✓	✓	✓	A	✓	✓	✓	✓	✓		
Mrs P Law	Director of Nursing	A	✓	✓	✓	✓	✓	✓	✓	✓		
Mr R Mundon	Director of Strategy	✓	✓	✓	✓	✓	✓	A	✓	✓		
Prof T Warne	Non-Executive Director	✓	✓	✓	✓	✓	✓	✓	✓	✓		

In attendance:

Dr A Abbasi Divisional Medical Director (Medicine)
Miss C Alexander Director of Governance
Mrs N Guymmer Deputy Company Secretary
Mr P Howard Company Secretary and Data Protection Officer

2 members of the public and 1 governor were also in attendance.

1/19 Chair 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. He therefore declared the meeting duly convened and constituted.

2/19 Apologies for absence

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

3/19 Declarations of interest

No directors declared an interest in any of the items of business to be transacted.

4/19 Minutes of the previous meeting

The minutes of the previous meeting held on 19 December 2018 were **APPROVED** as a true and accurate record. Note was made of the fact that all actions shown on the action log had been completed.

5/19 Patient experience video

The Director of Nursing introduced the monthly patient experience video, which this month introduced the board to the experiences of an elderly gentleman and the associated discharge process, as read by his brother.

In discussing the patient's experience, the board noted that the matters described within the story were not an isolated occurrence and the Chief Operating Officer agreed to use the video at the next multi-agency discharge event to promote discussion and to highlight the issues with the senior leadership team across the borough.

ACTION: Chief Operating Officer

Particular note was made of the need to challenge nursing and residential homes that refuse to allow patients to return, and the board noted the need for community services to be available to patients in residential accommodation.

The Director of Nursing commented that significant work is being undertaken by the local council with homes in the area to educate the staff and to ensure that residential clients are able to remain in their own homes as much as possible.

The Chair also noted the lessons that could be learned within the foundation trust and the Chief Operating Officer commented that she had found the video to be powerful and noted that the patient's story had encouraged her to give appropriate challenge to partner organisations in future scenarios. It was agreed that it would be beneficial for the video to be shown at the beginning of the next Secondary Care Transformation Board, as representatives from all partner organisations would be in attendance.

ACTION: Company Secretary (to schedule)

The board received the patient story and noted the content.

6/19 Chair and Chief Executive's report

The Chief Executive presented a report which had been circulated in advance of the meeting to update the board on the foundation trust's in-month performance against the key operational and quality metrics. He noted that performance against the majority of

operational metrics remained strong but highlighted the impact that sustained levels of high activity have on staff. As a result, monthly staff meetings had been reinstated in order to ensure that the organisation is responsive to any concerns and confirmation was provided that best practice from across Greater Manchester is being reviewed to identify further ways of supporting staff.

Dr Abbasi noted that the most effective way of reducing the burden on staff would be to avoid the need for escalation through improvements in patient flow, however the board acknowledged that such improvements are not entirely within the foundation trust's gift and that significant work with partner organisations is ongoing to try and reduce demand on the organisation. The Chief Executive advised that he had attended an accountability teleconference in the previous week and confirmed that the levels of demand had been identified as an area of challenge. He also reminded the board that the foundation trust's request for additional capital funding to extend the Accident and Emergency Department and to increase the hospital's bed base, whilst supported by Greater Manchester, had ultimately been unsuccessful. The Chair noted that this investment would have been the single most beneficial way of improving patient flow and the board confirmed that it remained committed to pursuing such investment in the future.

The Chief Executive also informed the board that, in response to the request that had been submitted, the Care Quality Commission had agreed to defer the forthcoming inspection of the foundation trust. The rationale for seeking this deferral surrounded the fact that the organisation is currently focused on progressing the transfer of Wigan-based community services from Bridgewater Community Healthcare NHS Foundation Trust and also due to the impending retirement of the Director of Nursing. With regard to this latter point, the Chief Executive confirmed that recruitment for a successor, under the revised job title of Chief Nurse, had commenced and that Mrs Law had agreed to being employed on a part-time basis to provide continuity until the new Chief Nurse has taken up post.

The Chair took the opportunity to update the board on the two non-executive director vacancies that had arisen as a result of the unexpected deaths of the previous post holders. He noted that the Council of Governors had supported the appointment of a non-executive director with community services experience if the proposed transfer of community services takes place. As no decision on this will be taken until around March 2019, the Chair was minded to suggest that the Council of Governors considers appointing an interim non-executive director for a short period of time. The board endorsed this approach and therefore the Chair agreed to formally suggest it to the Council of Governors through its Nomination and Remuneration Committee.

ACTION: Chair

The board received the report and noted the content.

7/19 Performance report

The Director of Nursing opened by summarising the highlights and lowlights of the clinical metrics; echoing the Chief Executive's earlier comments around the infection control metrics and drawing the board's attention to the low level of avoidable harms. With regard to the lowlights within the report, she drew the board's particular attention to the

ward closures that had been necessary as a result of norovirus and flu. She assured the board that a review of infection control practices had been undertaken to ensure that ward closures are avoided wherever possible.

The Chief Operating Officer highlighted the foundation trust's performance against the 18-week referral-to-treatment standard, however noted that it is becoming increasingly difficult to balance scheduled and unscheduled care demand. In terms of lowlights, the Chief Operating Officer drew the board's attention to the higher number of cancellations which had mainly been on the acute site and had partly been driven by ward closures and through patient choice.

With regard to unscheduled care performance, the board noted that there had been no significant changes since the previous board meeting and noted that all other quality standards, such as delayed transfers of care and the number of stranded and super stranded patients, perform well which indicates that the issues being experienced are primarily demand-driven.

The Medical Director delivered a short presentation to outline the foundation trust's performance in relation to mortality and the board acknowledged the importance of dying patients being given the opportunity to die with dignity in the home environment if they wish to do so. Prof Warne commented that the Quality and Safety Committee had recently considered the issue of end of life care and had been impressed by the way that the matter is being addressed. He particularly commended the notion of ensuring prescribing is relevant and appropriate, rather than a response to a situation.

The board received the performance report and noted the content.

8/19 Reports of Committee Chairs

The board received verbal reports from the following committees which had met since the previous meeting of the board:

- (a) Quality and Safety Committee, held on 16 January 2019; and
- (b) Finance and Performance Committee, held immediately before the meeting.

Prof Warne provided an overview of the Quality and Safety Committee and noted the development of a quality dashboard in the Division of Medicine, which provided assurance around performance against a number of quality metrics and allowed a number of quality initiatives to be shared more widely. The Committee had, however, noted the reporting of three incidents to the Strategic Executive Information System since its last meeting; one of which had been categorised as a never event. He confirmed that a comprehensive review of all never events had been undertaken and the committee had noted the intention to seek an external review to ensure that the organisation can identify lessons learned and share these across the organisation. An amber delivery confidence against the board assurance framework for patients was reported.

With regard to the Finance and Performance Committee meeting, Mr Guymer noted that the committee had reviewed a number of items but reminded the board that a number of significant topics had also been discussed by the board at its away day earlier in the week. The committee meeting had therefore built on the discussions held at the away

day and noted the requirement for draft financial plans to be submitted to the regulator in the near future. An amber-green delivery confidence for the board assurance framework relating to performance was reported, and Mr Guymer clarified that this was due to the fact that the vast majority of operational and financial metrics within the weighted dashboard were performing well, with only the Accident and Emergency 4-hour standard significantly away from the target. He also noted that there was a pathway to the achievement of the control total by year-end.

The committee had also noted the requirement for the foundation trust to determine whether or not to accept the proposed control total. In considering its recommendation to the board on this issue, the committee had noted that there was not yet sufficient information available to allow it to formulate a firm recommendation either way. The committee had therefore agreed that its recommendation to the board would be that authority to accept the control total or otherwise should be delegated to the Director of Finance, who would be able to take a holistic view once all information is available. The board considered this recommendation and **APPROVED** the delegation of authority to accept the proposed control total or otherwise to the Director of Finance.

The board received and noted the verbal updates.

9/19 Financial position as at 31 December 2018

The Director of Finance presented a report which had been circulated with the agenda to summarise the foundation trust's financial position as at 31 December 2018. He confirmed that the foundation trust had delivered its intended Q3 performance and therefore had received the Provider Sustainability Funding of £1.7m for the financial position and an additional 30% for its Accident and Emergency performance. The board extended its thanks to all who have contributed to the achievement of these results.

The Director of Finance cautioned that the final quarter of the year would be challenging to deliver but advised that work is ongoing with partner organisations to address this at an early stage. The potential for a commercial opportunity on the Leigh Infirmary site was also noted.

The board received the report and noted the content.

10/19 Board assurance framework

The board had previously received updates from the Committee Chairs on the board assurance frameworks for patients and performance.

With regard to the board assurance framework relating to partnerships, the Chair noted the delay in progressing the theatre pilot with Bolton NHS Foundation Trust and recent feedback on wider initiatives across Greater Manchester. An amber-red delivery confidence was therefore reported.

Mrs Loblely noted that there had been little change to the board assurance framework relating to people since the previous meeting of the board, and noted that the delivery confidence remained at amber-red. This was due to continued recruitment issues around the nursing workforce and the ongoing issues with staff morale as a result of the industrial relations issues during the previous year. The Chair noted that the Workforce Committee

would be reviewing matters in more detail at its next meeting and noted the importance of the committee seeking assurances on behalf of the board.

The board **APPROVED** the board assurance frameworks as presented.

11/19 Safe staffing report

The Director of Nursing presented the regular safe staffing report which provides a summary of staffing levels on all in-patient wards across the foundation trust. The report also included exception reports surrounding staffing levels, related incidents and red flags which are triangulated with a range of quality indicators.

The Director of Nursing noted that a good fill level was reported but caveated this by noting the fact that there had been a number of areas escalated over the previous month which served to reduce staffing, as staff are necessarily redeployed to cover the escalated areas. She noted that four areas of the organisation are currently piloting a safe care module on the electronic roster system which reviews patient acuity and turnover to determine how many registered nurses are required in order to provide safe care to the patients.

The Director of Workforce noted the impact the operating with continued escalation has on staff and the reluctance of staff to accept additional shifts because they do not want to work across different areas. The Chair noted the issues and requested that the assurances surrounding staff resilience be sought through the Workforce Committee.

ACTION: Workforce Committee

The board received the report and noted the content.

12/19 European Union exit preparations

The Chief Operating Officer presented a report which had been circulated with the agenda for information. The board acknowledged the publication of recent operational readiness guidance from the Department of Health and Social Care and noted that the Chief Operating Officer had been appointed as the foundation trust's Senior Responsible Officer for preparing for the impact of a "no deal" exit of the United Kingdom from the European Union. The board also noted the work that is ongoing within the organisation and across the borough, as outlined within the report.

The Chair requested that the report be shared with the Council of Governors for information.

ACTION: Company Secretary

The board received the report and noted the content.

13/19 Identification of key risks and successes/opportunities

The board identified the key risks as follows:

- Lack of capital funding to provide additional beds and to expand the Accident and Emergency Department, noting that it is intended to continue to lobby on this issue and to avoid any requirement to undertake a further bed review;
- The challenging Q4 financial position, noting that work is ongoing to address this; and
- Never events, noting that the board is aware of the incidents and the matter is being monitored through the Quality and Safety Committee.

The board identified the key successes/opportunities as follows:

- The ability to influence end of life care and the ability to ensure that patients are able to die with dignity in the home environment where appropriate;
- The continued reduction in the foundation trust's Summary Hospital-level Mortality Indicator and Hospital Standardised Mortality Ratio; and
- The prospect of receiving Provider Sustainability Funding and the ability to determine whether to accept the proposed control total.

14/19 Questions from the public

There were no questions from the public.

15/19 Resolution to exclude 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.

16/19 Date, time and venue of next meeting

The next meeting of the Board of Directors will be held on 27 February 2019, 12 noon, at Royal Albert Edward Infirmary, Wigan Lane, Wigan, WN1 2NN.

Action log

Date of meeting	Minute ref.	Item	Action required	Assigned to	Target date	Update
30 Jan 2019	5/19	Patient experience video	Raise the issues in the video at the next multi-agency discharge event.	Chief Operating Officer	ASAP	Shared with the borough's senior leadership team. Action complete.
30 Jan 2019	5/19	Patient experience video	Include video on the agenda of the next Secondary Care Transformation Board.	Company Secretary	March 2019	Added to the agenda. Action complete.
30 Jan 2019	6/19	Chair and Chief Executive's report	Liaise with the Council of Governors around the potential use of an interim non-executive director	Chair	ASAP	Nominations and Remuneration Committee meeting held on 11 Feb 2019. Action complete.
30 Jan 2019	11/19	Safe staffing report	Seek assurances around the issue of staff resilience in times of prolonged escalation	Workforce Committee Chair (Mrs Lobley)	March	To be added to the next committee agenda.
30 Jan 2019	12/19	European Union exit preparations	Share the report with the Council of Governors for information	Company Secretary	ASAP	Paper shared. Action complete.