

MINUTES OF THE PUBLIC MEETING
OF THE BOARD OF DIRECTORS
HELD ON
TUESDAY, 28 JANUARY 2014
AT 10.00 AM
IN THE BOARD ROOM
THE JAMES COOK UNIVERSITY HOSPITAL
MARTON ROAD
MIDDLESBROUGH

PRESENT:

Ms D Jenkins	-	Trust Chairman
Professor P Hart	-	Chief Executive
Ms R Holt	-	Dir of Nursing and Quality Assurance
Mr D Kirby	-	Vice Chairman
Mr H Lang	-	Non-Executive Director
Mrs J Moulton	-	Dir of Service Strategy & Infrastructure
Mr C Newton	-	Director of Finance
Mrs M Rutter	-	Non-Executive Director
Mr J Smith	-	Non-Executive Director
Councillor B Thompson	-	Non-Executive Director
Ms H Wallace	-	Non-Executive Director
Mrs S Watson	-	Director of Operational Services
Professor R Wilson	-	Deputy Chief Executive/Medical Director

IN ATTENDANCE:

Mr Barry	-	member of public
Mrs M Blakey	-	Corporate Affairs Manager
Mrs J Dewar	-	Director of IT & Health Records
Mrs R Jamieson-Gaffney	-	Clinical Matron for item 4
Dr C Gibson	-	member of public
Mr C Harrison	-	Director of Human Resources
Ms G Hunt	-	Dep Dir of Nursing – shadowing Ms Holt
Ms K Ireland	-	member of public
Mrs W Larry	-	Chairman of Staff Side UNISON
Ms K Linker	-	shadowing Mrs Larry
Ms K McCabe	-	member of public
Mrs A Marksby	-	Communications Lead
Mrs C Parnell	-	Company Secretary/Exec Asst to CEO
Miss B Peak	-	for item 4
Ms A Peterken	-	member of public
Ms M Gannon	-	Practice Placement Facilitator attending with the following student nurses:
	-	Ms J Agar
	-	Ms L Auckland

- Ms E Armstrong
- Ms C Bodocs
- Ms S Cassidy
- Ms E Dalby
- Ms K Duncan
- Ms V Henshaw
- Ms D Lake
- Ms S Mains
- Ms S Wormald

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from:

- Dr S Baxter - Chairman, SMSF

2 **DECLARATIONS OF INTEREST**

Councillor Thompson expressed an interest on any issues relating to Middlesbrough Borough Council.

3 **QUESTIONS FROM THE PUBLIC**

Mrs Watson responded to Mr Barry's enquiry and confirmed that the trust has appropriate plans in place to deal with any adverse weather conditions and that it also had back-up generator facilities.

Mrs Moulton updated the Board that in relation to the query on car parking from Mr Barry and the planned railway station halt at JCUH which is due to come in to operation later this year, should help in easing the car parking problems.

4 **PATIENT EXPERIENCE STORY**

Ms Jenkins welcomed Miss Peak who had personally requested to attend today's meeting in order to highlight to the Board her concerns following her late mother's experience whilst an inpatient at the Carter Bequest Hospital.

Miss Peak stated that her late mother was 90 years old; suffering from Alzheimer's and that for the past 15 years she had cared for her mother at home. On the day in question, and due to the deteriorating health of her mother, staff tried to resuscitate Miss Peak's mother, but sadly she died. Miss Peak wanted to understand why the family was not advised in advance that staff would perform such a procedure and why a Do Not Attempt Resuscitation order (DNAR) had not been considered and the option discussed with the family. She felt devastated that the resuscitation attempt option was the last memory she had of her mother and asked what processes/procedures the trust was going to put in place to ensure other families did not go through the same experience.

On behalf of the Board, Professor Wilson apologised profusely and said that he was aware of the circumstances of this patient's care. He added that at that time there was no agreed protocol in place in terms of resuscitation and in fact this patient had been expected to go home. He believed that this had led to the decision to attempt resuscitation but he fully accepted that this was an individual decision and must be informed by patient/carer choice. He pointed out that since this incident; the relevant

staff had been briefed and made aware that clear communication between staff and relatives was vital in this area.

In conclusion, Mrs Jamieson-Gaffney said that as part of the learning/lessons learnt, a number of nurse practitioners had been trained to ensure relatives are made aware of the issues on resuscitation.

Ms Jenkins thanked Miss Peak for attending and stated that the Board took seriously the concerns raised by patients/relatives and that lessons had been learnt as a result of this issue being raised. Furthermore, she reminded colleagues Ms Holt had been asked to produce an annual report on actions taken as a result of the patient experience stories received at Board.

Decision: 2014/Jan/No 1

The Board:

- (i) **Noted that lessons had been learnt as a result of this issue.**

5 MINUTES OF THE PREVIOUS MEETING HELD ON 17 DECEMBER 2013

The minutes of the meeting held on 17 December 2013 were accepted as an accurate record of proceedings.

Decision: 2014/Jan/No 2

The Board:

- (i) **Approved the minutes of the meeting held on 17 December 2013.**

6 MATTERS ARISING/ACTIONS

There were no matters arising or outstanding actions.

7 CHIEF EXECUTIVE'S REPORT

Professor Hart went through the report which contained information on a number of issues namely:

(i) Quality – CQC visits

The trust had received a number of CQC visits throughout the organisation over the last few weeks which are part of their normal inspection regime and not as a result of any concerns. They have now visited all premises across the trust including JCUH, FHN and community premises.

The trust is awaiting receipt of the final report but initial feedback from inspectors had been positive.

(ii) Winter pressures and publication of accident and emergency data

Highlighted the progress made in terms of improving patient pathways since last year particularly in relation to the number of emergency admissions.

(iii) Trust flu campaign

Delighted that the trust's response to uptake of the flu vaccination is 71% which has resulted in the organisation being shortlisted for a national award. This is a great public health triumph because this not only supports staff and their families but at the same time, protects patients. Board members issued a challenge to the organisation to make a final effort to reach the target.

- (iv) NHS staff survey 2013 – detailed report of the results will be shared with the Board when the information is available.
- (v) Star awards – as per report.
- (vi) Awards and achievements - as per report.

Councillor Thompson briefed the Board that Dr Davis had received the Mayor's Award for his work associated with the South Cleveland Heart Fund (SCHF). In addition, the Mayor had identified SCHF as the Council's charity for the year. The Board expressed its thanks and appreciation for this generous gesture.

Decision: 2014/Jan/No 3

The Board:

- (i) **Noted the report.**

8 QUALITY OF CARE AND PATIENT SAFETY

8.1 PERFORMANCE REPORT – DECEMBER 2013

Mrs Watson presented the performance report for December 2013 and went through the information in detail.

She highlighted the following key issues:-

- (i) There were 10 cases of C difficile during December 2013. The accumulated position was 47 for the year to date which as previously minuted, is above the year end target.
- (ii) The 4 hour A&E target was achieved at 95.6%.
- (iii) Pleased to report that the trust met all the cancer targets in November with the exception of the 62 day first definitive treatment target. Indicative figures for December showed that all the cancer targets would be met with a significant improvement in compliance against the 62 day first definitive treatment target achieving compliance of all the cancer targets at the end of Quarter 3.
- (iv) The trust was compliant with the 18 week targets for the incomplete and non-admitted pathways in December. As planned, the trust failed to meet the admitted target in December with a compliance of 87.2%.
- (v) As the trust had failed three consecutive quarters for the 18 week admitted pathways target, Monitor has automatically instigated an investigation into the trust's compliance with its licence.
- (vi) Community information dataset (CIDs) data completeness level had been achieved and the trust will remain compliant with Monitor requirements.

Referring to winter pressures, Mrs Watson drew the Board's attention to the graph relating to the public health observatory and was pleased that in comparison with its north east colleagues, this trust had performed well.

Mrs Watson stated that despite the fact that the trust had a very busy year in terms of performance, an enormous amount had been achieved and standards met, through the hard work of staff.

Mr Harrison highlighted the key issues in terms of HR particularly around sickness absence (short and longer terms); appraisal rates and mandatory training.

Mrs Watson responded to questions on 62 day compliance targets being met and her predictions as to whether this target would be delivered in January; and provided an explanation on how CQUIN funding/assumptions were made.

Referring to data validation in terms of mandatory training, Mr Harrison said that further analysis was required but it would appear that the trust's exhaustive list of mandatory training requirements was not comparative with other organisations and therefore, would need to be reviewed.

On behalf of the Board, Ms Jenkins asked that the Board's thanks and appreciation be conveyed to all staff.

Decision: 2014/Jan/No 4

The Board:

- (i) **Noted the report and the challenges facing the trust.**

9 BUSINESS SUSTAINABILITY

9.1 FINANCIAL POSITION FOR THE PERIOD ENDING 31 DECEMBER 2013

Mr Newton went through the report in detail and drew the Board's attention to the following key issues:-

- (i) The trust was reporting a deficit of £7.460m. This is despite strong performance on income which is £7.531m ahead of plan.
- (ii) CIP delivery shows 70% of the year to date target delivered, which translates into a shortfall of £4,660m.
- (iii) The current operating performance was contributing to a £9.1m shortfall of cash against plan.
- (iv) Capital and PBL were currently satisfactory.
- (v) Under trust's current close management approach, a programme of actions to reduce the deficit was underway with the objective of improving the financial risk rating to a minimum of an unrounded 2.

Mr Newton explained that there were a number of movements:

- activity levels with Tees being ahead of the plan, with activity levels increasing.
- Specialist commissioning had fallen from £6.3m to £5.7m.

Mr Newton responded to questions from Mr Lang in relation to forecast projections/savings/increasing activity levels and opportunities.

In conclusion, Ms Jenkins said that it was not just important to bring the current financial year back towards plan within the next three months but equally important to build a robust plan for next year which will be even more financially challenging.

Decision: 2014/Jan/No 5

The Board:

- (i) **Noted the report.**
- (ii) **Looked forward to receiving the financial plan for 2014/2015 at the earliest opportunity.**

9.2 MONITOR PLANNING GUIDANCE 2014/2015

Mrs Moulton said that the purpose of the Monitor Planning Guidance 2014/2015 report was to identify the actions needed to complete the five year plan required by Monitor to ensure the sustainability of the trust based on clinical, operational and financial basis.

The report provided information on:-

- (i) Context and timetable
- (ii) Two year operational plan
- (iii) Strategic plan

Page 5 set out the suggested milestones for further information to be brought back to the Board in 2014:-

- (a) Self-assessment – February
- (b) Initial market analysis – March
- (c) Market analysis and strategic options – April
- (d) Initial plans and Review of sustainability declaration – May
- (e) Sign off and submission - June

Mrs Moulton said that a further report would be presented to the Board in February 2014.

Action: Mrs Moulton

9.3 RESPONSE TO CONSULTATION ON PROPOSAL TO CHANGE THE ORGANISATION'S NAME

Mrs Parnell said that the aim of the paper was to report back on the responses following the consultation which took place during October – December 2013 to change the organisation's name.

She drew the Board's attention to page 3 Summary of responses received. It was noted the responses were largely split 50:50 between those in favour of the change and those against but even those in favour of the name change raised concerns about the associated costs bearing in mind the financial position facing the trust and the wider health and social care economy.

Based on the responses received, the general opinion was that the proposal to change the name highlighted concerns on cost, geography and whether "healthcare" was necessary since this was apparent from the title "NHS".

The Board discussed at length the responses received. Professor Hart reminded colleagues that the initial reasoning behind the proposals was to have a name which reflected all services currently delivered by the trust (including JCUH, FHN, and community services). After careful consideration the Board agreed that although it was desirable to change the name, in light of the financial climate it would reconsider the issue at a later date.

Mrs Marksby said that it was important that in every aspect of our work, we should encourage colleagues to bear in mind that the trust includes all its hospitals and community sites as one integrated organisation. It was agreed that every effort would be made to reflect the spread of services of the trust in all communications.

**Decision: 2014/Jan/No
The Board:**

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- (i) **Noted the report.**
 - (ii) **Deferred the change of organisation's name until a later date.**
 - (iii) **Agreed to reflect the breadth of services in all communications.**

10 GOVERNANCE

10.1 REVISED TERMS OF REFERENCE FOR THE QUALITY ASSURANCE COMMITTEE AND ITS SUB GROUPS (10.1a – 10.d)

Following a revision of the trust's committee structure, the Integrated Governance Committee will now be known as the Quality Assurance Committee. As a result of this, the Board was asked to approve the terms of reference for the Quality Assurance Committee and the proposed terms of reference for its sub groups, namely Clinical Standards sub group; Patient Safety sub group; Patient Experience sub group; and Workforce sub group is presented for information purposes only.

Ms Wallace assured the Board that having reviewed the terms of reference for the QAC and its sub groups, the current Integrated Governance Committee was assured that the proposed terms of reference meets the requirements of a good governance structure.

Discussion ensued as to whether it was appropriate for deputies to attend the QAC/sub group meetings. In the event, it was agreed that deputies would be permitted, as an exception, but that all members of the QAC/sub groups would be reminded about their accountability and the expectation that they should attend at least 50% of meetings. In addition, it was agreed that each "member" takes responsibility in terms of actions agreed against their name rather than the "deputy". Ms Wallace agreed to strengthen the wording in the terms of reference.

Action: Ms Wallace

Mr Kirby welcomed the revised terms of reference which linked well with the work of the trust's Audit Committee to ensure there was no duplication.

Mr Harrison responded to Mr Kirby's question and confirmed that there was a work plan/recruitment process in terms of ensuring the trust's processes were effective.

Ms Wallace agreed to amend the information relating to Data Quality Lead to Mrs Watson (and not Mrs Dewar).

Action: Ms Wallace

Decision: 2014/Jan/No

The Board:

- (i) **Approved the terms of reference of the QAC and its sub groups with the condition that the wording is strengthened regarding attendance of deputies.**

11 FOR INFORMATION WITHOUT DISCUSSION

11.1 MINUTES OF THE INTEGRATED GOVERNANCE COMMITTEE (IGC) MEETING HELD ON 11 DECEMBER 2013

Ms Wallace presented the minutes of the IGC meeting held on 11 December 2013 (it was noted that there was a typographical error in the title of the report which should have read 11.12.2013 (and not 11.12.2014)).

Ms Wallace reported that Maternity services intend to go for a CNST Level 3 in February 2014, which the trust believes it is capable of achieving. If successful, this will make a financial gain for the organisation in terms of reduced contributions.

Mr Newton was pleased to report the trust had received a reduction of £250,000 in NHSLA premiums demonstrating confidence in the trust's low level of risk, as confirmed by the recent grading of the trust in band 6 by the CQD.

Professor Hart said that it was important that Monitor were kept updated on these key important factors in terms of quality of care and service delivery.

Decision: 2014/Jan/No

The Board:

(i) **Noted the minutes.**

11.2 **MINUTES OF THE AUDIT COMMITTEE MEETING HELD ON 28 NOVEMBER 2013**

Mr Kirby presented the minutes of the Audit Committee meeting held on 28 November 2013. There were no issues drawn to the attention of the Board.

Decision: 2014/Jan/No

The Board:

(i) **Noted the minutes.**

11.3 **EQUALITY AND DIVERSITY MONITORING REPORTS**

Mr Harrison stated that the purpose of the Equality and Diversity Monitoring reports (including appendices 1 and 2) was to fulfil the legislative requirement under the Equality Act 2010 (Specific Duties Regulations 2011) that the trust publishes information to demonstrate compliance at least annually.

Mr Harrison said that the trust had carried out the monitoring requirements of the Public Sector Equality Duty and provided assurance that the trust is meeting the legislative requirements and noted that this information would now be published via the trust's Internet site.

Decision: 2014/Jan/No

The Board:

(i) **Approved the Equality and Diversity Monitoring Reports for 31 January 2012 and 31 January 2013.**

12 **ANY OTHER BUSINESS**

(i) Councillor Thompson expressed thanks to trust colleagues who had been actively involved in lottery bids for some funding together with Middlesbrough Council. Outcome of the bidding process is not likely to be known until later this year.

(ii) On behalf of the Board, Ms Jenkins thanked Mrs Larry who was retiring later this year and therefore, stepping down as Chairman of Staff Side UNISON. The Board expressed its thanks and appreciation to Mrs Larry and wished her every well for the future.

It was noted that Mrs Linker would be attending as Chairman of Staff Side UNISON with effect from February 2014.

There being no further business, the meeting closed at 11.20 am

13 DATE, TIME AND LOCATION OF NEXT MEETING

The next public meeting of the Board of Directors will take place on Tuesday, 25 February 2014 at 10.00 am in the Board Room, The James Cook University Hospital, Marton Road, Middlesbrough.

TO CONSIDER A RESOLUTION 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 OF WHICH WOULD BE PREJUDICIAL TO THE PUBLIC INTEREST (Section 1 (2) PUBLIC BODIES) (ADMISSION TO MEETINGS) ACT 1960.

Signed: _____
Chairman

Date: _____