

The draft minutes of the meeting of the Trust Board of Whittington Health held in public at 1400hrs on Wednesday 5th April 2017 in the Whittington Education Centre

Present:	Greg Battle	Medical Director, Integrated Care
	Stephen Bloomer	Chief Finance Officer
	Philippa Davies	Director of Nursing and Patient Experience
	Carol Gillen	Chief Operating Officer
	Deborah Harris-Ugbomah	Non-Executive Director
	Siobhan Harrington	Director of Strategy/Deputy Chief Executive
	Steve Hitchins	Chairman
	Richard Jennings	Medical Director
	Simon Pleydell	Chief Executive
	Tony Rice	Non-Executive Director
	Anu Singh	Non-Executive Director
	Yua Haw Yoe	Non-Executive Director
In attendance:	Norma French	Director of Workforce
	Kate Green	Minute Taker
	Lynne Spencer	Director of Communications & Corporate Affairs

Patient Story

Steve Hitchins welcomed Amali Lokugamage, Consultant in Obstetrics & Gynaecology, and Logan Van Lessen, Consultant Midwife, in attendance to present 'Footprints of Birth', a film which detailed women's experiences of giving birth at Whittington Health. The film had been nominated for a national award.

Amali, who informed the Board she had an interest in human rights, introduced the background to the making of the film, which was about seeing services through the eyes of the service user. She spoke about the FREDA principles (fairness, respect, equality, dignity and autonomy) and explained that the making of the film had unveiled the importance of some aspects of care which might not have been immediately apparent to staff. She went on to explain the process of making the film and the techniques which had been adopted; these had included the posing of an open question about their experiences to women who had given birth and the invitation to submit clips for inclusion in the final film.

Amali then spoke about reactions to the documentary, concentrating initially on responses received from the primary audience, which was medical students and midwifery staff. Many had voiced the opinion that this was a video which should be viewed by all healthcare professionals, and even for those who had felt criticised or challenged by the content, there was an awareness that it had provided a platform for reflection and change.

The Board then viewed a brief segment of the film, which concentrated on the experiences of a woman who had needed an emergency caesarean section and had also suffered a serious asthma attack during the process which had necessitated her admission to intensive care. Following this the Board was shown the Trust's response, during which Logan detailed the steps taken to improve care on the unit including the introduction of a distinct teaching tool. Key factors included the importance of communication, behaviour, and environment. Board members were welcome to view the entire documentary at a later date.

Following the screening of the film at a recent meeting of the Patient Experience Committee, Head of Nursing for Integrated Medicine Alison Kett had suggested a similar project might be replicated for the Care of Older People service.

17/42 Declaration of Conflicts of Interest

42.01 No member of the Board declared any conflicts of interest in the business scheduled for discussion at that afternoon's Board meeting.

17/43 Apologies and welcome

43.01 Steve Hitchins welcomed everyone to the meeting. Apologies for absence were received from David Holt and Janet Burgess.

17/44 Minutes, Matters Arising & Action Log

44.01 The following amendments were made to the minutes of the Trust Board meeting held on 1st March:

- Helen Gordon and not Norma French had been present at the meeting
- (30.03) The local authority had not been represented at the meeting referred to.

44.02 Other than these, the minutes of the Trust Board meeting held on 1st March were approved, and there were no matters arising other than those already scheduled for discussion on the agenda.

44.03 Referring to item 29.02 on the action log, Richard Jennings informed Board members that draft terms of reference for the external review had been drawn up and were with the commissioners and the mental health Trust for comment. He would continue to keep the Board informed of progress.

44.04 All remaining actions on the log were scheduled future Board meetings.

17/45 Chairman's Report

45.01 Steve Hitchins was pleased to report that the Community Forum had launched the art competition – prizes were to be awarded at an open day on 16th September. This date coincided with the Open House London event, and Steve asked Board members to consider whether this might also be a good date to hold the Trust's AGM. Carol Gillen was leading on this.

45.02 Steve had attended the AHP conference in March – this had been an extremely positive event, and the AHPs were now working on their future strategy.

45.03 Janet Burgess had worked with Trust staff the previous week on the autism awareness week, and Steve extended thanks to her on behalf of the Board for the contribution she had made.

45.04 Steve also made reference to his recent meeting with the Vice-Chancellor of Middlesex University, with which the Trust was fostering positive relations.

45.05 Steve concluded his report by thanking all those Directors who had participated in the 'tea trolley' rota, saying that he would be writing to Sarah Hayes and Beverleigh Senior who had instigated this welcome initiative.

17/46 Chief Executive's Report

46.01 Simon Pleydell began his report by informing the Board that Sarah Hayes had been appointed Deputy Director of Nursing & Patient Experience. There was therefore a vacancy for the position of Clinical Director for the Patient Access, Prevention &

Planned Care ICSU, and the process for recruitment to this post will be progressed in the forthcoming months.

46.02 The launch of the annual awards ceremony for staff will take place in the next few weeks. This event was to take place on 29th June at the Royal College of Surgeons in Lincoln's Inn Fields, and there would be a broad range of categories for which staff could be nominated. Simon was clear that he wished to see a good cross-section of staff represented on the day. Tony Rice had approved the expenditure for the event, which was to be funded from the charitable trust.

46.03 Looking at performance, Simon informed the Board that a second case of MRSA bacteraemia had been reported in February, which was a disappointment, although performance on C. Difficile remained good, with 6 cases reported against a target of no more than 17 for the year. Performance in other key areas would be covered by Carol Gillen in her performance dashboard report.

46.04 Useful dialogue had continued with the perspective partners with the Trust on the Strategic Estates Partnership, and informal submissions were now expected. The final decision would come to the Board for formal approval in June, but further debate was planned at a Board seminar before then. The Naylor Review of NHS property and estates had recently been published, and did not appear to contradict any aspect of the Trust's thinking around its estates strategy.

46.05 Simon confirmed that it had not yet been possible to open the LUTS clinic to new patients, and the Trust had been quite clear throughout that this would not happen until there was a cogent plan for the future of the service. This plan needed to cover workforce sustainability, and Simon informed the Board that a Specialist Registrar who was due to become a consultant in June next year was giving consideration to specialising in that area of service. The Trust was due to go back to the Joint Overview & Scrutiny Committee in June, and Simon highlighted that there was a need for the other organisations who shared responsibility for the LUTS service to attend that meeting. A meeting with service users, at which the commissioners would be present, would take place the following Tuesday. Richard Jennings stressed that it was in the interests of patient safety not to take on new patients until future plans were agreed. It was noted that a recent Guardian article and interview with Professor Malone-Lee portrayed the LUTS clinic very much as a last resort for patients. There had been considerable media interest, and it was noted that Professor Malone-Lee continued to keep the Trust informed of any contribution he made to this.

46.06 On behalf of the Board, Simon expressed his congratulations to the following staff:

- Winner of the March staff excellence award Louise Restrict
- Winners of the UCLP postgraduate medical education awards for innovative integrated education Celia Bielawski, Pauline Leonard and Rhodri Edwards
- UCLP postgraduate trainer of the year Caroline Fertleman.

17/47 Serious Incident Report

47.01 Philippa Davies informed the Board that seven serious incidents had been declared during February, taking the total to 56 incidents declared since 1st April 2016. These seven comprised the following:

- sub optimal care of a deteriorating patient
- a discharged patient presenting at a neighbouring hospital having suffered a stroke
- an unexpected death from community-acquired influenza

- the absconson of a detained teenage patient from a ward
- delay in following up a CT scan leading to a delayed diagnosis
- a fall resulting in a fractured neck of femur
- an unexpected admission to NICU.

47.02 The National Reporting & Learning System (NRLS) had recently released a table which showed Whittington Health to be in the top 25% of reporters, thus demonstrating a significant improvement in reporting. Asked how the Trust compared a high number of incidents reported with areas of potential concern, Richard replied that all incidents were scrutinised and it was possible, by separating out those which caused harm, to distinguish between a healthy culture and unsafe practice. Currently, he felt the Trust was doing well, and attributed much of the credit for this to the patient safety (formerly junior doctors') forum which had contributed so much to encouraging a culture of reporting. He added that he was especially pleased that there had been an increase in two consecutive reports, thus demonstrating continuous improvement.

47.03 Richard Jennings informed the Board that the Trust had recently received a Prevention of Future Deaths Report from the Coroner. This concerned a patient with suspected cancer, for whom the plan had been transfer them to another hospital. The Coroner felt the process of transfer to have been unnecessarily slow and cumbersome and, whilst there was no implication that this had contributed to the patient's death, it was clearly a potential safety issue which required resolution. Richard acknowledged that the system of transferring patients from one hospital to another could be complicated and that staff were well aware of the problem, which was by no means unique to Whittington Health.

47.04 Deborah asked if Richard was comfortable with the Trust's processes for patient transfers. Richard said that the processes that work best are those in which there are well-defined patient pathways to access centralised services, such as transfers to the Bart's Heart Centre or the UCLH hyper-acute stroke unit (HASU). Richard explained that patient transfers could be more difficult when they were not underpinned by the established infrastructure of centralised services.

47.05 Richard provided an example to illustrate his view of the complex and sometimes convoluted NHS environment in which such transfers occur and the potential weaknesses in this process, in which clinical staff are often obliged to make multiple phone calls before transfers can be successfully effected. As an example, to offer the Board assurance that staff could learn from difficulties and improve processes, Richard cited the instance in which he and Philippa Davies had issued clarifications to clinical staff about the neurosurgical trauma pathway.

17/48 Safe Staffing Report

48.01 Introducing the safe staffing report for February, Philippa stated that she would take this as read, and invited questions. Steve Hitchins began by asking how the data contained within the report reconciled with restrictions on expenditure, to which Philippa replied that all the appropriate approvals processes remained in place for both nursing and AHP staff. Norma French added that she had recently commissioned an audit on agency controls.

17/49 National Guidance on Learning from Deaths

49.01 Philippa Davies and Julie Andrews had attended the launch of this guidance, which Richard Jennings pointed out was already familiar to the Board since much of it was contained within the quarterly patient safety reports he submitted. Both the Trust Development Authority and now NHS Improvement required Trusts to review every in-patient death (plus deaths of those who had died within 30 days of discharge) and this

guidance placed a welcome emphasis on embedding learning and also on the involvement of families.

- 49.02 Whittington Health already carried out a significant amount of work in this area, however this guidance required a more systematic approach. Greg Battle suggested links be made with the work carried out by the End of Life Care Group, as well as the reviews carried out into maternal and paediatric deaths. A quarterly report would be included within the patient safety report.

17/50 Financial Report

- 50.01 Stephen Bloomer reported that the Trust had reported a £0.5m deficit in February, which was in line with the run rate required for the control total. This gave a year to date position of £6.4m deficit, £0.2m adverse against the planned year end performance, and had been achieved through normal business practice, which would suggest that the enhanced levels of scrutiny introduced the previous month were effective.

- 50.02 Additionally, the overall pay bill had reduced slightly in-month, and the Trust had continued to maintain good controls over its agency spend. Steve Hitchins congratulated Stephen and his team, and asked whether the enhanced levels of control were causing any handling difficulties. Stephen acknowledged that there were difficulties in some levels, particularly over staffing levels, but on the whole challenges made had proved valid. All were aware that the levels of control currently in place would not be sustainable in the long-term, and Stephen would be bringing a paper to TMG setting out his proposals for processes going forward. This would include training for some, and a revised and reduced list of budget-holders.

17.51 Performance Dashboard

- 51.01 Carol Gillen reported that ED performance against the 95% target continued to improve; it had reached 86.6% in February, and risen 88.4% in March. In late February the Emergency Care Improvement Programme (ECIP) had visited the Trust to undertake its planned review of back of hospitals functions, as a result of which it had recommended the department:

- Progress implementation of the SAFER patient bundle
- Progress the further implementation, measurement and monitoring of the recently developed inter-professional standards
- Consider further development of a full capacity protocol.

The final stage of the ECIP work would take place on 19/20 April, when the team would interview the Trust's partners in order to get a sense of the complete pathway; this would help to inform the ongoing improvement programme.

- 51.02 The third 'Perfect Week' was scheduled to take place the week commencing 24th April.

- 51.03 Carol was confident that all cancer targets would be achieved by the year-end. There had been a slight improvement in delayed transfers of care, and theatre utilisation rates remained affected by cancelled operations. One case of MRSA bacteraemia had been reported in February.

- 51.04 Carol was pleased to report a continued improvement in both appraisals and mandatory training. Staff turnover, sickness and vacancy rates remained broadly unchanged.

17/52 Staff Survey 2016/17

- 52.01 Norma French was pleased to report that the response rate to the staff survey had increased from just under 30% for 2015/16 to 36% for 2016/17, also that there had been

- a slight improvement in staff engagement. She had extracted the areas where Whittington Health had ranked best and performed less well, also those areas where there had been a marked improvement and those where there had not. She was especially pleased that the results showed evidence of where improvements had been made in response to last year's action plan.
- 52.02 On concern was the continued reporting of staff working extra hours, stress, and bullying and harassment, with the Trust placed within the lowest quartile for reports of staff being bullied and/or harassed by patients and members of the public. Norma had recently commissioned an anti-bullying and harassment audit from the Trust's internal auditors. She had also now appointed an Assistant Director of Learning & OD (to start in June) whose role would include succession planning and talent management.
- 52.03 Norma agreed that there was a need to further promote what action staff could take in the event of their experiencing bullying or harassment, although it was acknowledged the appointment and training of any-bullying and harassment advisors and Dorian Cole's appointment as Freedom to Speak Up Guardian had sent positive signals to staff. It had also just been agreed to train 12 staff in mediation skills. Other things were being put in place which would contribute to staff feeling more valued, including the introduction of an awards ceremony and the reintroduction of long service awards.
- 52.04 All ICSUs and Directorates had been sent the breakdown of results for their areas, and over the next few weeks would be working on their own action plans. Steve Hitchins said that he had been approached by a member of staff who had concerns, and he was aware that support for these incidences did not come within the remit of the PALS team. Richard Jennings pointed out that complaints responses did actively address situations where members of the public had behaved less than well towards staff. Yua Haw Yoe asked about the relationship between Dorian Cole and the advisors, and Norma replied that they worked very effectively together.
- 52.05 In answer to a question about a different approach being taken to the survey, Norma replied that this year a random sample approach had been taken, with surveys issued to 1227 staff using a hybrid of paper and electronic surveys for completion. Next year NHS Improvement would require Trusts to conduct a full census of all staff. A progress report on the implementation of this year's action plans would be brought to the Trust Board in October.
- 52.03 In answer to a question from Deborah Harris about the Trust's Equality & Diversity Report, Norma replied that report was taken to the Workforce Assurance Committee.
- 17/53 Standing Orders, Standing Financial Instructions and the Scheme of Delegation
- 53.01 This paper set out changes made to the Trust's Standing Orders (SOs), Standing Financial Instructions (SFIs) and the Scheme of Delegation. The changes had been reviewed by the Audit & Risk Committee in March, and that committee had recommended the Board approve the changes. Changes within the SFIs mainly centred around changes connected with budgetary responsibilities. Stephen added that changes had also been made throughout the document in order to bring it up to date. The Board formally agreed the changes.
- 53.02 Lynne Spencer highlighted to all those with responsibility for Board sub-committees that their annual review of effectiveness and terms of reference were on the forward plan for reporting at the June Board.
- 17/54 Register of Trust Deed of Execution/Trust Seal
- 54.01 Lynne Spencer reminded Board members that the register of deeds of execution was reviewed annually by the Board. It was formally approved.

17/55 Lynne Spencer circulated the draft Board forward plan for 2017/18, saying that it would evolve over the next three months when executives confirmed their reporting requirements. Board members were welcome to submit comments directly to Lynne, who added that the next phase of this work was to ensure that the meeting cycle of Board sub-committees fitted appropriately for timely reporting and assurance to the Trust Board.

17/55 Finance & Business Development Committee Report

55.01 The Board received the draft minutes of the Finance & Business Development Committee meeting held on 28th February 2017. Tony Rice had left the meeting so Stephen Bloomer informed Board colleagues that the committee had focused mainly on the 2016/17 financial performance, CIPs and financial planning for 2017/18.

17/56 Pharmacy Transformation Plan

56.01 Siobhan Harrington introduced the paper, explaining that the proposals contained within the plan had been developed in response to the recommendations in the Carter Report. Priority areas are identified in the document alongside plans for each aspect of the plan. It was noted this was the first time the Board had seen Model Hospital Benchmarks, and Siobhan congratulated Helen Taylor and Stuart Richardson on a good and thorough assessment and well-developed plans. The plan was approved by the Board.

17/57 Any other business

57.01 Siobhan Harrington was pleased to inform the Board that the Trust had achieved Information Governance Toolkit Level 2 and thanked the team for all they had contributed to this. David Holt suggested a formal note of thanks be sent to team members on behalf of the Board.

57.02 The new dental contract had started that week and staff had transferred successfully to Whittington Health.

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Action Notes Summary

Minute	Action	Date	Lead
45.01	16 th September - Board members to consider whether this might be a good date to hold the Trust's AGM	tbc	SH
46.04	The final decision would come to the Board for formal approval in June, but further debate was planned at a Board seminar <i>NB: Since this meeting the general election has been announced and purdah is underway</i>	June June tbc	SP SP
49.02	Learning from Deaths - a quarterly report would be included within the Quarterly Patient Safety Report - links to be made with the End of Life Care Group, as well as the reviews carried out into maternal and paediatric deaths.	On forward plan with Q1 report scheduled Sept 2017	RJ
53.02	Board sub-committees annual review of effectiveness and terms of reference on the forward plan for reporting at the June Board.	June	ALL
57.01	Information Governance Toolkit Level 2 - formal note of thanks to team members on behalf of the Board	Completed	SMH