

**PUBLIC BOARD OF DIRECTORS MEETING**  
**Thursday 20<sup>th</sup> October 2016**  
**10.00am, Cobalt Conference Centre**

**Present:**

Alan Richardson	Chairman
David Thompson	Non-Executive Director
Martin Knowles	Non-Executive Director
Peter Sanderson	Non-Executive Director
Ian McMinn	Non-Executive Director
David Evans	Chief Executive
Birju Bartoli	Deputy Chief Executive & Executive Director of Performance and Governance
Ann Stringer	Executive Director of Human Resources
Derek Thompson	Medical Director
Jeremy Rushmer	Divisional Medical Director
Claire Riley	Director of Communications and Corporate Affairs
Steven Bannister	Director of Estates
Ann Wright	Director of operations
Daljit Lally	Executive Director of Community & Social Care
Julie Reed	Deputy Director of Finance
Annie Laverty	Director of Patient Experience

**In attendance:**

Caroline Cornwell	Corporate Governance Assistant
Heather Carr	Public Governor
Mavis Wilkinson	Public Governor
Eugene Cooke	Public Governor
Nicky Moon	Deputy Director
David Campbell	Chief Pharmacist
Nikhil Premchand	Consultant of Infectious Diseases/Acute Medicine

**1. Opening matters****1.1/10/16 Apologies for absence and declarations of interest**

Apologies for absence were received from:

Susan Dungworth  
 Paul Dunn  
 Mark Thomas  
 John Marsden

Board members declared their interests as:

Director	Details of nature and extent of interest
Ann Stringer	<ul style="list-style-type: none"> <li>Director of NPC</li> </ul>
Peter Sanderson	<ul style="list-style-type: none"> <li>Non-Executive director of NHFML.</li> <li>Non-Executive Director of Northumbria Primary Care Limited ('NPC'), a wholly-owned subsidiary of the Trust.</li> </ul>

Steven Bannister	<ul style="list-style-type: none"> <li>• Managing Director of NHFML.</li> </ul>
Claire Riley	<ul style="list-style-type: none"> <li>• Directors of NPC.</li> <li>• Ashington High School</li> </ul>
Derek Thomson	<ul style="list-style-type: none"> <li>• Director of NPC.</li> <li>• Director at North Cumbria University Hospitals NHS Trust ('North Cumbria').</li> </ul>
Daljit Lally	<ul style="list-style-type: none"> <li>• Deputy Chief Executive Northumberland County Council</li> </ul>
Martin Knowles	<ul style="list-style-type: none"> <li>• Vice Chair Sunderland City Council</li> <li>• Vice Chair Tyne &amp; Wear Fire Service</li> <li>• Director Two Castle Housing Association</li> </ul>

### **1.2/10/16 Minutes of the previous meeting**

The Board approved the minutes of the meetings held on the 28<sup>th</sup> April 2016 as a **true** and **accurate** record.

### **1.3/01/16 Action log**

The Board reviewed and **approved** the action log.

### **1.4/10/16 Items from the CEO**

Dave Evans updated the committee on the following points.

- STP plans were submitted on 21<sup>st</sup> October 2016 we should receive feedback towards the end of the year.
- ACO work is on-going however the Board needs to be mindful of the increased clinical activities at NSECH which saw over 104 patients through its doors on one day alone.
- Flow project is underway to look at patient pathways through the system.

Ian McMinn asked the CEO why we had the April 2016 minutes at the meeting in October 2016, Birju Bartoli and Alan Richardson both explained the April minutes were from the last public Board meeting, with the July meeting being the AGM. Birju Bartoli explained the public Board papers went to Board in May 2016, discussions continued with Ian McMinn asking why we wait so long for actions when they need to be completed in a timely manner.

### **1.5/10/16 Items from the Chair.**

Alan Richardson updated that currently the Trust is very busy with lots of activity; the Trust recently hosted a visit from the Health Secretary Jeremy Hunt which went very well.

## **2.Strategy,Policy and planning.**

### **2.1/10/16 BU update.**

Nicky Moon spoke to a presentation on clinical support and cancer services updating the Board of the reduction in sickness levels and the appointment of a new General Manager and the new Business Unit Director due to start in November 2016. Nicky Moon updated the Board on the replacement equipment programme covering all base and community hospital sites for 2016/17. Discussions continued regarding the STP process and the centralizing of services with a commitment to providing 24 hours service provision at NSECH and the recruitment and retention of specialist staff including Histopathology's and Biomedical Science staff.

The Board were informed a national picture is emerging identifying problems around the recruitment of skilled staff; nationally there is currently a vacancy rate of 15% for consultant radiologist with vacancies rate of over 324 positions. Pressures are being felt in the Trust as the level of request for CT scans increased by 29%, with MRI request increased by 26% resulting in an overall 51% increase for additional reporting slots.

Nicky Moon updated the Board of the new PACS system which is due to go live 2018 and advised there will be a need to procure this as a regional network. Martin Knowles asked given the increased number of request for CT & MRI scans are these clinically evidenced based requests with David Thompson commenting on the possibility of the request being linked to the ageing population with potentially significant numbers of requests coming from

the GP practice. David Thompson asked given the discussions around recruitment how are the team coping with the increased current pressures and is the Trust still providing services for North Cumbria. Nicky Moon explained the Trust is currently not providing services at North Cumbria and the staff are coping really well at the moment however the department is very aware they need to fill vacancies as soon as possible.

*(Nicky Moon left the room)*

The Board **received** the report

### **2.2/10/1615 Steps walk around.**

Jeremy Rushmer updated the Board on the recent 15 step ward walkabouts which he undertook with Alan Richardson. The visits were unannounced and at the time wards 7 & 10 at NSECH were reviewed, both wards were clean and on speaking with patients all commented how nice and approachable the staff were. Notes were reviewed on both wards and information within the notes was found to be accurate, and of a very high standard. The Board **received** the report.

## **3. Standard Reports & regulatory items**

### **3.1/10/16 Workforce report**

Ann Stringer updated the Board and advised Northumbria Healthcare NHS Foundation Trust is near the top of recruiter's leader boards, winning a Gold award for Health at Work and silver award from EON for work around apprenticeships.

The nursing strategy identified challenges and the steps needed by the Trust to address these with 6 core themes identified include;

- Feeling valued and recognised
- Feeling supported
- Health & Wellbeing
- Promotion & progression
- Career intentions
- What is most important to staff.

The surveys noted low morale, staff shortages and limited progressions as key factors, a nursing dashboard has been designed to give up to date accurate numbers of staff on duty and staff vacancies on a monthly basis. A Regional Streamlining activity has also commenced aimed at standardising and improving "Time to recruit".

The Trust Board were assured that CQC/NHSLA requirements are being met.

The Board **received** the report.

### **3.2/10/16 Patient experience report.**

Annie Laverty discussed the Q2 figures for patient experience and informed the Board that the Trust is in a very strong position with assurance of high quality care across all aspects of patient experience programme. 96% of all inpatients 96% of emergency patients and 99% of day care patients rate the care received as good, very good or excellent.

The Trust performs well against all national benchmarking with the exceptions of waiting times. Practice development continues with wards 5 and 23 at NTGH and ward 9 and 16 at NSECH participating in projects to improve pathways. Ian McMinn asked the Trust needs to improve given the results from the CQC inpatient survey and the low mark for overall views of care & services. Ian McMinn advised given the figures and the current on-going work around staff vacancies it would be good to acknowledge the work of the staff.

The Board **received** the report.

### **3.3/10/16 Assurance Framework Declaration.**

Birju Bartoli informed the Board the report went to Assurance committee and following this some amendments are required. The Trust has met 13 out of the 15 targets standards required with increased risk in the following areas;

- Cancer performance targets failure due to month on month quarter failure of 85% target GP referral to treatment time. Capacity a further risk with on-going risk issues and no immediate resolutions. Quality impact risks linked to receipt of transformation monies also potential risk of not meeting the standard or improved trajectories
- CSSD has moved from moderate risk to high risk, currently two kits across two sites NTGH & WGH. Provision at present if one kit fails work is transferred to other site, possibility of looking to outsource the work.
- E3 Euroking captures all maternity data; however the current system is now unsupported and outdated. New system is required due to link for payment from data entered onto the current system.
  - Staffing is an on-going risk

The Board **received** the report.

### **3.4/10/16 Declaration to Monitor.**

Birju Bartoli informed the Board there has been a change in the guidance therefore there is no formal governance declaration at this stage it is not required any changes will be reported from October 2016 onwards.

The Board **received** the report.

*( Nikhil Premchand enters the room)*

### **3.5/10/16 GOSW role.**

Nikhil Premchand spoke to a presentation explaining to the Board the role of the Guardian of Safe Working, the role is there to update the current twice yearly monitoring which is not a good measure of rota safety. The GOSW role is independent role to champion safe working hours for junior doctors.

Nikhil Premchand informed the Board he has now been in post since June 2016 with many other Trust nationally still to appoint a GOSW champion. The Board were informed many new junior doctors have short contracts with other having contracts until 2024, the guardian will report back to both Board and the LNC quarterly including information on the following.

- Data on exceptions reports with outcomes including speciality, department and grade.
- Details for any fines levied.
- Rotas gap information.
- Locum usage
- Areas for concern.

The Board **received** the report.

*(Nikhil Premchand leaves the room)*

*( David Campbell enters the room)*

### **3.6/10/16 Medicines Optimizations Annual Report**

David Campbell talked to a presentation and updated the Board on the 6 strategic challenges for the Trust in the future. The pharmacy department is now providing a 7 day ward based dispensary service at NSECH, with 96% of all patients being seen within 24 hours of admission. The strategic challenge number 4 entails the department delivering significant medicines related to the CIP, the implementation of the Electronic Prescribing service will hopefully reduce the current risk from red to green, however the Board needs to agree the request.

Jeremy Rushmer is currently working with David Campbell on the Proposed HPTP (Hospital Pharmacy Transformation Plan) process with a draft plan to be submitted by the end of October 2016.

- Keep doing the good things we've been doing (core clinical)
- Adoption of digital technology as a major enabler

- Revisit commercial partnership/outourcing
- Explore supply chain collaboration at regional level
- Exploit opportunities within a new ACO framework
- Facilitate fast adoption of best values medicines, specifically bio similar medicines.

The Trust Boards need to approve the plans by April 2017. The final challenge for the service is to develop and deploy the workforce. The past year has brought many challenges however the Trust has also had many successful transformations/innovations. The Trust has a strong national reputation however the future challenges include extending services beyond 5pm on base sites and develop integrated services in primary care.

David Thompson asked about pharmacy services under the Vanguard umbrella in Northumberland and potentially North Tyneside. Discussions ensued with members asking about ACC work and Vanguard information. Peter Sanderson commented on pharmacy, dentistry and optometry services all being part of people's health and the need to be inclusive when using skill mix. Chair asked the members of the public present if they had any questions which they would like to be answered or any comments which they would like to minute, none made.

The Board **received** the report.

#### **4. Items for information only.**

4.1/10/16 NHFML key issue report Peter Sanderson informed the board nothing to escalate.

4.2/10/16 Safeguarding Quarterly report already presented to S&Q committee.

4.3/10/16 Workforce key issue nothing to report.

4.4/10/16 S&Q key issues report Pater Sanderson advised this has already been well discussed at S&Q committee.

4.5/10/16 FIP key issues report Ian McMinn advised this needs to be discussed further at Board following discussions at FIP committee.

The Board **received** the key issues reports

AOB

Claire Riley asked the Board to approve the costs associated with the governor newsletter. The newsletter currently goes to about 50,000 strong memberships and has a tear of strip to seek information and updates from members.

The Board **approved** the action.

**Meeting Closed**

**The next meeting will be held on the 26<sup>th</sup> January 2017 at 10am Cobalt Conference centre**