

**MINUTES OF A MEETING OF THE BOARD OF DIRECTORS
HELD IN PUBLIC ON THURSDAY 6 FEBRUARY 2020 AT 9.30 AM,
IN BOARD ROOMS, TRUST HQ, GREAT WESTERN HOSPITAL, SWINDON**

Present:

Liam Coleman (LC)	Chair
Lizzie Abderrahim (EKA)	Non-Executive Director
Nick Bishop (NLB)	Non-Executive Director
Andrew Copestake (AC)	Non-Executive Director
Charlotte Forsyth (CF)	Medical Director
Jude Gray (JG)	Director of HR
Peter Hill (PH)	Non-Executive Director
Paul Lewis (PL)	Non-Executive Director
Julie Marshman (JMa)	Chief Nurse
Kevin McNamara (KM)	Acting Chief Executive
Jemima Milton (JM)	Non-Executive Director
Carole Nicholl (CN)	Director of Governance & Assurance & Company Secretary
Julie Soutter (JS)	Non-Executive Director

Also in attendance

Caroline Coles (CC)	Deputy Director of Governance & Assurance and Deputy Company Secretary
Leighton Day (LD)	Associate Director of Operational Performance

Apologies for Absence

Jim O'Connell (JO)	Chief Operating Officer
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Number of members of the Public: 6 members of public (including Roger Stroud, Arthur Beltrami, Rosemarie Phillips and Chris Shepherd Governors) plus 2 members of staff

Matters Open to the Public and Press

Minute	Description	Action by whom	Action by when
331/19	<p>Apologies for Absence and Chairman's Welcome</p> <p>The Chair welcomed all to the Great Western Hospitals NHS Foundation Trust Board meeting held in public, particularly members of the public and governors.</p> <p>Apologies were received as outlined above.</p>		
332/19	<p>Declarations of Interest</p> <p>There were no declarations of interest.</p>		
333/19	<p>Minutes</p> <p>The minutes of the meeting of the Board held on 9 January 2020 were adopted and signed as a correct record, subject to the following amendments: -</p> <p><u>299/19 : Chair of Quality & Governance Committee : Friend & Family Test</u> : Change "better results" to "better <i>respond rate</i>".</p> <p><u>299/19 : Chair of Quality & Governance Committee : Equality & Human Rights Annual Report 2019</u> - In the 2nd line change "...Equality Duty and Equality Act..." to "...Equality Duty <i>under the</i> Equality Act..."</p> <p><u>303/19 : Draft People Strategy 2019-2024</u> - First bullet point change to "<i>There</i></p>		

	<p><i>was recognition that there would need to be some flexibility written into the Plan”.</i></p> <p><u>307/19 : Chair of Finance and Investment Committee Overview</u> - Change dates in 1st paragraph to <i>25 November and 23 December 2019.</i></p> <p><u>306/19 : Finance Report Mth 8</u> : Bullet point 5 change £25m to £25.9m. Delete 'only' before £9m and add “so far” after ‘this request’. Second paragraph add “IT” after emergency capital, and in resolved (a) delete “all currently forecast to plan”.</p>		
334/19	<p>Outstanding actions of the Board (public)</p> <p>The Board received and considered the outstanding action list and the following noted:-</p> <p>293/19 Emergency IT Capital Funding - It was noted that the emergency IT capital funding had been discussed at the January 2019 Finance & Investment Committee however the business case was due to be submitted at the February 2020 meeting and should any funding be in the form of a loan Board approval would be required. Action : Director of Finance</p> <p>241/19 Membership of Committees - It was noted that the review of membership of committees was due in February 2020 however as there was a well led governance review currently underway this item would be deferred to a more appropriate time. Action : Director of Governance & Assurance</p> <p>RESOLVED</p> <p>(a) <i>that the action log is noted;</i></p> <p>(b) <i>Emergency IT Capital Funding Business Case to be discussed at F&IC in February 2020. Should any funding be in the form of a loan Board approval was required; and</i></p> <p>(c) <i>CQC registration document to be reviewed for next submission.</i></p>	TC CN - TC CN	Mar-20 Apr-20 - Mar-20 Mar-20
335/19	<p>Questions from the public to the Board relating to the work of the Trust</p> <p>There were two questions received from members of the public which were based around car parking and carer’s chairs.</p> <p>The Board considered the questions and responses and the following was noted:-</p> <p><u>Car Parking</u> - The Trust were fortunate with their car parking facilities however options were being investigated to ensure that there was fair, consistent and adequate provision of transport and travel choices for all staff, patients and visitors which would be in line with the national agenda around carbon neutrality.</p> <p><u>Carer’s Chairs</u> - It was noted that at the recent Charitable Funds Committee it had been agreed to fund 3 new carer’s chairs.</p>		
336/19	<p>Chairman’s Report</p> <p>The Chairman gave a verbal report which included the first meeting with the new Bath & North East Somerset, Swindon & Wiltshire (BSW) STP Chair, and a BBC television interview with Rosemarie Phillips, one of the Trust’s governors on the whiteboard initiative which would improve patient experience.</p>		

	<p>There had also been a governor meeting to consider the CQC Key Lines of Enquiry (KLOEs) and CQC inspections with new governors and Non-Executive Directors attending.</p> <p>RESOLVED</p> <p><i>that the report of the Chairman be received.</i></p>		
337/19	<p>Chief Executive's Report</p> <p>The Board received and considered a report from the Chief Executive and the following were highlighted:-</p> <p><u>Care Quality Commission (CQC) Inspection</u> - The CQC would visit the acute hospital from 11 – 13 February 2020 and inspect Primary Care Services at the end of February 2020.</p> <p><u>Schwartz Rounds</u> - The first Schwartz Round took place within the Trust on 4 February 2020 with the discussions around “the patient I will never forget”. These sessions provided a structured forum where all staff, clinical and non-clinical, came together to discuss the emotional and social aspects of working in healthcare.</p> <p>Liam Coleman, Chair added that this was a powerful session and encouraged the Non-Executive to attend. It was agreed that the programme of these events and the Leadership Forums would be circulated to all Board members.</p> <p>Action : Acting Chief Executive</p> <p><u>Leadership Forum</u> - The Trust’s third leadership forum took place in January 2020 with an external speaker, Mike Gunton, from the BBC’s National History Unit, which gave senior leaders an insight into leadership in a different organisation.</p> <p><u>New Clinical Chair, Bath & North East Somerset, Swindon and Wiltshire (BSW) Clinical Commissioning Group (CCG)</u> - Dr Andrew Girdher had been successfully voted as the new Clinical Chair for the new BSW CCG and would take up this post on 1 April 2020.</p> <p>Andy Copestake, Non-Executive Director noted that the appointment of the BSW CCG Swindon Locality Chief Operating Officer, was a secondment for 9 months and asked what would be required to make a difference within the system in this short timescale. Kevin McNamara, Acting Chief Executive replied that the reason for secondment was because a recruitment campaign had been undertaken twice without any appointment and that the main achievement from the Trust’s perspective would be to develop a system-wide escalation protocol.</p> <p>RESOLVED</p> <p><i>(a) that the report of the Chief Executive be received; and</i></p> <p><i>(b) the Leadership Forum and Schwartz Rounds dates be circulated to Board members.</i></p>	KM	Mar-20
338/19	<p>Quality Report</p> <p>The Board received and considered a monthly report which provided commentary and progress on activity associated with key safety and quality indicators. The key points to note for December 2019 were as follows: -</p> <p><u>Serious Incidents</u> - A number of serious incidents had failed to be completed within the required 60 days. This was primarily due to the availability of trained investigation leads not meeting the current demand. It was noted that all serious</p>		

<p>incidents were always immediately reviewed with learning shared however the full investigation was over a 60 day timeframe. A full review was currently being undertaken to look at policies, reporting, and current structure around the quality team.</p> <p>Liam Coleman, Chair asked how long it would take for the proposals to be made available. Julie Marshman, Chief Nurse replied that a report would be ready for review at the relevant Board sub committees in March 2020 followed by Board in April 2020.</p> <p>Action : Chief Nurse</p> <p><u>Infection Prevention and Control</u> - There were 4 cases of <i>C.difficile</i> infection reported in December 2019, however it was noted that the Trust was slightly under the Q3 upper limit of 36 cases for the diagnosis of <i>C.difficile</i> infection.</p> <p>There were low figures reported in ED during December for patient equipment. A full investigation had been undertaken and actions put in place. It was noted that the department had improved significantly in this area and were now fully in line with other areas' scores.</p> <p>The Trust had seen an increase of 9% in the Gram-Negative blood stream infections (BSI) which was above the national increase of 2%. Further review and scrutiny was underway to understand and address any root cause. It was noted that the increase accounted for a very small number (3) of patients.</p> <p>The Chief Nurse gave a verbal update on Coronavirus and assured the Board that there was a clear robust process in place with daily conference with Public Health England (PHE).</p> <p>Julie Soutter, Non-Executive Director asked about the observation hubs on the news this morning and how the Trust was going to manage this request with limited space and full hospital protocol. Julie Marshman, Chief Nurse confirmed that a request had been received however due to lack of space within the hospital this was not possible. The Trust was well prepared with a robust policy in place for dealing with infectious diseases. All the relevant equipment was on site and further supplies had been ordered.</p> <p><u>Matron Audits</u> - There had been some changes in the role of matrons to allow clinical time to drive improvements in this area. The Trust was also trialling an IT solution, Perfect Ward, to support daily safety checks and audits.</p> <p><u>Friends and Family Test</u> - The response rate for Family and Friends Test had been discussed in detail at Quality & Governance Committee. New ideas to improve feedback would include further use in tablets and increase in text messaging.</p> <p><u>Complaints</u> - Actions had been taken to be more proactively managing complaints in particular to support greater compliance within timescales. The overdue complaints were primarily serious incident investigations or very complex cases and the number had significantly reduced.</p> <p><u>Electronic Discharge Summaries (EDS)</u> - A number of actions had been taken to improve compliance in recent months which included training, extra hours given to junior doctors, exploring IT solutions and establishing a task and finish group. This remained an area of focus within the Quality & Governance Committee to support the required solutions to make improvements.</p> <p>Julie Soutter, Non-Executive Director asked why informatics could not provide accurate information in April 2019. Tracey Cotterill, Interim Director of Finance responded that the system had gone down and was the reason why the Trust was</p>	<p>JMa</p>	<p>Apr-20</p>
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	<p>given emergency IT capital funding. Charlotte Forsyth, Medical Director added that she was confident that the data was now accurate and there were no concerns in this area.</p> <p>RESOLVED</p> <p><i>(a) that the quality matters and exceptions contained within the report be noted;</i></p> <p><i>(b) that it be agreed that the Quality Report provides assurance of progress towards quality improvements and quality indicators;</i></p> <p><i>(c) that the report be noted; and</i></p> <p><i>(d) that a report on the proposals following the quality governance review be received in May 2020.</i></p>	<p>-</p> <p>-</p> <p>-</p> <p>JMa</p>	<p>-</p> <p>-</p> <p>-</p> <p>J Apr-20</p>
<p>339/19</p>	<p>Workforce Report: Key Performance Indicators (Month 9)</p> <p>The Board received and considered a paper providing a summary of the key workforce issues and risks identified from the month 9 (December 2019) workforce report. The following was highlighted:-</p> <p><u>Recruitment and Retention</u> - Although the vacancy rate for December 2019 was good there were still areas that had high vacancy rates particularly in acute medicine and HR were working with the team to support in this area. It was noted that the international nurses continued to be successful in closing the nursing gap.</p> <p>A “My GWH” App had been launched as a pilot within Swindon Community health Service and if successful would be rolled out Trust wide in 2020.</p> <p><u>Mandatory Training</u> - The overall statutory mandatory training compliance rate remained above target.</p> <p><u>Health & Wellbeing</u> - It was noted that the Health & Wellbeing Manager role had to go back out to advert due to unforeseen circumstances. Performance, People & Place Committee had asked for indicators to be provided to evaluate the effectiveness of all the activities taking place.</p> <p><u>Spring Save Scheme</u> - Further to the success of the Winter Save Scheme, the Spring Save Scheme had been launched to encourage more staff to sign up to the Bank, the Trust’s own internal staff agency.</p> <p><u>Primary Care</u> - Primary Care data was not currently included in the report however work was being undertaken to clarify staffing model, determine budget and vacancy factors by 1 April 2020.</p> <p><u>Recruitment</u> - The ‘time to hire’ had increased in month 9. This was due to a combination of annual leave and sickness.</p> <p><u>Flu Campaign</u> - The flu vaccination rate was now at 80%.</p> <p><u>Paybill</u> - The paybill remained challenging particularly around agency costs.</p> <p><u>Sickness Absence</u> - Sickness absence had increased in December 2019 however this was usual for this time of year.</p> <p><u>Appraisals</u> - The appraisal compliance rate had increased to 79.9%. New appraisal policy and forms had also been approved.</p>		

	<p>Paul Lewis, Non-Executive Director asked what evaluation process would be used for the new appraisal system. Jude Gray, Director of HR responded that options were being explored.</p> <p>RESOLVED</p> <p><i>the report is noted.</i></p>		
<p>340/19</p>	<p>Operational Performance Report</p> <p>The Board considered the operational performance report which provided an update on performance during November/December 2019 against key national and local performance standards in addition to progress against key work streams and remedial recovery plans with headlines as follows: -</p> <p><u>Emergency Department (ED)</u> - ED performance declined in December 2019 due to lack of flow. A number of actions had been put in place to address the issue which included introduction of reverse streaming, matrons working differently, and a focus on stranded patients.</p> <p><u>Stroke Performance</u> - The Bournemouth Predictor Tool was now embedded and used on a weekly basis. The SSNAP score for Q2 reported at D.</p> <p>Liam Coleman, Chair recognised the improvements in stroke performance score however on reviewing national data within the Sustainability and Transformation Partnership (STP) the other acute trusts were also struggling with performance and wondered whether this required highlighting for further collaboration within the STP. Charlotte Forsyth, Medical Director replied this was already a priority within the STP.</p> <p><u>Referral to Treatment Time (RTT)</u> - The Trust reported 22,206 against a year end trajectory of 21,558 which was an improvement. This continued to be managed on a weekly basis to ensure continued improvement.</p> <p><u>Cancer</u> - Overall cancer performance was positive story. The two week wait (2ww) continued to be a challenge due to capacity and demand and plans to address this were being closely monitored.</p> <p>Julie Soutter, Non-Executive Director asked why there continued to be capacity issues within the Paediatrics bed base when an extra bed had been added. Leighton Day, Associate Director of Operational Performance replied that this was more an issue at weekends. There had been joint working between Paediatrics and the ED which had reduced admission numbers but there still remained an on-going pressure within Paediatrics.</p> <p><u>Community Services</u> - The Board received a verbal report as the papers had not been included in the Board pack in error and would be circulated outside the meeting. The following was highlighted:-</p> <p><u>Community Matron Service</u> - A deep dive had been undertaken into November patients discharged having stayed at GWH for longer than the key performance indicator (KPI) 7 days. Although more work could be done the review highlighted that discharge was dependent on partners providing long term care or care packages.</p> <p><u>Community Nursing Service</u> - The service was working with the Clinical Commissioning Group (CCG) to support the national move to a 2 hr rapid response service.</p>		

	<p>There followed a robust discussion around the recently published Operational Planning & Contracting Guidance for 2020/21 which provided more detail about how the NHS would deliver the long term plan and make the required transition to integrated care, system working and a broader range of priorities. The main headlines included improvement in ED performance, reduction in bed occupancy, system performance default model and expand primary and community services.</p> <p>RESOLVED</p> <p><i>that the report be received and the ongoing plans to maintain and improve performance be accepted, acknowledged and supported.</i></p>		
341/19	<p>Finance Report</p> <p>The Board received and considered a report on finance for month 9 (ending 31 December 2019) and the following was highlighted: -</p> <ul style="list-style-type: none"> As agreed with the Board and BSW STP the Trust formally submitted to NHS Improvement (NHSI) a revised forecast outturn position adverse to plan and it was key that the forecast position was maintained and actions had been put in place to support Divisions to hold their forecast The month 9 position was adverse to plan but slightly better than forecast. This was the first full month of reporting for Primary Care and the full costs and income were included in the report. There was no impact on the overall financial performance resulting from the inclusion of this service. <p>Andy Copestake, Chair of Finance & Investment Committee added that there had been a rigorous and robust discussion around the risks in achieving the year end position at the Finance & Investment Committee. Also discussed was budget setting for 2020/21, CIPs, the need for transformation, and cash which remained a concern with extra loans required in February and March 2020.</p> <p>Nick Bishop, Non-Executive Director asked if the 2020/21 Plan would reflect reality more than in previous years. Tracey Cotterill, Interim Director of Finance replied that a new financial reporting format would be introduced next month for more clarity around activity and income together with a different approach to budget planning adopted for 2020/21.</p> <p>Julie Soutter, Non-Executive Director asked where service line reporting fitted into the new Planning process. Tracey Cotterill, Interim Director of Finance replied that an initial pilot of 3 departments had commenced and good progress had been made in this area so far.</p> <p>RESOLVED</p> <p><i>(a) the Month 09 financial position is a year to date deficit of £10.949m including PSF, MRET & FRF. MRET & FRF both currently forecast to plan, however PSF not forecast to achieve;</i></p> <p><i>(b) The Month 09 financial position excluding PSF, MRET & FRF is a year to date deficit of £14.810m; and</i></p> <p><i>(c) that the Use of Resources Rating is a 4.</i></p>	-	-
342/19	<p>Ratification of Decisions made via Board Circular/Board Workshop</p> <p>None.</p>		

343/19	<p>CQC Registration Update</p> <p>The Board received and considered a paper that provided an update to the CQC registration and the following changes since the last report were highlighted:-</p> <ul style="list-style-type: none"> • Princess Lodge Care Home was added as a new location. • De-registration of Swindon Walk-in Centre. • Two new locations registered to GWH Primary Care Network; Moredon Medical Centre and Abbey-Meads Medical Centre had been added. <p>Lizzie Adberrahim, Non-Executive Director was concerned about some of the wording and offered to review the document for the next submission. Action : Director of Governance & Assurance</p> <p>RESOLVED</p> <p><i>(a) that the Board acknowledges the CQC registration update;</i></p> <p><i>(b) that the Board acknowledges the update to the Trust statement of purpose; and</i></p> <p><i>(c) amendments to be made for the next submission following review of wording.</i></p>	CN	Mar-20
344/19	<p>Urgent Public Business (if any)</p> <p>None.</p>		
345/19	<p>Date and Time of next meeting</p> <p>It was noted that the next meeting of the Board would be held on 5 March 2020 at 9:30am in Trust Management Boardrooms, Trust HQ, 2nd Floor, Great Western Hospital</p>		
346/19	<p>Exclusion of the Public and Press</p> <p>RESOLVED</p> <p><i>that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity of which would be prejudicial to the public interest.</i></p>		

The meeting ended at 2.05 pm

Chair Date.....