

TRUST BOARD PUBLIC MEETING

Wednesday 09 May 2018

11.45 – 15.30

Teal Room, The Poynt 2-4 Poynters Road, Luton, LU4 0LA

Members:

Nicola Scrivings	Chair
Gill Thomas	Non-Executive Director
Geoff Lambert	Non-Executive Director
Dr Anne McConville	Non-Executive Director
Oliver Judges	Non-Executive Director
Matthew Winn	Chief Executive
Anita Pisani	Deputy Chief Executive and Director of Workforce and Service Re-Design
Mark Robbins	Director of Finance and Resources
Dr David Vickers	Medical Director
Julia Sirett	Chief Nurse

In Attendance:

Debbie Reichmann	PA to Children's Services, Luton – Minute taker
Lucy Bubb	Associate Director Deloitte, Audit, Consulting, Financial Advisory & Tax Services
Luci Kilby	Complex Needs Nurse, Children's Continuing Care Team, Luton (Item 2)
Balqas	Mother of Hafsa (Item 2)
Jo Benge	Nursery Nurse for the Children's Continuing Care Team, Luton (Item 2)
Tina Charlton	Service Lead for Luton C&YP Health Services (Item 2)

Apologies:

Richard Cooper	Non-Executive Director
Taff Gidi	Assistant Director of Corporate Governance
Karen Mason	Head of Communications

Minutes:

1	Chair's welcome, apologies and additional declarations
1.1	The Chair welcomed all to the meeting. There were no additional declarations
2	Patient Story
2.1	The Chair welcomed Luci Kilby, Complex Needs Nurse, Children's Continuing Care Team, Luton, Jo Benge, Nursery Nurse for the Children's Continuing Care Team (CCCT) and Mum, who were there to present their patient story.
2.2	The Chair asked mum to talk informally about her experiences.
2.3	Mum had brought in photos of her daughter celebrating her 18 th Birthday Party, which was held at home with the team present. It was a sad and happy time as mum and the family were saying goodbye to Jo after 8 years of caring for her daughter as she transitioned into Adult Services.
2.4	The Chair asked mum to explain her story.
2.5	The Chair asked mum if the team was part of the family, mum replied yes, definitely. Her daughter had been end of life care when she first met the CCCT. Mum has not had any bad experiences and mum explained how the team had supported her whole family.
2.6	Chair expressed that did mum have some trepidation on how life would be. Mum replied she did feel anxious mainly because of the unknown and she had not been looking forward to her daughters 18 th Birthday, but then was looking forward to it as the care from Adult Services was in place thanks to the continued help for the CCCT. It was very important that adult services

	continued the care package for her daughter. Feedback from Adult Services was very positive.
2.7	Luci explained that communication was very important. Right information at meetings to enable the best and suitable care to be provided.
2.8	Matthew Winn asked was the assessment process extensive? Luci replied that 3 months worth of evidence was sent over to the school and adult services. A lot of work was involved to ensure a smooth transition into adult services. The care package is also reviewed annually. Action: Chief Nurse to liaise with Clinical Commissioning Group on the value of this in-depth assessment. Was this helpful and is this the best way of assessing adult service needs
2.9	Matthew Winn asked mum if she holds a personal budget for her daughters care. Luci replied that mum did have the choice, but decided not to go down that route as enough was going on with looking after daughter and the rest of her family. However, this can be reviewed each year.
2.10	Chair asked mum how her daughter was getting on as she had been under the care of the Adult Services for a couple of months now, how are things working out? Mum advised that so far so good, it is a small team.
2.11	Dr David Vickers asked about medical care and stated that he was glad to hear that the transition had gone well for the family. Mum replied that the Consultant knows her daughter well, but the GP knows her less well. David advised that it may be helpful if our services involved GP's earlier on so that they did understand needs better? Mum advised that she has yearly visits with the GP.
2.12	Matthew Winn asked if there was anything the Trust could do better? Luci advised that a recommendation to have close working relationships with the hospital would be helpful.
2.13	Chair asked about the Ready Steady Go process from the age of 14. Luci advised that there are different policies and models and frameworks used. Use and share the same models as the hospital. The Ready Steady Go is used across the Trust.
2.14	Chair asked mum if anything could have been done better or differently over the last 3-4 years, including the transition? Mum replied that everything seemed to happen fast which was both good and bad. Good in as much as mum did not have time to dwell on anything too much and bad was the anxiety suffered. Luci advised mum that all is ok as the CCC Team are still around to provide support, if required. Mum said that the standard of care that the team provided to her daughter was excellent and the family will miss them all.
2.15	Jo Bengé advised that a lot of work had gone into the 24 hour activity chart and mum expressed her gratitude to Jo for going above and beyond to ensure her daughter had a smooth transition into adult services. Mum said that she was very grateful to Jo for taking the time to pull the detailed plans together as the adult teams use them to fully understand her daughter's needs.
2.16	Julia Sirett was glad that the experience was good. Julia thanked Jo for her compassion and kindness and the extra hours spent ensuring the best possible care was in place. Luci said that it's all thanks to mum as they had all been really easy to look after. Julia said a big thankyou on behalf of everybody.
2.17	Matthew Winn asked Jo how does she feel when she comes to the end of a child's care as they make the transition into adulthood? Jo replied that she is attached and detached, if that makes sense. It can feel like a loss, however, she has other children to care for and is assured that the care being provided by the adult team is good.
2.18	Matthew Winn asked whether there was anything else the Trust could be doing to help with the transition process. Luci advised that a Pathway for all agencies would be useful to recognise the ages of when to start the transition process.

	Build in from the age of 14.
2.19	The Chair thanked all very much for a very positive account on many levels. Matthew Winn added that Jo, Luci and the team live and breathe the values of the Trust – a really good job.
3	Minutes of previous meeting and matters arising
3.1	The minutes of the previous meeting held on 11 April were approved, with the following exceptions: <ul style="list-style-type: none"> • Dr Anne McConville clarified that 4.5 should read that it was her wider frustration as she did appreciate the visit. • 5.19 should read recognition of the deterioration of the patient not resus training.
4.	Assurance on Current Quality, Finance, Performance and Workforce Issues
4.1	Julia Sirett explained there had been 1 serious incident since the last meeting took place. This incident was around no bumpers being in place for an elderly patient which resulted in an injury to his arm. This is under full investigation. Anita Pisani added that details and learning from this will be shared at a future Luton Clinical Operational Board (COB).
4.2	Julia Sirett highlighted staffing pressures across our various different services and explained that these would be discussed in more detail under the workforce review item on the agenda today.
4.3	Anita Pisani highlighted that the annual appraisal rate of 91% had been met. This meant that the Trust had met its performance measure within our ‘be an excellent employer’ objective.
4.4	Julia Sirett shared the Care Quality Commission (CQC) brief summary on page 9 of the Quality Report. Julia explained that CQC had recently inspected Dental and Luton Adult Services and the verbal feedback received at the end of the inspection had been positive. Julia added that there were a couple of areas for improvement but that immediate action had taken place, for example clarity on the clinical waste system across our Luton adult services.
4.5	Nicola Scrivings thanked all staff for their contribution and wished her thanks to be conveyed to staff involved in the inspection visits.
4.6	Julia Sirett drew attention to a revised CQC Statement of Purpose (appendix 2) which now covered our Bedfordshire Community Health Services that transferred into the Trust on 1 st April 2018. The Board gave approval of this change.
4.7	When referring to Clinical Research (point 6.5 of report) Julia Sirett described how the Trust has more than doubled its recruitment target for the year. Matthew Winn went on to explain that he attended a board research seminar recently and referred to the graph on page 21, appendix 3 that shows a huge increase in research activity and that the Trust is looking at how to start original research in areas. Mathew added that the team have done very well. Nicola Scrivings agreed and stated that the trust is much stronger than it was two years ago.
4.8	Julia Sirett explained that the Quality Account has been to the Quality Improvement and Safety Committee (QISCOM) for approval. It is now out for 30 day to stakeholders asking them for commentary/feedback. Bedford Borough have commented already and this was positive. Julia said that we expect to receive more comments. Nicola Scrivings asked that all comments were shared with the Board. Action: Julia to share all comments on the Quality Account with the Board once received.
4.11	Gill Thomas queried the wording around MRSA Target written in the Quality Account and suggested that Infection Prevention areas should be described as performance rather than a target. Julia agreed to make this change unless it was national wording.

	Action: Julia to amend wording around MRSA target
4.12	Gill Thomas highlighted that she found the finance section of the report confusing. Matthew and Mark gave the group further explanation and said that the wording matches the annual report however they will review the whole paragraph and re-word if required. Action: Mark to review wording of finance section in Quality Account.
4.13	Julia Sirett formally thanked Helen Ruddy for all of her hard work in pulling the Quality Account together. Nicola added that she thought the account was very well written and thanked Julia.
4.14	Julia Sirett went on to discuss the Review around Learning from Deaths work. Julia said the guidance is generally aimed at Trusts with in-patients and not community based. It was acknowledged that the Trust needed to give further thought to ensuring the right level of patient/public engagement was in place. Geoff Lambert stated that recruiting the right person/s would be difficult. Matthew suggested linking this into our recruitment processes for our new people participation approach. Julia explained a conversation will take place with East London Foundation NHS Foundation Trust would take place to understand their approach across their community services. Matthew asked Julia to think about joint participation with Keech in Luton and then this can be replicated across other areas. Action: Julia Sirett/Dr David Vickers to discuss approaches with East London NHS Foundation Trust and to consider joint work with Keech Hospice.
4.15	Nicola Scrivings queried point 3.9 in appendix 5 'staff should prioritise end of life patients' and questioned over who? Julia explained that community nursing teams have conflicting work priorities so this is to say end of life patients should be prioritised.
4.16	Nicola Scrivings also queried point one of 3.9. Julia reassured Nicola that this is about GP's not notifying the nursing teams of a death.
4.17	Nicola Scrivings asked where the update on the actions from the last report were, and that could the old and new actions be merged in future updates to the Board. Action: Julia to present actions on last report with new ones.
4.18	Geoff Lambert queried 2.2.4 of Quality Report which is around the risks to safeguard children without consent and asked if there was an explanation for this? Matthew said that this has been part of a 3 year process and that the functionality on SystmOne had been too broad which could lead to a breach of data protection legislation if misused, therefore, TPP the owner of SystmOne had been asked to remove this functionality by the Information Commissioner . Matthew explained that there was a way for information to be shared that did follow data protection rules, although access is limited. Julia added that most patients are willing to share consent in front of GP's and we are working on ways for GP's to encourage consent.
4.19	Dr Anne McConville explained that at the time of QISCOM, risk 2456 was a score of 15. This has since been downgraded to a 12.
4.20	Dr Anne McConville said that the Ambulatory Board have seen the results of audit as per point 8.1 and can assure loops had been closed re Serious Incidents. Anne went on to say that the audit team have been asked to create a quality/robust audit.
4.21	Dr Anne McConville confirmed that they have received 3 x internal audits and the actions have been completed. One of these actions was to look at Adult Supervision.
4.22	Gill Thomas asked for clarification on page 5 of the data pack (appendix 1) where it says 'all teams submitting clinical audit received 100%' – does this mean of all teams who submitted, or all teams?

	Action: Julia Sirett to get clarification on this point
4.23	Gill Thomas noted the differences with Cambridgeshire Children's services Friends And Family Test and asked whether Luton Childrens had shared their process as they were achieving higher response rates? Action: Anita to check with the Luton services what they were doing and to share this with our other children services across the Trust
4.24	Dr Anne McConville queried why the degree of harm on page 1 of the data pack does not show assessment and asked if the right categories were being used. Julia explained that this is from a formal drop down on Datix but will review. Action: Julia to ensure appropriate codes are being used.
4.25	Matthew Winn asked Julia Sirett how we can ensure that all teams achieve 100% compliance for their Safeguarding level 3 training. Julia explained that the safeguarding team have put actions in place to sit with each service individually to identify needs. Julia also said that there is a system issue with recording that GP's have completed training so it isn't always a case that they haven't done it. David suggested using online training that is available and also that a mixed approach of supervision with training could be done. Matthew asked that future reports show how we aim to improve compliance. Action: Julia to have a detailed look at this and report via Clinical Operational Boards
4.26	The Board noted all of the documents presented through the quality report and agreed to sign off the updated CQC Statement of Purpose.
5.	Finance
5.1	Mark Robbins briefed the Board on financial performance and capital spend to date. Overall the year end position was a £3.2million surplus.
5.2	Gill Thomas asked why the HIV drug cost does not appear in iCaSH figures? Mark Robbins explained the reasons why.
5.3	Chair asked that the Non-Executives had a more detailed update in relation to the 17/18 outturn. Action: Mark Robbins to provide Non-Executive Directors with a more detailed analysis of the 17/18 outturn.
5.4	Mark updated the Board on the most up-to-date information in relation to Lord Carter's report on productivity
5.5	Mark Robbins informed the Board of the 10 Data Security Requirements and the Trust's proposed responses for approval. Mark explained that after last year's cyber-attack there had been various questionnaires and updates for the Trust to complete. Mark explained that there is additional funding available to fund protection and licences. Mark confirmed that the Trust was compliant and up to date with all actions in relation to keeping the Trust safe from a future cyber-attack. There is a 10 point structure that requires a response. Mark confirmed that some points the Trust had fully implemented and some are partial but there were no areas of non-compliance.
5.6	Matthew Winn queried if point 3 would be partial. Gill suggests this is compliant. Anita stated that the IG training questions should be partial compliance and Mark agreed that Business Continuity would be a further area for partial compliance.
5.7	Board agreed updated self-assessment agreed for Mark to submit Action: Mark to update self-assessment and to submit. Document to be uploaded onto intranet.
6.	Clinical Operational Boards and Performance Information
6.1	Dr Anne McConville briefed the Board on key points from Ambulatory Care. David Vickers added that the risk around fire doors has now been closed. Gill Thomas made observation that no numbers were detailed on delivery of KPI's and that more information was needed in future reports.

6.2	<p>Geoff Lambert briefed the Board on key points from the Bedfordshire and Luton Clinical Operational Board. Nicola Scrivings asked if point 5 of report has resolved the issue with the letters now that investment has come in. Anita explained that this will be monitored and discussed at future Clinical Operational Board meetings.</p> <p>Action: Anita to update at COB.</p>
6.3	<p>Gill Thomas briefed the Board on key points from Children and Young People Services. No questions or queries from Board. Key points covered were that the Board was focusing on the KPI's that were not being achieved; staffing issues/QWETT scores and appraisal compliance.</p>
6.4	<p>Contract Performance indicators: Geoff Lambert asked how the board can compare the KPI's against last year as they haven't been listed.</p> <p>Action: Mark Robbins to ensure that a full list of performance KPI's for 17/18 is available with 18/19 data.</p>
7.	Bi Annual Workforce Review
7.1	Angela Hartley joined the meeting.
7.2	Angela Hartley presented the key points of the bi-annual Workforce Review report.
7.3	Angela said that recruitment and retention in Luton is a challenge but added that there is a review of this in Luton Adults where the Service Director and Head of Adult Services are thinking about if the right staff are in the right place.
7.4	Angela highlighted that interest in apprenticeship schemes across our different services was gradually increasing. Services are now starting to highlights where there may be potential to access an apprenticeship route.
7.5	Angela highlighted Appendix 7 which was the Trusts formal gender pay gap report. She discussed the key points from this report and confirmed that the Trust's picture was similar to other NHS organisations.
7.6	Angela went on to explain that talent management and succession planning was introduced last year which forms part of a career development plan.
7.7	Anne McConville asked where is the biggest recruitment gap (HCA's, AP's, Nurses etc.). Angela explained that there were a variety of different gaps across our services and that the solutions would be different for each service. There is as we know a national shortage of nurses. The Trust will be continuing with its focus on growing our own staff as well as identifying a variety of recruitment and retention activities.
7.7	Julia Sirett advised the board that there is a programme called 'The London Nurse' and that the team are thinking of ways in which we can adopt a similar programme to make East Anglia an attractive place to work. Matthew added onto this that ensuring we are a good employer and that staff feel that they are treated well and supported will help to retain staff.
7.8	Nicola Scrivings mentioned that 50 apprenticeships is very ambitious. Anne added that apprenticeships can have implications on staff who are needed to spend time supporting them. Matthew explained that numbers should be clear by September.
7.9	Julia Sirett pointed out that the number of staff put through the care certificate is a huge achievement (point 11.5 of report).
7.10	Nicola Scrivings thanked Angela for the updates against previous activity and the board accepted the report and recommendations. Next update will be November 2018.
8.	Audit Committee
8.1	Geoff Lambert explained that the counter fraud tool has been rated amber and that we are unlikely to get better than amber due to no fraud cases coming in. Board agrees that this is a fair assessment.

8.2	Safeguarding supervision audit had been requested by the Chief Nurse as there was some concern around potential shortcomings. Recommendations have been noted and put in place. Geoff explained that this was a good use of internal audit time.
8.3	David Vickers questioned what was meant by the last bullet point re financial pressures impacting the whole healthcare system. Matthew explained that all audit firms are likely to have this opinion of the NHS as a whole. Matthew went on to say that there are good controls in place for the NHS and we are not viewed as a risk.
8.4	No further concerns or feedback from board around the audit report.
9.	Chair and CEO Report
9.1	Matthew Winn took the report as read.
9.2	Gill Thomas highlighted her frustration with point 2.1 of report and the time taken to reach this point.
9.3	Matthew explained that there is a lot going on with the Lord Carter Improvement Board around community and mental health trusts. The network starts on 10th May. Nicola took this time to thank Matthew for his role in this and for leading these conversations nationally.
9.4	Gill Thomas raised concern to sign off the self-certification and questioned the wording. Nicola added that the Board's recommendation should be to word this in the same way as we did last year as nothing should have changed. Nicola also queried the second paragraph where it says 'legally' and asked what does this mean? Matthew explained that this refers to Foundation Trusts only. Gill asked that this is reworded as we cannot agree to comply with licence if we do not have one. Action: Taff Gidi to relook at wording from last year and revamp. Nicola will then sign this off.
9.5	Matthew asked the board to note the system work for Cambridgeshire and Peterborough STP. The governance framework has been refreshed for sign off. The revamped STP Board will be chaired by Chair of Addenbrookes for the next 6 months.
9.6	Matthew highlighted the new risk that had been raised which was around workforce challenges. This fits in with the bi-annual workforce report and update on staffing within the quality report.
9.7	Nicola queried the wording on 3.6.20 and asked that Mark reword this. Action: Mark to reword sentence to say 'would be' instead of 'could be'.
9.8	Dr Anne McConville said she couldn't match the reds with the extreme risks. Matthew suggested this could be a timing issue. Action: Anita/Matthew to clarify with Taff Gidi when he is back from leave and to update the Board outside of the meeting.
10.	Any other Business
10.1	Nicola stated that she was very impressed with the induction process for Bedfordshire staff. She saw/heard some good quality discussions taking place at the event she attended. Nicola thanked all leads for taking the time to attend/run these sessions and for visiting teams either side of the Easter weekend. She had received feedback that staff were very appreciative of this.
10.2	Anita reminded all Board members about our annual staff award event booked for 5 th July in the afternoon. This will take place at Newmarket racecourse.
10.3	Julia reminded the Board that it was national nurses' day on 12 th May but there will be a different approach due to NHS70. Julia mentioned that there will be an AHP day in October.
10.4	Geoff informed the board that a new de-fib had been purchased by Luton community via charitable funds and that this had been installed at Noah's homeless shelter in Luton.

Date of next Public Trust Board Meeting 11 July 2018

Venue: Training Room, Suite 3, Cringleford Business Centre, Intwood Road, Norfolk, NR4 6AU