



**Minutes of the Meeting of the BOARD OF DIRECTORS
held on Tuesday 24 September 2019 in the Undergraduate Common Room, Medical
Education Centre, Northern General Hospital**

PRESENT:

Mr. T. Pedder	Chairman
Mr. T. Buckham	Non-Executive Director
Ms. A. Gibbs	Director of Strategy and Planning
Mr. M. Gwilliam	Director of Human Resources and Staff Development
Mr. M. Harper	Chief Operating Officer
Dr. D. Hughes	Medical Director
Ms. A. Laban	Non-Executive Director
Ms. K. Major	Chief Executive
Mr. C. Morley	Chief Nurse
Prof. C. Newman	Non-Executive Director
Mr. J. O'Kane	Non-Executive Director
Mr. N. Priestley	Director of Finance
Mr. M. Temple	Non-Executive Director
Ms. S. Wright	Non-Executive Director

PARTICIPATING DIRECTORS:

Ms. S. Carman	Assistant Chief Executive
Ms. J. Phelan	Communications and Marketing Director

IN ATTENDANCE:

Ms. C. Bailey	Nurse Director, MSK (STH/119/19)
Mr. S. Buckley	Clinical Director, MSK (STH/119/19)
Ms. R. Winterbottom	Business Manager, Board of Directors (Minutes)

OBSERVERS:

One member of staff
10 Governors
One member of the public

STH/118/19

Declarations of Interest

There were no declarations made.

STH/119/19

Clinical Update: Orthopaedic Outcomes Improvement Work

The Chief Nurse welcomed Catherine Bailey, Nurse Director, Musculoskeletal (MSK) and Simon Buckley, Clinical Director, MSK. Catherine and Simon gave a presentation on the Orthopaedic Outcomes Improvement work that had been undertaken to reduce surgical infection rates in arthroplasty cases.

Following the presentation the Board had a discussion:

The Chairman asked about the main reasons that some people still develop infections. Catherine explained that cases of infections were now incidental and individual reasons.

The Chairman also asked about where the Trust benchmarked against Trusts of a similar size. Catherine and Simon confirmed that the Trust performed well when compared to other Trusts of a similar size.

Noting that patients were monitored for 12 months post-surgery Annette Laban enquired what had been done in terms of education for community and primary care colleagues who would also be caring for patients during this time. Catherine confirmed that work was being done with GP's and the Combined Community and Acute Group to enable easy escalation back to the hospital should an infection arise in the community.

Shiella Wright asked a question about how successfully the learning from the improvement work had been shared across other directorates. Catherine explained that the learning had been shared both formally at official forums such as the Infection Control Forum and informally, there had been a cultural spread of learning which had meant that many of the initiatives were now widely considered as business as usual.

The Board thanked the team for their hard work in further improving infection rates and for their interesting presentation.

STH/120/19

Minutes of the Previous Meeting held on Tuesday 30 July 2019

The Minutes of the previous meeting held on Tuesday 30 July 2019 were **AGREED**, **APPROVED** and **SIGNED** by the Chairman as a correct record of the meeting.

STH/121/19

Matters Arising

a) **STH/109/19 Cancellations**

The Chief Nurse confirmed that a verbal update on the improvement work being undertaken on cancellations would be brought to Board of Directors in October 2019.

b) **STH/110/19 Learning From Deaths**

The Medical Director sought clarification on the information requested by the Board relating to the role of the coroner. The Board requested that the Medical Director provide a note to set out how cases flow to the coroner.

c) STH/111/19 Cancer Update

The Director of Strategy and Planning noted that she had escalated the issues affecting cancer performance for shared pathways through the Cancer Alliance.

In relation to clinical capacity the Chief Executive gave an update around the pension's taxation issue affecting senior staff. She noted that the NHS Confederation had published guidance setting out a range of temporary measures that Trusts could implement to mitigate the impact. She noted that all of the options had associated risks and unintended consequences. The Trust Executive Group would formally appraise each of the temporary measures however, the Chief Executive highlighted to the Board that there was no straightforward solution to the issue.

In parallel to this the Department of Health and Social care had launched a new consultation on the issue. The Director of Human Resources and Staff Development confirmed he was working with Shelford colleagues to provide a collective response to this consultation.

STH/122/19

Chief Executive's Matters

The Chief Executive presented her report (Enclosure B) which highlighted the following matters:

(a) Integrated Performance Report

The Chief Executive noted that the Integrated Performance Reports (IPR) for both June and July 2019 had been shared with the agenda papers due to the fact that there was no Board meeting held in August 2019. The June 2019 IPR had been shared for information and the July 2019 IPR was the focus of the update.

• Deep Dive – Delayed Transfers of Care (DToC)

The Chief Operating Officer highlighted a range of measures implemented by the Trust and Sheffield Health and Social Care partners, overseen by the Why Not Home Why Not Today Board. He noted that the result of this work was a significant reduction in the volume of delayed patients and the number of bed nights lost to DToC.

The Chairman asked about the level of confidence in maintaining the DToC position through the winter months. The Chief Operating Officer assured that he was confident that the position could be maintained, he noted the closer working across health and social care was embedded and that the approach developed with system partners for provision of offsite community beds which had been evaluated as having a positive impact for 2018/19 would be continued for winter 2019/20.

Noting the recent visit of system leaders to Bradford as part of the CQC Local System Review, Annette Laban asked about the applicability of learning from

the Children's respiratory ambulatory care model. The Chief Operating Officer highlighted that the focus on 'step up' care within the Bradford pathways had been an important success factor.

Chris Newman joined the meeting.

Each Executive Director gave a brief report on their areas of responsibility:

- Deliver the best clinical outcomes

The Medical Director noted that Hospital Standardised Mortality Ratios (HSMR) mortality indicator had now returned to within the expected range.

The Medical Director highlighted the following points from the Healthcare Governance Committee held on 15 July 2019:

- The Clinical Effectiveness Annual Report was presented covering the 12-month period from 1 January 2018 to 31 December 2018.
- It was noted that a new process linking outcomes and themes from Serious Incidents, Never Events and Learning from Deaths to improvement workstreams was to be agreed and tested by the end of 2019.
- The Organ Donation Annual Report had been presented. He noted that key performance indicators had been maintained at the high levels achieved in the previous year.

The Chief Nurse highlighted the following points;

- There were no cases of Trust assigned MRSA bacteraemia recorded for the month of July 2019.
- Cases of MSSA Bacteraemia are now reported on a quarterly basis. The Trust recorded 13 cases Trust attributable cases of MSSA bacteraemia in quarter one of 2019/20 which was below the threshold of 16.
- Cases of C. diff are now also reported on a quarterly basis. The Trust recorded 27 cases of C.diff in quarter one of 2019/20 against an official threshold of 42 cases.

- Provide patient-centred services

The Chief Nurse highlighted the following points;

- The Friends and Family Scores for July 2019 were:
 - Inpatient – 95% which is achieving the internal target of 95%.
 - A&E – 81% which did not meet the internal target of 86%
 - Community – 89% which did not meet the internal target of 90%
 - Maternity – 96% which is better than the internal target of 95%

The Chief Nurse added that further work was being undertaken with regards A&E and Community to address these scores.

The Chief Operating Officer highlighted the following points:

- The activity performance for July 2019 was:
 - Referrals received were above the baseline level included in the Trust's plan.
 - New outpatient activity was 2.6% below the contract target.
 - Follow up outpatient activity was 1.1% below the contract target.

The Chief Operating Officer explained that work was underway with directorates around specific recovery plans to improve the position with regards to outpatients.

- Accident and Emergency activity was 4.3% above the target.
- Elective activity was 5.6% below the contract target.
- Non-elective activity was 1.0% above the contract target.
- The average number of patients who had a delayed transfer of care in July 2019 was 54 compared to 43 in June 2019.
- 89 operations were cancelled on the day for non-clinical reasons in July 2019 compared to 66 in June 2019. All patients were re-admitted within 28 days.

The Chief Operating Officer highlighted the significant work that had taken place to ensure patients who had operations cancelled on the day were readmitted within 28 days.

- At the end of July 2019 the percentage of patients waiting less than 6 weeks for their diagnostic test was 99.98% which is above the national target of 99%. This was an improvement in the position from May and June 2019.
- 83.52% of patients attending A&E were seen within four hours in July 2019 compared to a local target of 90% and the national target of 95%.
- 50.99% of ambulance handovers occurred within 15 minutes in July 2019 compared to 49.68% in June 2019; 4.77% of ambulance handovers took more than 30 minutes in July 2019 compared to 8.27% in June 2019.

The Chief Operating Officer noted that work continued with the team to improve ambulance handover times.

- The percentage of patients who had been waiting less than 18 weeks for their treatment at the end of July 2019 was 93.13% which is better than the national target (92%). The percentage of patients who received treatment in July 2019 and had waited

less than 18 weeks was 79.81% for admitted patients (local target 90%) and 91.39% for non-admitted patients (local target 95%).

- There were no patients waiting over 52 weeks for treatment.

Annette Laban highlighted concerns around the Patient Treatment List (PTL) waiting list. She highlighted the work being done by the Performance and Information Director to identify if this is an issue for certain specialities or across the board.

The Director of Strategy and Planning highlighted the following points:

- For Q1, cancer waiting times were achieved for two week wait despite significant increases in referrals.
- For the breast symptomatic two week wait pathways, Q1 performance was 89.2% against a threshold of 93%. The Director of Strategy and Planning noted that national performance was at 77% and that performance had improved in August 2019.
- With regard to the 62 day referral to treatment standard, STH performance for non-shared pathways was 79.6% against a threshold of 85%. Shared performance continued to be an issue 74.1% against a threshold of 85%. She highlighted that delays to inter provider transfers from referring trusts were proving a significant challenge.

The Director of Strategy and Planning explained that the issue with shared pathways had been escalated via Chief Executive Forums and via ICS structures.

Both the Chairman and Annette Laban were felt strongly that the Trust should continue to highlight the issues around the 38 day inter provider transfers, The Director of Strategy and Planning explained that the Cancer Alliance was carrying out root cause analysis on individual breaches.

The Board requested monthly updates on the situation.

Action: Director of Strategy and Planning

- Employing caring and cared for staff

The Director of Human Resources and Staff Development highlighted the following points:

- Sickness absence in July 2019 was 4.0%. The year to date figure is 3.9%, which is below the Trust target of 4.0%.
- Short term absence for July 2019 was 1.6%.
- Long term absence for July 2019 was 2.5%.

- The Trust appraisal rate for July 2019 was 90%, which met the Trust target of 90%.
 - Compliance levels for mandatory training are at 90%, which met the Trust target of 90%.
 - Lowest turnover rates for July were 3.7% for Healthcare Scientist staff and the highest leaver rates were 9.7% for Administrative and Clerical roles.
- Spending public money wisely

The Director of Finance highlighted the following points:

- The Month 4 position shows a £1697.0k (0.5%) deficit against the financial plan which is a £0.4m deterioration on the Month 3 position.
- There was an activity income under-performance of £2.4 m to the end of July 2019, a deterioration of £0.8m in month. The deficit is mainly on elective, out-patients and critical care activity.
- There was a pay overspend of just under £1.5m (0.7%) after four months. Bank and Agency costs were £1.6m above the 2018/19 level for the same period. Medical and Dental staffing remains the main pressure area.
- There was a £1.1m under delivery against efficiency plans at the end of July 2019.
- The key risks for 2019/20 relate to internal delivery of activity, efficiency and financial plans, residual contracting issues, receipt of CQUIN and finalisation of the Blended Payment value with the Sheffield CCG; financial, workforce and service pressures and receipt of the Provider Sustainability Funding (PSF).
- The Director of Finance noted that the recent announcement by the Prime Minister of additional capital funding had meant that the pressure on the Trust to reduce capital expenditure for 2019/20 had been alleviated and that the Trust would be able to follow its capital plan as submitted in April 2019.

The Chairman asked if the flu vaccination programme would be impacted by the EU exit. The Chief Operating Officer stated that the Trust was due to receive vaccinations that week and that 80% of the UK's flu vaccinations were expected to arrive in the UK before 31 October 2019. The Chief Operating Officer did not expect issues with availability of the vaccine to cause a problem.

- Delivering excellent research, education and innovation

The Medical Director noted the number of patient accruals to portfolio grant and commercial studies for 2019/20 Q1 were 1122. This was below the Yorkshire and Humber Clinical Research Network Q1 target of 2291. The

Medical Director explained that he expected this trend to improve and would look at putting a recovery plan in place.

The Chief Executive gave the following updates:

- Associate Medical Director for Cancer

Nigel Beasley, Ear, Nose and Throat Consultant Surgeon had been appointed to succeed Alan Gillespie as Associate Medical Director for Cancer, with effect from 1 September 2019

The Chief Executive extended the Board's thanks to Alan Gillespie for his work in the role during the last 6 years.

- EDI Network Recruitment

Three formal staff support networks have been established to raise awareness of equality, diversity and inclusion matters and provide support for BAME, Disabled and LGBTQ+ colleagues. Recruitment was underway to appoint to core roles for the networks. As of the closing date, 15 applications have been received and interviews are scheduled for the end of September/ early October.

- Health Heroes Award

The Chief Executive highlighted that Reg Ramsden who is the Trust's Laundry and Linen Services Manager was a national finalist in the Operational Services Support Worker category of the Our Health Heroes Awards. In his nomination he was particularly praised for the support given in helping young adults with autism, physical and learning disabilities. Reg and the team offered internship placements to give individuals confidence and provide life and work experience.

- Visit from the Chief Nursing Officer for England

Ruth May the Chief Nursing Officer (CNO) for England had visited Weston Park Cancer Centre to present two nursing colleagues with special awards. The Board congratulated Kerry Hopcraft, Senior Sister within MAPS and Ruth Dransfield, Senior Sister within Surgical Services who had both received the CNO Silver award.

- Give it a Go Week

The Chief Executive highlighted that hundreds of colleagues had tried out new ideas as part of the annual Give it a Go Week, which had commenced on the 16 September 2019. She noted the enthusiasm from staff and the varied range of ideas that had been trialled. An evaluation was taking place and a summary of the outcomes will be made available in due course.

- CT Operational Update

Following the recent outage, both CT scanners at RHH were now fully functional. The mobile scanners at NGH and RHH were no longer required. The Chief Executive extended the Boards thanks to all staff for their

excellent work in managing this situation and their resilience in ensuring the service continued to function.

- Sheffield Accountable Care Partnership

An overview of programme activities for the Sheffield Accountable Care Partnership (ACP) had been provided by the Programme Director and was included at Appendix B.

The Chief Executive added that she would be commencing the role as the ACP Lead CEO from the end of the week.

- South Yorkshire and Bassetlaw Integrated Care System (SY&B ICS)

The report from the Chief Executive of SY&B ICS was attached as Appendix C to the Chief Executive's report.

- EU Exit

Noting the ongoing uncertainty around the EU exit the Chief Executive reported that the Trust was planning for the possible impact of various EU exit scenarios including a no-deal. She explained that citywide plans were also been put in place. She also noted the support to staff who are EU citizens including legal briefing sessions and a dedicated intranet page.

- The Royal College of Nursing International Research Conference 2019

The Royal College of Nursing International Research Conference was held in Sheffield on 3 – 5 September 2019. The Chief Executive reported that this had been a successful conference and thanked the team, staff and volunteers involved in organising the day.

- Chair Appointment – NHS Sheffield CCG

The Chief Executive notified the Board that Dr Terry Hudson had been elected as the new chair for NHS Sheffield CCG. Terry had worked as a GP in the city for six years and had been a GP member of governing body since 2017. He is currently a GP at University of Sheffield Health Service.

- Annual Members' Meeting

The Trusts Annual Members' Meeting had taken place on 17 September 2019 with over 100 attendees' including Governors, Members, patients and staff. There were presentations on performance and developments along with a market place of stalls. The Chief Executive reported that the meeting had gone well and that there was a good level engagement from attendees. An evaluation of the meeting would follow and the Council of Governors would be reflecting on the meeting later that afternoon.

- Endoscopy Unit Accreditation

The Endoscopy Units at both the Royal Hallamshire and Northern General Hospitals have been awarded Joint Accreditation Group on GI Endoscopy accreditation.

- National Skills Academy for Health (NSAH) Quality Mark

The Trust had been awarded the National Skills Academy for Health (NSAH) Quality Mark in recognition of the high standard of training provision on offer to staff.

- Health Foundation's Advancing Applied Analytics Programme

The Chief Executive noted that the Trust had been awarded £67,000 from the Health Foundation's Advancing Applied Analytics programme to develop innovative new software which could transform NHS outpatient care.

- British Society of Gastroenterology's Hopkins Endoscopy Prize

The Chief Executive extended congratulations to Professor David Sanders, Consultant Gastroenterologist who had been awarded the British Society of Gastroenterology's Hopkins Endoscopy Prize for innovation and research in endoscopy.

- New Fruit and Vegetable Stalls

The Chief Executive noted that the new fruit and vegetable stalls at the Hallamshire and Northern had proved very popular with patients and staff.

STH/123/19

Emergency Preparedness Resilience and Response (EPRR) Core Standards

The Chief Operating Officer referred to Enclosure D the annual report for Emergency Planning noting that the Emergency Preparedness, Resilience and Response Core Standards for 2019/20 require the annual report for Emergency Planning to be signed off by the Board.

The report outlined the work undertaken by the Emergency Planning Team since April 2018 to ensure that arrangements are in place to respond to business continuity and emergency planning challenges.

The Chief Operating Officer reported that the Trust was substantially compliant meeting 89-99% of the required target. He noted that the paper had been presented to both the Trust Executive Group and the Healthcare Governance Committee.

The Board of Directors;

- **NOTED** the content of the report.
- **CONFIRMED** that they were assured that the Trust had well established systems and processes in place for responding to potential emergency and business continuity interruptions.

STH/124/19

Chairman and Non-Executive Director Matters

Annette Laban noted that she had recently been involved in the successful recruitment of three consultant radiologist posts. She remarked that all three candidates were strong.

The Medical Director noted that where possible the Trust was converting locum posts into substantive roles.

Shiella Wright raised two matters; firstly that she had been involved in the recruitment of a cardiology consultant. She noted that four of the 25 applicants had been shortlisted and an excellent appointment had been made. Secondly Sheila reported that she had attended a Combined Community and Acute Group Conference. She commented that the event was excellent and was well attended by a wide range of community services and encouraged Board members to attend in future.

The Chairman made a request that the Trust review and refresh its green credentials in light of the current issues around the climate emergency and sustainability. The Chief Executive noted that TEG were currently discussing this matter and that a range of measures were already in place across the Trust including measures to limit the plastic waste produced by the Trust.

The Chief Executive and the Trust Executive Group would be considering how to further build sustainability into the Trust's strategic approach.

STH/125/19

For Approval

a) Board of Directors Terms of Reference

The Assistant Chief Executive reported that an annual review of the Board's Terms of Reference had been undertaken and that they had been updated. She highlighted the changes to note, which were:

- Non-material updates to titles in the membership section (section 5.1)
- The inclusion of the Chief Operating Officer as a member of the Board (section 5.1)
- The addition of a reference to the Board's civic responsibility to the wider community (section 1.12)
- A change in the description of the frequency of meetings of the Board held in public (section 7).

The Board of Directors **APPROVED** the revised Terms of Reference

STH/126/19

Any Other Business

No additional items were raised.

STH/127/19

Date and Time of Next Meeting

The next Board of Directors meeting will be held on Tuesday 29 October 2019, in the Undergraduate Common Room, Medical Education Centre, Northern General Hospital at a time to be confirmed.

Signed Date
Chairman