

Un-Confirmed MINUTES of a Public meeting of the Board of Directors held at 13:00 on Wednesday 30th March 2017 in Classroom 1, Level 1, King's Mill Hospital

Present:	Ray Dawson	Acting Chair	RD
	Neal Gossage	Non – Executive Director	NG
	Graham Ward	Non – Executive Director	GW
	Ruby Beech	Non – Executive Director	RB
	Claire Ward	Non – Executive Director	CW
	Peter Herring	Chief Executive	PH
	Shirley Clarke	Head of Corporate Affairs & Company Secretary	SC
	Paul Robinson	Chief Financial Officer	PR
	Julie Bacon	Director of HR & OD	JB
	Dr Andrew Haynes	Executive Medical Director	AH
	Roz Howie	Chief Operating Officer	RH
	Suzanne Banks	Chief Nurse	SB
	Peter Wozencroft	Director of Strategic Planning & Commercial Development	PW
	Jo Yeaman	Director of Communications	JY

In Attendance:	Joanne Walker	Minutes
	Alison Whitham	Head of Midwifery and Matron for Children's Services
	Phil Bolton	Deputy Chief Nurse Operations
	Kerry Bosworth	Practice Development Midwife
	Paula Shore	Maternity Service User
	Claire Handford	Maternity Service User
	Al-Samarrai Susanna	Consultant Obstetrician/Gynaecology

Observers:	Kev Rogers	Mansfield & Ashfield Chad
	Annette Robinson	HR Business Partner
	Nick Brook	Member of the Public

Apologies:	John MacDonald	Chair
	Tim Reddish	Non – Executive Director

Item No.	Item	Action	Date
16/391	WELCOME		
	The meeting being quorate, RD declared the meeting open at 13:00 and confirmed that the meeting had been convened in accordance with the Trust's Constitution and Standing Orders.		
16/392	APOLOGIES FOR ABSENCE		
	It was CONFIRMED that apologies for absence had been received from T Reddish - Non-Executive Director.		
16/393	DECLARATIONS OF INTEREST		
	It was CONFIRMED that there were no additional declarations of interest relating to items on the agenda.		
16/394	PATIENT STORY – NOBODY'S PATIENT		
25 mins	<p>SB advised that a 'Who's Shoes' event had taken place on 10th February 2017 at KMH. SB introduced service users Clare Handford and Paula Shore who was accompanied by baby Iris, and Practice Development Midwife Kerry Bosworth (KB).</p> <p>KB explained that 'Who's Shoes' was launched a year ago and was piloted by a number of London hospitals. The aim of the programme is to obtain feedback from service users to help to improve the service. This programme is now nationally recommended as a tool to create client user groups that become involved in designing services.</p> <p>SFHFT submitted a successful bid for 'Who's Shoes' to hold an event at KMH which occurred on 10th February 2017. The enthusiasm within the room was evident and the event was deemed a great success by all in attendance. The thoughts and opinions of the Mum's on the day have been laminated and will be put up on the wall outside the maternity unit.</p> <p>Paula and Clare felt that the day was very useful and a great opportunity to discuss their feelings. It was also an opportunity to talk to staff and to obtain their views.</p> <p>PH enquired if practices would be changed as a result of the feedback received from the service users on the day. KB advised that there were a number of quick wins including 'birth afterthoughts', which is an email service but users were unaware of who they were emailing and KB confirmed that this will now be defined. Some of the language and medical terms used were also raised as a concern to a number of service users including 'failure to progress' and 'allow', these terms will now be avoided during discussions with service users.</p> <p>KB stated that the maternity unit, with the support of the Trust, intend to run 'Who's Shoes' events on a 6 monthly basis.</p>		

	<p>'Who's Shoes' is not unique to maternity, the format will be used in other areas and SB advised that the possibility of holding such an event in the dementia unit is already being explored.</p> <p>RB enquired if Paula and Clare felt that they had been listened to. Paula and Clare confirmed that they did and had very much welcomed the opportunity to attend the event.</p> <p>GW felt that this was a superb example of obtaining patient experiences which will help the Trust in their aim of achieving 'outstanding'.</p> <p>RD thanked Paula, Clare and baby Iris for attending the meeting and sharing their experiences with the Board of Directors.</p>		
16/395	MINUTES OF THE PREVIOUS MEETING		
	<p>Following a review of the minutes of the Board of Directors in Public held on 22nd February 2017, the Board of Directors APPROVED the minutes as a true and accurate record.</p>		
16/396	MATTERS ARISING/ACTION LOG		
1 min	<p>The Board of Directors AGREED:</p> <p>Action 16/372.2 was included on the agenda and could therefore be removed from the action tracker.</p> <p>Action 16/313.3 was included in the report of the OD & Workforce Committee and could therefore be removed from the action racker.</p>		
16/397	CHAIR'S REPORT		
3 mins	<p>The Board of Directors were ASSURED by the report.</p>		
16/398	CHIEF EXECUTIVES REPORT		
11 mins	<p>PH was pleased to advise the Board of Directors that the excellent work of SFHFT's staff is being recognised, once again, at a national level with two teams shortlisted in this year's Patient Safety Congress's Patient Safety Awards.</p> <p>SFHFT's Sepsis team have been shortlisted as finalists for the 'Best Patient Safety Improvement' award. This is testament to the hard work and dedication of the team as well as staff throughout the Trust who have transformed Sherwood Forest Hospitals into one of the best-performing Trusts in the country for managing and treating this potentially fatal condition.</p> <p>SFHFT's Infection Prevention and Control team have also been shortlisted in the 'Infection Prevention Control in Patient Safety' category for working collaboratively with other areas of the Trust. Their entry focuses on the improvements they have made to systems and processes to result in the reduction and improved management of infections, particularly C. Diff.</p>		

	<p>Overall winners will be announced at a ceremony in Manchester in July.</p> <p>On behalf of the Board of Directors, PH wished both teams success at the awards and thanked them for their outstanding work. PH was pleased to see the results of the staff survey which shows an improved and positive culture within the organisation.</p> <p>PH advised of a potential significant risk to SFHFT arising from new rules being introduced from 1st April. IR35 is the taxation of professionals undertaking agency work for NHS Trust. Significant contingency plans and control mechanisms are in place to mitigate the impact.</p> <p>The Board of Directors were ASSURED by the report.</p>		
<p>16/399</p>	<p>SINGLE OVERSIGHT FRAMEWORK PERFORMANCE REPORT</p>		
<p>21 mins</p>	<p>QUALITY, SAFETY AND PATIENT EXPERIENCE</p> <p>SB advised that HSMR and SHMI continue to show a downward trend and are both now showing that the mortality for SFHFT is below the expected range. This has been a sustained period throughout 2016/17. Crude mortality has reduced and is now less erratic although the most recent data indicates high crude mortality but this is expected during the winter period.</p> <p>SB advised that the Trust continues to demonstrate an overall variation in the reduction of the percentage of falls per 1000 bed days. The Trust's figure for January 2017 is 6.36, the national average is 6.63. February's position has slightly increased but SB felt that it should be recognised that the Trust has opened extra bed capacity and there was an increase in the acuity of patients throughout January and early February. Targeted work continues particularly in relation to patients having repeat falls where there has been a reduction. The Royal College of Physicians has released some additional guidance documents regarding bedside vision checking to prevent falls. SB is looking at ways of incorporating this as the Trust's wider profile.</p> <p>SB advised that the Trust's C-Diff threshold is set to 48 for up to the end of March, the Trust's current position is 28. Last year SFHFT reported 47 cases, 67 cases were reported the year prior. This shows a significant reduction.</p> <p>Whilst the Accident & Emergency and inpatient Friends and Family Test (FFT) response rates remain below the performance threshold, the work programme which has been focusing on the reintroduction of FFT for the previous 12 months to improve both the quality of the process and the response rate, is having a positive impact. Areas not completing FFT's have been identified and are now included in the FFT capture. Additional iPads have been purchased by the Nursing Directorate and are being rolled out to ward areas. The focus for text messaging is to ensure that patient's demographics are correct.</p>		

Staff have also been reminded to give out and encourage patients to complete paper questionnaires in children's area as this is not covered by text messaging.

Although those responding are reporting a positive experience, SFHFT are still not obtaining an adequate number of responses.

For safe staffing, SB advised that during February, 17 wards of the 29 areas monitored had overfills. This was a decrease from January when 19 wards were identified and relate to both increased patient acuity, increased dependency and additional capacity related to the winter pressures. The overfills linked to unregistered staff are seen mainly within the medical division, although surgical wards on occasion require additional staff to support with increased dependency. All establishments have been reviewed across all ward areas, these reviews are in the process of being signed off by each of the Divisions and SB anticipates that this will further reduce the overfills.

SB advised that the 'Safe Care' module is being introduced within the Trust. It is part of the e-Rostering programme and identifies the staffing position on a twice daily basis alongside the acuity of patients on those ward areas. The system portrays a view of what is happening in the ward areas at a glance thus enabling staff to be moved accordingly.

SB advised that there are an increased number of vacancies within the registered nursing workforce within EAU. Support is being provided and a targeted recruitment campaign has been initiated.

PM presented an exception report regarding Serious Incidents (SI) and advised that the Trust has reached its threshold. An analysis of the incidents over the last three years has been conducted which identifies that a pattern emerges each January to March whereby SI's increase. This pattern is beginning to emerge which has caused the threshold breach, although the increase is much lower this year than that of 2014, 2015 and 2016. The nature of events and underlying causes are being analysed and this information will be used to inform the Quality Programme.

OPERATIONAL STANDARDS

RH advised that the Emergency Access standard was achieved both in Q2 and Q3. As of 19th March 2017, the Trust is achieving 95.71% and remains one of the top 10 Trust's across the country for performance over this period.

January's achievement was compromised by a number of factors including the acuity of patients and an increase in length of stay. A significant increase in demand in early January and an increase in delayed transfers of care also contributed. A number of actions were taken including decreasing elective operating, specifically during the first two weeks of January and the opening of 50 additional beds. A similar pattern of increased acuity, longer length of stay and an increase in demand continued into the first two weeks of February.

The demand began to reduce from the third week in February although the level of acuity remained. The target was narrowly missed in February at 94.44%.

The 21 bedded winter ward and the 12 contingency beds that had been opened at Newark were closed towards the end of February.

Short stay capacity remains open on ward 36, this helps to manage flow throughout the hospital and a model is being developed to keep the beds on ward 36 open and to close other beds.

March to date the Trust has achieved 94.97% so are on track to achieve the target in March. There is a risk in April due to issues regarding IR35 and staffing gaps within the Emergency Department and the Urgent Care Centre at Newark. Work to mitigate those risks continues.

RH advised that for the 52 weeks RTT target, 92.9% was achieved in February and SFHFT are forecast to achieve 93% in March.

Two patients that breached the 52 week RTT were identified as having been transferred to other providers. These providers state that the referrals were never received and as such RH has written to both organisations to reiterate the process. Two additional validators have been appointed within SFHFT to validate clock stops and clock starts.

RH advised that 7 of the 9 cancer targets have been achieved for last 3 months including the 62 day classic standard. The Trust are forecasting achievement of that standard in March and to achieve all cancer standards in Q4.

There are five specialties in which the RTT standard is not being achieved. The Trust are working with NUH in terms of pathways in three of these specialties, ENT, neurology and urology and are well sighted on the difficulties around these three specialties.

Having had to stand down elective operating over Christmas and the New Year and the subsequent two weeks of January in Trauma & Orthopaedics, this area is beginning to resume and the backlog is reducing.

The DM01 standard was achieved in February for the first time in a number of months having achieved 99.16%. The Trust are forecast to achieve in March. RH felt that this was a very positive testament to the hard work of the cardiology and endoscopy teams.

RH advised that theatre utilisation is above the national target currently. SFHFT's DNA rates are the lowest ever for new and follow up patients.

RD enquired what SFHFT's position was in terms of national performance for the 4 hour target. RH advised that the last published figures were December which ranked SFHFT 8th in the Country. January's figures have not yet been published. PH advised that SFHFT are regularly rated within the top 10 in the Country.

NG enquired how acuity was measured. SB advised that there is a specific measure for acuity that clearly identifies patients' requirements.

RH advised that the tariff is also a measure of acuity. The tariff rises because of the increased acuity and increased comorbidities.

PH stated that the point behind the targets is patient safety and patient experience and enquired as to the Trust's position in these areas. RH advised that in Q4 2015/16 SFHFT achieved 91.17%, in Q4 YTD 93.89% has been achieved.

ORGANISATIONAL HEALTH

JB advised that the Trust has made positive progress over the last 12 months in relation to managing sickness absence effectively. Sickness absence figures decreased in February to 4.05%, (January 4.36%). However, it is unlikely that the 3.5% target will be met in the final quarter of 2016/17, although continued reduction is expected. This is a better position than that of the same period last year.

The Trust has engaged more new starters compared to the number of those that have left the Trust. There is also a slight decrease in band 5 registered nurses vacancies. The over establishment of un-registered nurses is intentional and necessary because of the flexibility required. Up to 36 Health Care Assistants (HCA) are recruited to the virtual ward and this prevents the need to use more expensive agency staff. PH requested that the establishment figure be adjusted to reflect this.

Appraisal compliance Trust wide in February 2017 was 93%. The target is 98% and although the target has not been achieved, it is remaining fairly constant and is only 2% away from the new April target of 95%.

Mandatory training remained static at 92% in February for the fourth consecutive month. The Trust continues to exceed the target of 90% (92% with a 2% tolerance).

FINANCE REPORT

PR advised that financial performance compared with plan remains good. The Trust is £0.48m ahead of its YTD control total excluding LTP costs. Capital expenditure is £0.93m behind plan and is forecast to be £0.24m less than the NHSI capital review control total at year end as agreed with NHSI when accessing cash.

The Trust continues to forecast achievement of its control total and as a result is forecasting receipt of an additional £0.50m of STF incentive funding and assumes an unsuccessful appeal on ED performance when compared to the trajectory. There is some uncertainty around Q4 determination of S & T funding which may well mean that the Trust is paid on financial outturns and this additional resource which will improve the position.

Total costs for LTP are forecast to be £6.25m less than the £15.88m control total. However PR expects LTP costs to be in the region of £3.0m as NHSI continue to approve payments to NUH.

	<p>NHSI have announced an STF bonus scheme for Trust's who are ahead of their control total at month 12 and SFHFT could be in receipt of a bonus from unclaimed monies at the centre, however this will not be confirmed until all providers have submitted their month 12 numbers.</p> <p>PR advised that NHSI have now approved and released further capital funding and expects the forecast outturn of £9.29m to be delivered.</p> <p>RD enquired what items were being funded out of the LTP to NUH. PR advised that this relates to plans that NUH had in respect of the merger. NHSI considered those cases and further payments have now been agreed between NHSI and NUH.</p> <p>GW stated that SFHFT will potentially incur ongoing interest charges, although this is subject to challenge to NHSI. PH advised that this matter was raised at the Performance Review Meeting on 27th March 2017 where the point was made that SFHFT should not be technically penalised because of the steps that were taken regarding the LTP costs.</p> <p>PR advised that a response to the challenges that acute providers have made against control totals is expected in the next two weeks.</p> <p>RD stated that the report was very positive and considering that it reflects peak periods and winter pressures, RD felt that the results achieved were applaudable.</p> <p>The Board of Directors were ASSURED by the report.</p>		
<p>16/400</p>	<p>STAFF SURVEY REPORT</p>		
<p>5 mins</p>	<p>JB presented the report advising the Board of Directors of the key findings in the 2016 NHS Staff Survey which generally shows a significant improvement in many areas.</p> <p>The survey results and themes will be taken into account by Divisions and local actions developed in order to address any areas of concern. For those action areas that can be best addressed corporately or on a Trust wide basis, the key themes will be built into the Workforce Strategy (Maximising our Potential) Implementation Plans.</p> <p>GW felt that the results of the staff survey were very encouraging and pleasing to see. GW requested sight of the action plan upon completion. PH advised that there won't be a specific action plan because the actions are embraced in the achievement of the Strategic Plan. To assure the Board of Directors JB advised that the Workforce Strategy has six operational plans and reports will be provided to the OD & Workforce Committee.</p> <p>PH felt that 'communication between staff and their line managers' should be the area of focus. GW concurred and stated that this area has been an ongoing issue and it is key that improvements are made.</p> <p>The Board of Directors were ASSURED by the report.</p>		

16/401	NURSE RECRUITMENT REPORT		
11 mins	<p>SB presented the report advising that the nursing workforce at SFHFT makes up 30% of the total workforce. SFHFT currently has 18% band 5 Registered Nurse vacancies and coupled with a high agency spend to cover these vacancies, focus on a number of initiatives have been taking place to try to recruit to fill the gap.</p> <p>Over the course of a typical year there are always peaks in new recruits around September due to when newly qualified nurses join from universities. SFHFT has good links with all local universities including Derby, Nottingham and Lincoln and regularly attends university job fairs and events to promote the Trust.</p> <p>A monthly breakdown of leavers is discussed at the Nursing Taskforce Steering Group (NTSG) to review any trends in reasons for leaving or highlight any issues for further investigation. SB has reintroduced that all resignations are brought to SB's attention who speaks with them personally.</p> <p>SB advised that a marketing company called 'Fluid' have been engaged to produce a new marketing and branding recruitment campaign for SFHFT. The key focus is on attracting registered nurses initially but will be updated in time to reflect the wider workforce.</p> <p>Many Trusts now use an assessment day approach to their nursing campaigns. SFHFT have already trialled this approach with HCA's and it is now the established route to employment for new HCA recruits.</p> <p>The NTSG has agreed to pilot an assessment day approach for nurses, the first of which is planned for the end of April 2017 and will utilise the new branding.</p> <p>The recruitment team have successfully used social media to improve the reach of nurse advertising.</p> <p>Because the Trust is competing with other parts of the NHS and other providers for a very shallow pool of registered nurses, it is important to maintain active contact with candidates to ensure SFHFT remain their chosen employer. One key initiative about to be launched is a series of postcards which will be sent to all nurse candidates at key intervals throughout their recruitment process.</p> <p>SB advised that a review of the existing workforce has highlighted that there are at least 20 employees who are trained nurses in their country of origin. In order to become Registered Nurses in the UK they would need to satisfy a number of requirements. SB is engaged in conversations with local Universities to develop a bespoke programme. SB advised that the BBC are attending KMH on 30/03/17 and will be focussing on the Associate Nurses and the work that SFHFT are conducting in Dentistry. The BBC has indicated a keen interest in joining the Trust in any overseas recruitment campaigns that SB considered would be an excellent promotional opportunity.</p>		

	<p>RD enquired if the nursing gap will ever close. SB felt that the nursing gap will never close and as such, alternative roles across the organisation should be considered. The Associate Nurse and Nurse Apprenticeship roles are examples of this. SB felt that the care that is needed on the ward and the individuals best skilled to provide that care should be considered. It is about thinking differently.</p> <p>NG stated that band 5 RN vacancies appear to be quite static throughout the year other than the peaks in August and October, and enquired when the vacancy rate is expected to reduce and over what period. SB advised that the exact position is not yet known but a trajectory has been made for if a recruitment campaign is conducted. SB felt that the big focus needs to be on retention in conjunction with recruitment.</p> <p>SFHFT are competing against surrounding teaching hospitals and need to create different and more attractive roles. SB has been talking to staff to understand what they would consider to be good opportunities. Some areas to consider are rotation posts and rotation posts with an education programme to support it. SB advised that SFHFT aren't the only Trust struggling with nursing vacancies but because of the improvements SFHFT has made over the past twelve months, SB anticipates that the Trust will become more attractive to potential staff, this view is supported by the increase in external applications.</p> <p>PH stated that in the period April 2016 – Sep 2016, there was the critical event of coming out of special measure and the CQC report. During this time the Trust had a net loss of 18 registered nurses. In the 5 months since Oct 2016, there has been a net increase of 27 new starters. If this trend continues the vacancy rate should drop. PH felt that this was encouraging and hoped that the new recruitment campaign will build on that.</p> <p>The Board of Directors were ASSURED by the report.</p>		
16/402	IG TOOLKIT SUBMISSION		
1 MIN	<p>PR advised that the IG Toolkit is due to be submitted on the 31st March 2017. The overall compliance is 'green satisfactory' with an initial score of 80%. It is envisaged that this score will increase as leads upload further information.</p> <p>PR advised that an internal audit completed by 360 Assurance offered 'significant assurance' with regards to this submission, the small number of actions raised in this report are currently being implemented.</p> <p>The Board of Directors APPROVED the submission of the IG Toolkit.</p>		
16/403	NEWARK STRATEGY – UPDATE		
10 MINS	<p>PW presented the report advising that in general there is increased and improving utilisation of facilities at Newark Hospital. More patients have been treated through all components of care provided at Newark Hospital.</p>		

	<p>RD enquired what impact the removal of the transport between Newark Hospital and KMH had. PW advised that there has been very little impact. The removal of transport was considered an inconvenience factor for some relatives and friends visiting patients from Newark at KMH. The very light use of the service formed part of the CCG's decision to remove it.</p> <p>CW emphasized that the increased outpatient attendances reflects the amount of work of all staff, particularly with engaging local GP's and patient groups to ensure they are driving activity through Newark Hospital.</p> <p>PH enquired, with regards to outpatients, if there was any perception of the total market share distribution and the degree of movement of people in Lincolnshire towards Newark Hospital.</p> <p>Action: Theatre utilisation and market share distribution to be included in the next Newark Strategy update.</p> <p>RD stated that specific targets were initially set in conjunction with the Better Together programme and although the framework has changed it may be that they are the targets that should be used for comparison.</p> <p>RH advised that there is an opportunity to conduct a space allocation analysis to identify further space that could be utilised for additional clinic capacity.</p> <p>The Board of Directors were ASSURED by the report.</p>	PW	29/06/17
16/404	COMMUNICATIONS STRATEGY		
3 mins	<p>JY presented the strategy and advised that the plan remains ambitious. JY felt that delivery of the strategy will support the Trust on its journey to becoming 'Outstanding'.</p> <p>JY announced that the Head of Communications and Deputy Head of Communications have now been appointed and will join the Trust imminently.</p> <p>RD on behalf of Board of Directors thanked JY for her contributions.</p> <p>The Board of Directors APPROVED the Communications Strategy.</p>		
16/405	SCHEME OF DELEGATION – AMENDMENTS		
2 mins	<p>PR presented the report advising that a number of regulatory charges are currently submitted to the Board of Directors for approval purely due to the invoice value.</p> <p>As these charges are not negotiable, it is proposed to add a new category of 'Mandatory Payments' within the Scheme of Delegation so that Board approval is not required.</p> <p>PR advised that the Audit Committee have approved this request and recommend that the Board of Directors ratify the proposal.</p>		

	<p>Pending the updates and changes proposed within the report and the amendment of Table A.1, 37. Risk Management – ‘compliance with statutory safeguarding children and young people requirements’, to be the responsibility of the Chief Nurse and not the Executive Medical Director, the Board of Directors RATIFIED the new category of ‘Mandatory Payments’ to be added to the Scheme of Delegation.</p>		
16/406	APPLICATION OF TRUST SEAL		
2 mins	<p>SC advised that the Sherwood Forest Hospitals (NHS) Trust Official Seal was affixed on 22 February 2017 to the following documents by the Chief Executive Officer and the Head of Corporate Affairs/ Company Secretary:-</p> <ul style="list-style-type: none"> Seal number 77: Deed of variation to Project Agreement & Soft Services Contract, Sherwood Forest Hospitals NHS Foundation Trust and Central Nottinghamshire Hospitals PLC and Compass Contract Services (UK) Ltd. <p>Subsequently the above were superseded and destroyed as the contractor has submitted incorrect documents and therefore the Sherwood Forest Hospitals (NHS) Trust Official Seal was affixed on 15th March 2017 to the following documents by the Chief Finance Officer and Non-Executive Director, Ray Dawson:-</p> <ul style="list-style-type: none"> Seal number 78: Deed of variation to Project Agreement & Soft Services Contract, Sherwood Forest Hospitals NHS Foundation Trust and Central Nottinghamshire Hospitals PLC and Compass Contract Services (UK) Ltd. <p>The Board of Directors were ASSURED by the report.</p>		
16/407	ASSURANCE FROM SUB COMMITTEES		
8 mins	<p>Audit & Assurance Committee</p> <p>GW presented the report and highlighted the difficulty in obtaining compliance with regards to the Register of Interests. The internal and external auditors have been tasked to obtain best practice to support SC in obtaining returns.</p> <p>GW advised that a change in valuation methodology was approved by the Committee to exclude VAT where appropriate from qualifying PFI assets. PR advised that the forecast against control total is unaffected by the amendment but the accounts will record an impairment of £33.0m within the year.</p> <p>GW advised that It was also agreed by the Committee that the Procurement Lead would review the policies for Single Tender Waivers and Losses and Special Payments to ensure they were still fit for purpose.</p>		

Board Risk Committee

PH advised that the Committee had received assurance reports from the divisions of Emergency & Urgent Care and Surgery, as well as from the Nottinghamshire Health Informatics Service (NHIS) and the risks had been reviewed. Assurance was provided by the Director of NHIS that the Trust continues to manage the risk of cyber-attack, the greatest risk continues to be the potential for human error.

The Committee received a report from the Director of HR & OD regarding the operational (service continuity) and financial risks associated with the introduction of IR35 legislative changes impacting on the availability of locum medical staff in particular (which has been included in the BAF. Mitigation plans will continue to be updated through the OD & Workforce Committee.

Finance Committee

NG advised that the trust is forecasting a full year deficit of £40.66m, £0.48m better than plan. The risks in delivering the forecast include the STF for Q4 which is only based on financial performance and could lead to c£320k STF being received. Further STF funds will be made available to Trusts depending on the M12 results and could lead to a “bonus” of £1m+. The CCG is challenging outcomes from the Alliance, the accounts assume that all funds due to the trust will be received (£4m), but the amount received could be around £2m less. NHSI will support SFHFT and other alliances if the dispute goes to mediation. NG advised that there will also be an impairment of fixed assets which will increase the deficit reported by SFHFT in the annual account.

NG advised that the Finance Committee were assured on the processes in place to mitigate any further challenges to the forecast outturn.

NG advised that the budget has now been allocated to divisions but there has been no response from NHSI on the challenge to the 2017/18 control total. The key risks in the budget aside from normal activity are non-delivery of the STP CIP (£6m) although a director of turnaround has now been appointed by the CCG, non-delivery of the QIPP which could lead to higher incremental costs for the Trust (£2m) and the IR35 changes.

NG advised that the Finance Committee reviewed its work programme for 2017/18 and agreed to carry out additional work on divisional performance and agency cost expenditure to ensure that the cap is achieved by the end of 2017/18.

OD & Workforce Committee

CW presented the report and advised that the Committee had received a report from Dr Sihota, the Guardian of Safe Working Hours. The report provided an update on the Guardians role, the Junior Doctors Forum and the process for “exception reporting” which is a key part of the new junior doctor’s contract. Dr Sihota’s report set out a number of recommendations which are currently being addressed in conjunction with the Director of Post Graduate Medical Education.

	<p>CW advised that the Committee received a deep dive report into long term sickness absence which provided assurance to the Committee that it is being managed proactively by Divisions. It also received information regarding the Trusts level of sickness absence as compared with other local Trusts and it was noted that SFHFT compares well with similar Trusts.</p> <p>Quality Committee</p> <p>AH advised that the Division of Women’s and Children had presented the output from the recent Safety Summit. The presentation covered each topic in detail and outlined immediate actions that had been taken to reduce the risk of recurrence and maximise learning. It was noted that this framework will now be adopted as the Trust standard for holding Divisional teams to account for safety and quality of care concerns going forward.</p> <p>AH advised that Dr Ben Owens delivered a very comprehensive presentation outlining the Urgent and Emergency Care Divisional Governance structure. The Committee acknowledged the significant progress that had been made within the Division to align the governance processes with each specialty area within the Division and wider Trust Governance.</p> <p>AH advised that the Quality Committee agreed that the 3 principle risks identified within the Board assurance Framework (BAF) apportioned to the Quality Committee are appropriate and the controls in place are adequately mitigating the residual risks. These controls will be used to facilitate assurance visits across the Trust.</p> <p>The Board of Directors were ASSURED by the reports.</p>		
16/408	COMMUNICATIONS TO WIDER ORGANISATION		
1 min	<p>The Board of Directors agreed that a strong message should be communicated to reflect the sustained performance of SFHFT over the year.</p> <p>PH on behalf of John MacDonald thanked RD for acting up as Chair.</p>		
16/409	ANY OTHER BUSINESS		
	<p>JY advised that the BBC were filming at KMH on 30/03/17 to feature the Trust’s Dentist Training Suite and Associate Nurses. The feature will appear on the BBC evening news on 30/03/17.</p> <p>PH advised that the Special Advisor to the Secretary of State is visiting SFHFT on 31/03/17. The visit is to view the successful work that the Trust has conducted around the Emergency Care Pathway.</p>		

16/410	DATE AND TIME OF NEXT MEETING		
	<p>It was CONFIRMED that the next Board of Directors meeting in Public would be held on 27th April 2017.</p> <p>There being no further business the Chair declared the meeting closed at 14:35.</p>		
16/411	CHAIR DECLARED THE MEETING CLOSED		
16/412	QUESTIONS FROM MEMBERS OF THE PUBLIC PRESENT		
	No questions were raised.		
	<p>Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.</p> <p>Ray Dawson</p> <p>Acting Chair</p>		
		Date	