**Trust Board paper O3** 

# UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

DATE OF TRUST BOARD MEETING: 5 July 2018

**COMMITTEE: People, Process and Performance Committee** 

CHAIR: Mr A Johnson, Non-Executive Director

DATE OF COMMITTEE MEETING: 24 May 2018

RECOMMENDATIONS MADE BY THE COMMITTEE FOR PUBLIC CONSIDERATION BY THE TRUST BOARD:

None

OTHER KEY ISSUES IDENTIFIED BY THE COMMITTEE FOR CONSIDERATION/ RESOLUTION BY THE TRUST BOARD:

- Minute 41/18/1 Emergency Care Performance and Organisation of Care
- Minute 41/18/2 Updated IM&T Priorities 2018/19

DATE OF NEXT COMMITTEE MEETING: 28 June 2018

Mr A Johnson Non-Executive Director and PPP Chair

### UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

# MINUTES OF THE PEOPLE, PROCESS AND PERFORMANCE COMMITTEE MEETING HELD ON THURSDAY 24 MAY 2018 AT 11.15AM IN THE BOARD ROOM, VICTORIA BUILDING, LEICESTER ROYAL INFIRMARY

#### Present:

Mr A Johnson - Non-Executive Director (Chair)

Mr J Adler - Chief Executive

Ms V Bailey – Non-Executive Director

Col. (Ret'd) I Crowe - Non-Executive Director

Ms E Doyle - Interim Chief Operating Officer (with the exception of Minute 48/18)

Mr A Furlong – Medical Director

Ms B Kotecha – Joint Acting Director of Workforce and Organisational Development (with the exception of Minute 48/18)

Ms E Meldrum – Acting Chief Nurse

Mr B Patel - Non-Executive Director

Ms S Tate - Patient Partner (non-voting member)

Mr M Traynor - Non-Executive Director

Mr P Traynor – Chief Financial Officer (with the exception of Minute 48/18)

Ms J Tyler-Fantom – Joint Acting Director of Workforce and Organisational Development (with the exception of Minute 48/18)

### In Attendance:

Mr M Archer – Head of Operations (CSI) (for Minute 42/18/3 only)

Mrs G Belton - Corporate and Committee Services Officer

Mr C Benham - Director of Operational Finance (with the exception of Minute 48/18)

Mr M Caple – Patient Adviser (for Minute 48/18 only)

Mr J Clarke – Chief Information Officer (for Minute 42/18/2 only)

Miss M Durbridge – Director of Safety and Risk (for Minute 48/18 only)

Ms S Hotson – Director of Clinical Quality (for Minute 48/18 only)

Mr W Monaghan - Director of Performance and Information

Ms C Ribbins - Deputy Chief Nurse

### **RESOLVED ITEMS**

### 38/18 APOLOGIES FOR ABSENCE

Apologies for absence were received from Professor P Baker, Non-Executive Director, Ms S Leak, Director of Operational Improvement, Mr R Moore, Non-Executive Director, Mr B Shaw, Director of Efficiency and CIP and Mr K Singh, Trust Chairman.

## **39/18 MINUTES**

Resolved – that the Minutes of the previous meeting held on 26 April 2018 (papers A and A1) be confirmed as a correct record.

### 40/18 MATTERS ARISING

Paper B detailed the actions from previous meetings of the People, Process and Performance (PPP) Committee. Updates provided at the most recent meeting had been incorporated into the Matters Arising log.

### Resolved – that the contents of paper B be received and noted.

### 41/18 PERFORMANCE

## 41/18/1 <u>Emergency Performance and Organisation of Care Report</u>

Paper C, as presented by the Interim Chief Operating Officer, provided an update on performance against the NHSI trajectory for emergency care, which had improved in April 2018 and was now above the NHSI trajectory. The report provided an update on the actions to enable further improvement.

Specific discussion took place regarding:-

- the significant improvement in 4 hour wait performance in late April and May 2018 (yet to be sustained) and the reasons for it;
- the specific issues which, when resolved, should lead to more sustained improvement of the 4 hour performance measure;
- the progression of comprehensive plans for Winter 2018/19, both internally (with the next internal discussions to be held at a meeting on 29 May 2018) and in conjunction with healthcare partners within LLR, with the latter being agreed and tracked through the A & E Delivery Board – it was expected that a consolidated view of the Winter Plan would be available to present at the June 2018 meeting of the PPP Committee;

ICOO/DOI/ DPI

performance in relation to the GP-led part of the ED service - specifically it
was agreed that the Trust will implement a formal contract review of the ED
Front Door contract at the end of each quarter commencing at the end of
June 2018 and that the current contractor be notified of this;

CEO / CFO

- the need for enhanced / improved terminology when categorising breaches in order that these were more informative, and
- the current contradiction between the NHSI-agreed trajectory and STF rules – it was expected that the STF would be updated.

In conclusion, the People, Process and Performance Committee were more positively assured in relation to the capability of the Emergency Department to achieve its target in relation to 4 hour wait performance, albeit recognising that this was yet to be fully achieved on a sustained basis.

Resolved – that (A) the contents of this report be received and noted,

(B) a consolidated view in relation to the Winter Plan 2018/19 be provided at the June 2018 meeting of the People, Process and Performance Committee, and

ICOO/DOI/ DPI

(C) a formal contract review at the end of each quarter be implemented in relation to the ED front door contract.

CEO / CFO

### 42/18 PROCESS

42/18/1 <u>Assurance of CMG Management Processes and Performance (incorporating the format of the Performance Dashboard and the MSS CMG Performance Review Process)</u>

The Chairman acknowledged the contents of this further iteration of the CMG Performance Review dashboard (paper D refers), noting his wish to focus on the functional framework and cross-cutting accountabilities, in response to which the Chief Executive informed the Committee that the way in which the Executive Directors managed the performance management framework with the Clinical Management Groups (CMGs) was currently under review, with the aim of redesigning the process, as a result of the focus on this issue at the PPP Committee.

Ms Bailey, Non-Executive Director, queried when the debate on this item would progress to consideration of specific CMG performance and cross-CMG learning, in response to which the PPP Chairman confirmed that this was not the intent of this agenda item, but that the specific purpose of this item was for the Committee to review and challenge the processes in place in order that it could be assured that CMGs were fully accountable and able to drive their own performance to target. To this end, the PPP Chairman confirmed that he wished to continue discussion on this item at each monthly PPP meeting until this had been achieved. Further discussion took place regarding potential means of further driving personal accountability for performance into the CMG structure and it was agreed that, subject to completion of the process work referenced by the Chief Executive, an updated version of the performance dashboard reflecting the discussions would be submitted to the June 2018 meeting of the PPP Committee for further consideration thereon. Ms Bailey, Non-Executive Director noted that it would be beneficial if data relating to qualitative learning / cultural methodology could be included within the information presented.

CEO/DPI

Resolved – that (A) the contents of this report be received and noted, and

(B) (subject to completion of the on-going process work in relation to the CMG performance management framework) an updated version of the performance dashboard be submitted to the June 2018 PPP meeting for further consideration.

CEO/DPI

## 42/18/2 Updated IM&T Priorities 2018/19 Briefing

Mr J Clarke, Chief Information Officer, presented paper E, which provided an update on the IM&T Priorities for 2018/19, confirming the priorities listed. Specific discussion took place regarding means by which additional funding could potentially be sought, clinical involvement in the progression of IT investments (where appropriate), the need for focussed attention on change resource and the 'Big 5' (i.e. end user computing, further embedding of Nerve Centre, ICE Integration, PACS and e-prescribing). In discussion, it was agreed that the Chief Information Officer would submit a report to a future PPP meeting which described the journey for the electronic patient record through the year (with members noting that, as the Trust moved forward with electronic reporting and recording, there would be less need for historical, paper-based data). Non-Executive Directors expressed concern that the Trust was continuing to fall behind in the scope and ambition of its IT initiatives due to the lack of funding being made available combined with a current absence of strategic guidance from NHSI.

Resolved - that (A) the contents of this report be received and noted, and

(B) the Chief Information Officer be requested to submit a report to a future PPP meeting, which described the journey for the electronic patient record

through the year. CIO/CCSO

42/18/3 Report from the Head of Operations, CSI

<u>Resolved</u> – that this Minute be classed as confidential and taken in private accordingly.

43/18 PEOPLE

43/18/1 Report from the Joint Acting Director of People and Organisational Development

<u>Resolved</u> – that this Minute be classed as confidential and taken in private accordingly.

43/18/2 Update on Off Payroll and IR35 Position

Paper G, as presented by Ms J Tyler-Fantom, Joint Acting Director of People and Organisational Development, updated the Committee on the position with IR35, providing the national context, detailing the current position and process and providing assurance against compliance with IR35 regulations. The Committee noted the position and assurance provided on IR35.

Resolved – that the contents of this report be received and noted.

# 43/18/3 Consultant Recruitment

Paper H, as presented by Ms J Tyler-Fantom, Joint Acting Director of People and Organisational Development, sought to outline, at a high-level, proposed changes to improve the Consultant Recruitment process. The Committee was requested to note the direction of work to be undertaken on consultant recruitment processes and comment on anything additional that could improve consultant recruitment, noting that an update on progress would be provided to the next meeting of the Executive Workforce Board in July 2018. In discussion, the Committee supported the proposal to increase the pool of Lay Chairs, noting that there were was an insufficient number of Non-Executive Directors for them to solely comprise the pool utilised for this purpose. The intention to seek an increase in the diversity of Chairs was also noted, with pre-determined dates to be arranged to assist with the diary management for attendees. Particular discussion took place regarding the potential use of assessment centres in consultant recruitment and how their use could be beneficial since assessments undertaken in this way could be more informative than interviews alone. It was agreed that PPP members with any further comments to contribute should write to Ms Tyler-Fantom, Joint Acting Director of People and OD directly, who was requested to submit a further report to the PPP Committee on this item once the process had been finalised.

PPP members

**JADPOD** 

Resolved – that (A) the contents of this report be received and noted,

(B) PPP Committee members with any comments to make on the proposals detailed within the report be requested to write directly to Ms Tyler-Fantom, Joint Acting Director of People and Organisational Development, for this purpose, and

PPP members

(C) the Joint Acting Director of People and Organisational Development be

# requested to submit a further report to the PPP Committee regarding consultant recruitment, once the process had been finalised.

**JADPOD** 

### 43/18/4 Junior Doctor Morale LiA

Paper I, as presented by the Medical Director, detailed the latest action plan in relation to work undertaken through the Listening into Action sponsor group to improve junior doctor morale. The Committee received and noted the contents of this report, expressing assurance at its contents and acknowledging the empowerment of junior doctors through having direct access to the Chief Executive and Medical Director through this group, although it cautioned against not following through to a satisfactory conclusion any promises which may have been perceived to have been made.

<u>Resolved</u> – that the contents of this report be received and noted.

### 43/18/5 UHL Way Update

Paper J, as presented by Ms Kotecha, Joint Acting Director of People and Organisational Development, provided an update on progress in relation to work associated with the UHL Way, which offered a comprehensive framework for patient and public involvement in the improvement of care and comprised three strands of work (1) Better Engagement (2) Better Teams and (3) Better Change as set out in the UHL Way Implementation Plan attached to the report. The Committee was requested to note progress with, and support the implementation of, the components of the UHL Way. Particular discussion took place regarding the celebration of 5 years of Listening into Action, with the UHL Way Pass It On Event and also regarding the LLR Way. In discussion, it was agreed that the Chief Executive would give consideration as to including the principles of the approach in a forthcoming briefing to staff. In relation to the planned condensing of the competency framework, it was agreed that further information relating to this would be provided as part of a progress update to a future PPP Committee meeting.

**AJDPOD** 

Resolved – that (A) the contents of this report be received and noted,

(B) the Chief Executive be requested to give consideration to the inclusion of the principles of the UHL Way approach in a forthcoming briefing to staff, and

CE

(C) further information in relation to the planned condensing of the competency framework be provided as part of a progress update on this item at a future PPP Committee meeting.

**AJDPOD** 

### 43/18/6 BAF Workforce Risks

The Committee received and noted the contents of paper K, which detailed the BAF Workforce Risks, noting that scrutiny of this would take place at the Trust Board.

PPP Committee members were requested to email Ms Kotecha, Joint Acting Director of People and Organisational Development, if they had any comments in relation to the BAF Workforce Risk.

PPP members

Resolved – that (A) the contents of this report be received and noted, and

(B) PPP Committee members be requested to email Ms Kotecha, Joint Acting Director of People and Organisational Development, if they had any comments in relation to the BAF Workforce Risk (noting that all BAF Risks would be scrutinised at the Trust Board meeting).

PPP members

43/18/7 Workforce and Organisational Development Plan Update

The slide deck accompanying paper L captured key workforce datasets for Month 1 (April 2018), the contents of which were received and noted. The Joint Acting Director of People and Organisational Development provided a factual correction to members relating to the over-plan element on the pay bill and undertook to circulate an amended version of this report to members. In discussion, it was agreed that the timescales for achievement of specific objectives would be included within the 'assurance' section on page 2 of the report (where relevant). Specific discussion took place regarding potential guest speakers for the Management Conference in September 2018 and Ms Kotecha, Joint Acting Director of People and Organisational Development, undertook to follow this up.

**JADPOD** 

Resolved – that (A) the contents of this report be received and noted,

- (B) the Joint Acting Director of Workforce and Organisational Development be requested to:-
- (1) circulate, to PPPC members, an updated version of paper L, which reflected the factual correction made verbally at the meeting in relation to the over plan element on the pay bill;

JADPOD

(2) include the timescales for the achievement of specific objectives within the 'assurance' section on page 2 of the report (where relevant), and

JADPOD

(3) follow-up the suggestion made at the meeting relating to a possible guest speaker at the Management Conference in September 2018.

**JADPOD** 

#### 44/18 MINUTES FOR INFORMATION

44/18/1 <u>Executive Performance Board</u>

Resolved – that the action notes of the meeting of the Executive Performance Board held on 24 April 2018 (paper M refers) be received and noted.

44/18/2 Executive Workforce Board

Resolved – that the actions of the Executive Workforce Board meeting held on 17 April 2018 (paper N refers) be received and noted.

45/18 ANY OTHER BUSINESS

Resolved – that there were no additional items of business.

46/18 IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD

Resolved – that a summary of the business considered at this meeting be presented to the Trust Board meeting on 7 June 2018 (and specifically highlight to the Trust Board the discussions held relating to Minute 41/18/1 (Emergency Care Performance and Organisation of Care) and Minute 41/18/2 (Updated IM&T Priorities 2018/19)).

Cttee Chair/CCSO

DPI

DPI

### 47/18 DATE OF THE NEXT MEETING

Resolved – that the next meeting of the People, Process and Performance Committee be held on Thursday 28 June 2018 from 11.15am in the Board Room, Victoria Building, Leicester Royal Infirmary.

### 48/18 JOINT SESSION WITH MEMBERS OF QOC IN ATTENDANCE

### 48/18/1 Quality and Performance Report - Month 1

Joint Paper 1, as presented by the Director of Performance and Information, detailed the quality and performance metrics as at month 1 (ending 30 April 2018). Particular discussion took place relating to RTT and in particular RTT 52 week waiters, cancer performance, cancer performance by cancer type and the new processes being implemented in relation to cancer performance tracking via the convening of a new fortnightly meeting with clear expectations for each cancer pathway. In relation to the latter discussion, it was agreed that the Director of Performance and Information would continue to present the pictorial graph on page 44 relating to 62 day (Urgent GP referral to treatment) wait for first treatment (all cancers) in order to track improvements. Also discussed was: the reprioritisation of the theatre timetable; where breaches were associated with patient choice (i.e. where a patient chose to wait longer to be seen at UHL rather than be seen more quickly by an alternative provider) and breaches associated with diagnostics etc - it was agreed that the Director of Performance and Information would provide the graph breaking down the individual elements comprising the reason for any breaches within the report to the Committee in June 2018. Specific note was made of the large increase in imaging referrals (with a 50% increase for in-patients). A review of the reasons for this significant increase was planned.

## Resolved – that (A) the contents of joint paper 1 be received and noted,

- (B) the Director of Performance and Information be requested to continue to present the pictorial graph relating to 62 day (Urgent GP referral to treatment) wait for first treatment (all cancers) in order to track improvements, and
- (C) (in relation to the reasons for any breaches against particular performance indicators, such as those due to diagnostics, those due to patient choice etc.) the Director of Performance and Information be requested to provide a graph breaking down the individual elements for any reported breaches within the Quality and Performance report to be submitted to the Committee in June 2018.

## 48/18/2 Planned Care Work

Joint Paper 2, as presented by the Director of Performance and Information, updated the Committee on the Planned Care workstream within the STP, which

focussed on three core elements (1) the reduction in patients referred to UHL who could be appropriately managed elsewhere (2) reviewing the procedures that should be commissioned by LLR and (3) reviewing the whole pathway of care for a selected number of specialties. The Committee received and noted the contents of this report and were keen to understand its impact (when known).

# Resolved – that the contents of this report be received and noted.

The meeting closed at 2.07pm.

# Gill Belton Corporate and Committee Services Officer

# Cumulative Record of Members' Attendance (2018-19 to date):

Votina Members

Name	Possible	Actual	%	Name	Possible	Actual	% attendance
			attendance				
A Johnson (Chair)	2	2	100	B Kotecha / J Tyler- Fantom (Apr 18 -	2	2	100
J Adler	2	2	100	E Meldrum (Apr 18 -	2	2	100
V Bailey	2	2	100	R Moore	2	1	50
P Baker	2	1	50	B Patel	2	2	100
I Crowe	2	2	100	K Singh (ex-officio)	2	0	0
E Doyle	2	2	100	M Traynor	2	2	100
A Furlong	2	2	100	P Traynor	2	2	100

Non-Voting Members

Name	Possible	Actual	%	Name	Possible	Actual	% attendance
			attendance				
C Benham	2	1	50	C Ribbins	2	2	100
J Clarke	2	2 *	100	B Shaw	2	1	50
S Leak	2	1	50	S Tate (from Dec 2017)	2	2	100
W Monaghan	2	2	100	,			

<sup>\*</sup> for IT items only