

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

MINUTES OF A MEETING OF THE TRUST BOARD, HELD ON THURSDAY 2 AUGUST 2018 AT 9AM IN THE BOARD ROOM, VICTORIA BUILDING, LEICESTER ROYAL INFIRMARY

Voting Members present:

Mr K Singh – Trust Chairman (Chair)
Mr J Adler – Chief Executive
Ms V Bailey – Non-Executive Director
Professor P Baker – Non-Executive Director
Mrs R Brown – Chief Operating Officer
Col (Ret'd) I Crowe – Non-Executive Director
Mr A Furlong – Medical Director
Mr A Johnson – Non-Executive Director
Mr R Moore – Non-Executive Director
Mr B Patel – Non-Executive Director
Mr M Traynor – Non-Executive Director
Mr P Traynor – Chief Financial Officer

In attendance:

Mr C Benham – Director of Operational Finance (for Minute 230/18)
Ms L Gallagher – Workforce Development Manager (for Minute 218/18/1)
Mrs S Hotson – Director of Clinical Quality (in the absence of the Acting Chief Nurse)
Mr D Kerr – Director of Estates and Facilities (for Minute 230/18)
Ms H Stokes – Corporate and Committee Services Manager
Ms V Turner – Deputy Head of Contracts (for Minute 218/18/1)
Ms L Wall – Head of Contracts (for Minute 218/18/1)
Mr S Ward – Director of Corporate and Legal Affairs
Mr M Wightman – Director of Strategy and Communications
Ms H Wyton – Director of People and OD

ACTION

212/18 APOLOGIES AND WELCOME

Apologies for absence were received from Ms E Meldrum, Acting Chief Nurse. The Chairman welcomed Ms H Wyton Director of People and OD, and Mrs S Hotson Director of Clinical Quality, to the Trust Board meeting. In discussion at Minute 217/18 below, the Trust Board thanked Ms B Kotecha and Ms J Tyler-Fantom for their contribution while Acting Joint Directors of People and OD.

213/18 DECLARATIONS OF INTERESTS IN THE PUBLIC BUSINESS

The Chief Financial Officer and Mr A Johnson Non-Executive Director declared their respective roles as Non-Executive Director and Non-Executive Chair of Trust Group Holdings Ltd.

214/18 MINUTES

Resolved – that the Minutes of the 5 July 2018 Trust Board meeting be confirmed as a correct record and signed by the Chairman accordingly.

CHAIRMAN

215/18 MATTERS ARISING FROM THE MINUTES

Resolved – that the Trust Board matters arising log be noted as per paper B.

216/18 CHAIRMAN'S MONTHLY REPORT – AUGUST 2018

The Chairman noted the continuing emergency pathway challenges facing the Trust during the hot weather period, with traditional in-year activity patterns no longer applying. Discussions continued at Trust Board thinking day sessions on how to move UHL from a CQC rating of 'requires improvement' to one of 'good', and the Chairman advised that he had invited Professor T Baker, CQC Chief Inspector of Hospitals to visit UHL at a future date (noting the need for an appropriate venue to allow staff engagement). Proposals for a facilitated Board development session with East Midlands Leadership Academy (EMLA) would also be discussed further at the September 2018 Trust Board thinking day ahead of beginning that development programme.

**CE
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DCLA**

The Chairman also voiced his thanks to Col (Ret'd) I Crowe for his work in helping UHL to achieve a Gold Award in the Ministry of Defence 'Defence Employer Recognition Scheme'. This was a significant achievement.

Resolved – that (A) it be ensured that the venue for the visit to UHL by Professor Ted Baker, CQC Chief Inspector of Hospitals, was able to accommodate sufficient numbers of staff, and

CE

(B) EMLA proposals for a facilitated Board development session be discussed further at the September 2018 Trust Board thinking day.

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217/18 CHIEF EXECUTIVE'S MONTHLY REPORT – AUGUST 2018

The Chief Executive's August 2018 monthly update followed (by exception) the framework of the Trust's strategic objectives. As the attached quality and performance dashboard covered core issues from the monthly quality and performance report, the full version of that report was no longer taken at Trust Board meetings but was accessible on the Trust's external website (also hyperlinked within paper D).

Taking the report as read, the Chief Executive specifically highlighted the following issues:-

- (a) the Trust's achievement in meeting its emergency care trajectory for quarter 1 of 2018-19. However, as mentioned above by the Chairman, July had been a very challenging month due largely to the heatwave conditions. A 'refresh' of the approach to emergency care had been presented to the July 2018 meetings of the Executive Performance Board and People Process and Performance Committee, as per paper J below (Minute 221/18/2 refers);
- (b) his own close involvement in the work of UHL's internal Financial Recovery Board, noting the challenging financial position facing the Trust (and the wider NHS) in 2018-19. In light of further information recently received from NHS Improvement re: wholly-owned subsidiaries, the Chief Executive noted UHL's disappointment at not being able to proceed with the proposed Facilities Management Partnership (FMLLP), as such a venture would have enabled UHL to invest significantly in its estates services. The decision would also impact on UHL's financial position for 2018-19;
- (c) a recent very positive meeting with Health Education England (East Midlands), reflecting the progress made by UHL to address certain previous concerns, and
- (d) his work on a UHL Quality Improvement strategy approach, which would be discussed further at the August 2018 Trust Board thinking day.

In discussion on the Chief Executive's August 2018 report, the Trust Board noted:-

- (1) comments from Professor P Baker Non-Executive Director, welcoming the improvement in retention rates re: medical students. He also briefly outlined the results of the recent National Student Survey, and agreed to advise the Trust Board of the detailed data once available – the Chairman suggested that this could perhaps be covered through the quarterly multi-professional education and training report presented to Trust Board (next due in September 2018). The Medical Director noted that there was recognised further work to do on trainers;
- (2) (in response to queries from Ms V Bailey Non-Executive Director) that staff reaction to the news about the FMLLP had been mixed, and that the Director of Estates and Facilities was keen to continue the learning and improvement work from the project. Mr M Traynor Non-Executive Director considered that coverage of estates issues at Trust Board should be increased, and the Chief Executive agreed to explore how best to progress that, and
- (3) (in response to a query from the Chairman) assurance from the Chief Operating Officer that cancelled operations would be a key focus area in the planned 'elective pathway recovery programme'. The Chief Operating Officer also outlined work to focus further on cancer targets, noting the Trust's determination to improve further on delivery.

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PBNE

CE

Resolved – that (A) consideration be given to how best to update the Trust Board on the national student survey results, including potentially via the quarterly multi-professional education and training update, and

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PBNE

(B) consideration be given to how best to increase the coverage of estates issues at Trust

CE

Board meetings.

218/18 KEY ISSUES FOR DISCUSSION/DECISION

218/18/1 Staff Story: Hospital European Exchange Programme (HOPE)

As outlined in paper E, Ms V Turner, Deputy Head of Contracts, attended to present her HOPE experiences – this was a European exchange programme for hospital managers, supported by the NHS Leadership Academy in the UK. She had been based at the Hospital Center of São João (CHSJ), Porto, Portugal for 4 weeks, giving her an opportunity to explore another health system including the contracting model and the commissioner/provider relationship in Portugal. The Deputy Head of Contracts outlined the impact of the key commissioning differences in Portugal, and also specifically detailed the significant staffing differences at the hospital she had visited (only 5000 staff despite CHSJ being a broadly similar size to UHL). In terms of other observations, she considered that although Portuguese hospitals were more technologically equipped (eg EPR, pharmacy robots, e-prescribing), infection prevention practice was not as advanced as in the UK, with doctors not bare below the elbows. Paper E also invited the Trust Board to consider UHL being a host organisation for future HOPE exchange participants.

In discussion on the staff story, the Trust Board:-

- (a) sought further information on the staffing establishment model in Portugal, to assess the scope for any transferable learning. The Deputy Head of Contracts agreed to provide information on Portuguese staff turnover ratios to the Director of People and OD, and commented that there was a high level of competition for nursing vacancies. The Trust Board briefly commented on the recent fall in European nurses working in UHL, noting that overseas recruitment was now focusing on areas such as the Philippines and India;
- (b) noted that the exchange programme also involved a project presentation at the end of the placement;
- (c) strongly supported UHL becoming a HOPE host organisation;
- (d) noted the more 'arms length' regulatory model in place in Portugal, and
- (e) welcomed the opportunities for shared learning presented by the HOPE programme.

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CFO/
Dep HoC

DPOD

Resolved – that (A) the scope for UHL to become a HOPE host organisation be formally explored;

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(B) a review be undertaken of the Portuguese system staffing establishments/arrangements, to identify any transferable learning, and

DPOD

(C) the Portuguese staff turnover ratio be confirmed to the Director of People and OD.

CFO/
Dep HoC218/18/2 Revalidation Officer's Annual Report 2017-18

The Annual Revalidation and Appraisal Report at paper F advised the Trust Board how UHL had fulfilled its statutory duties as Designated Body for medical practitioners employed by the Trust for the year 2017-18. The Trust's Responsible Officer (Mr J Jameson, Deputy Medical Director) considered that UHL was in compliance with the Responsible Officer Regulations as detailed in the report, and the Trust Board was invited to accept the 2017-18 Annual Report and approve the signing of the Statement of Compliance at annex E. The report advised that 99% of UHL's doctors had completed their appraisal for the 2017-18 year – UHL was in the top quartile for this, noting the national average of 89%. Each case of missed UHL medical appraisal considered individually by UHL's Medical Conduct Committee – further action was being taken in 1 [dentist] case.

CE/
CHAIR
MAN

The Trust Board welcomed the good performance evidenced in the Annual Report, and commented on the need to explore how to inspire medical staff to become appraisers (recognising the pressures on senior medical staff time and the significant time commitment involved). The Medical Director echoed this point, noting the importance of each CMG having sufficient appraisers. In response to a query from Col (Ret'd) I Crowe Non-Executive Director, the Director of Clinical Quality advised that the medical appraisal system was different to the nursing revalidation process, although there was an appropriate process in place to ensure that all new nursing staff were validated.

Resolved – that the Annual Revalidation and Appraisal Report 2017-18 be approved as presented, and the statement of compliance signed as required.

CE/
CHAIR
MAN

219/18 RISK MANAGEMENT AND GOVERNANCE – INTEGRATED RISK AND ASSURANCE REPORT

Paper G comprised the new format 2018-19 integrated risk and assurance report including the Board Assurance Framework (BAF), as at 30 June 2018. 2 new organisational risks scoring 15 or above had been entered onto the risk register in June 2018 (in response to a query from the QOC Non-Executive Director Chair, the Medical Director advised that the national breast screening issue was a separate matter). A thematic analysis of the organisational risk register showed the key risk causation themes as being staffing shortages, and the imbalance between capacity and demand. Managing financial pressures was also recognised on the risk register as a key enabler.

The integrated risk and assurance report had also been discussed at the July 2018 Audit Committee, and the Medical Director noted the Risk and Assurance Manager's intention to work with CMGs on managing their risks. CMG risks were also discussed through the CMG performance management meetings with Executive Directors. In considering paper G, the Chief Financial Officer noted the need to amend the financial BAF principal risk to reflect the position of the FM LLP.

CFO

Resolved – that the financial BAF principal risk be amended to reflect the position of the FM LLP.

CFO

220/18 LLR SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP (STP) AND UHL RECONFIGURATION – MONTHLY UPDATE

Paper H updated the Trust Board on the LLR STP and on UHL's own reconfiguration programme. The LLR STP capital bid had been submitted on 16 July 2018 for consideration in the wave 4 funding round. Successful bids were expected to be announced later in 2018. A very positive session had also been held with the East Midlands Clinical Senate on 5 July 2018, resulting in its support for the proposed reconfiguration. Following the July 2018 Trust Board, the full business case for UHL's ICU reconfiguration scheme had also now been put forward for national approval.

The Director of Strategy and Communications noted the various stages in terms of the pre-consultation business case (as set out in the timeline section of paper H), noting discussions planned for the September 2018 Trust Board following a PCBC 'page turn' with NHS Improvement/NHS England. Recognising the need to articulate the strongest possible case (given the scarcity of national capital availability), Non-Executive Directors agreed that it would be helpful to develop a consistent and concise suite of messages on the key reconfiguration points. The Director of Strategy and Communications also noted a slight delay in publishing the BCT 'next steps' document.

DSC

DSC

The Director of Corporate and Legal Affairs briefed Trust Board on the position of the governance review, which would be discussed further by the SLT in September 2018. The Trust Board noted the impact on the timescale for any potential recommendations from such a review.

Resolved – that (A) the draft PCBC be discussed at the September 2018 Trust Board following the NHSE/I 'page turn', and

DSC

(B) a consistent and concise suite of messages on the key reconfiguration points be developed for Trust Board members.

DSC

221/18 QUALITY, PERFORMANCE AND FINANCE**221/18/1 Quality and Outcomes Committee (QOC)**

Paper I summarised the issues discussed at the 26 July 2018 QOC, particularly noting a detailed discussion on infection prevention (including QOC's suggestion that this be the subject of a future Trust Board thinking day session). QOC took significant assurance from the Trust's 2017-18 Infection Prevention Annual Report, underpinned by the proactive approach of UHL's Infection Prevention team. Ms V Bailey Non-Executive Director, also noted discussions at QOC regarding the joint session held with PPPC members, and how to ensure that quality issues were appropriately covered as well as performance aspects. The Trust Chairman raised the need to consider how best to enable Patient Partner input to the CQC action plan.

MD/
ACN

Resolved – that (A) the summary of issues discussed at the 26 July 2018 QOC be noted as per paper I (no recommended items) – Minutes to be submitted to the 6 September 2018 Trust

Board, and

(B) consideration be given to how best to enable Patient Partner input to the CQC action plan.

MD/
ACN

221/18/2 People Process and Performance Committee (PPPC)

Paper J summarised the issues considered at the 26 July 2018 PPPC, particularly highlighting (i) the urgent and emergency care refresh presented by the Chief Operating Officer, (ii) PPPC's welcome for the progress on revising processes to drive CMG performance, and (iii) the publication of UHL's 5-year workforce strategy 2018-23. In response to a query from the Trust Chairman, the Chief Executive confirmed that consideration was being given to how best to communicate the 5-year strategic workforce plan to staff.

DPOD

Resolved – that that (A) the summary of issues discussed at the 26 July 2018 PPPC be noted as per paper J (no recommended items) – Minutes to be submitted to the 6 September 2018 Trust Board, and

(B) consideration be given to how best to communicate the 5-year workforce strategy to staff.

DPOD

221/18/3 Finance and Investment Committee (FIC) and 2018-19 Financial Performance (June 2018)

Paper K summarised the issues discussed at the 26 July 2018 FIC, including the Trust's financial position for 2018-19 and the impact of developments re: the Facilities Management Partnership.

Paper K1 presented the Trust's 2018-19 month 3 financial position, which had been discussed in detail at the July 2018 Finance and Investment Committee meeting. UHL had achieved a year to date deficit of £22.3m (excluding Provider Sustainability Funding [PSF]), which was in line with plan. Including PSF, the Trust had achieved a year to date deficit of £20m representing a £0.9m adverse to plan position due to not achieving the quarter 1 ED performance target of 90%. UHL had, however, achieved the 70% of PSF which was related to financial performance. However, the Chief Financial Officer advised that the Trust Board should assume that due to the decision on the Facilities Management Partnership, UHL would be (1) unlikely to achieve any further PSF monies in 2018-19, and (2) reporting variances for the remainder of 2018-19.

Paper K1 confirmed that quarter 1 of the Trust's 2018-19 productivity improvement plan (PIP) had been delivered, although the Chief Financial Officer noted that the plan was significantly weighted towards the second half of the year.

Activity had been above plan in each month of 2018-19 quarter 1, and the finance team planned to review the remainder of the forecast for the financial year to assess the Trust's ability to continue delivering likely over-activity (including capacity and staffing considerations). As previously reported, this would take the form of a stocktake of the forecast and would be reported to the appropriate Trust Committee.

CFO

In discussion on the month 3 financial performance report, the Trust Board:-

- (a) noted a query from the Director of Strategy and Communications on the position of the 30% PSF re: ED targets in relation to the Trust's Annual Operational Plan for 2018-19;
- (b) requested that the nature of any FM LLP-related changes to the financial position be appropriately-transparent in reports to the Trust Board. Mr A Johnson Non-Executive Director commented on the potential impact on cash (and cash flow). In response to a query from Mr R Moore Non-Executive Director and Audit Committee Chair, the Chief Financial Officer advised that the impact on UHL's 2018-19 financial position of the FMLLP development would not be felt immediately;
- (c) sought clarity on how far the reported rise in activity was genuine growth (compared to 2017-18) or a rise against the 2018-19 plan, and
- (d) noted a query from Ms V Bailey Non-Executive Director on the cash balance ratio between UHL and Trust Group Holdings Ltd – it was agreed to discuss this further outside the meeting.

CFO

CFO

CFO/
VBNE

Resolved – that (A) the summary of issues discussed at the 26 July 2018 FIC be noted as per paper K (no recommended items) – Minutes to be submitted to the 6 September 2018 Trust Board;

(B) the planned detailed review of the Trust's ability to continue delivering over-activity be presented to the appropriate Trust Committee;	CFO
(C) clarification be provided on how far the rise in activity was genuine growth compared to the position in 2017-18, or a rise against the 2018-19 plan;	CFO
(D) the nature of any FM LLP-related changes to the financial position be appropriately transparent, and	CFO
(E) the cash balance ratio between UHL and TGH Ltd be discussed outside the meeting.	CFO/ VBNE

222/18 REPORTS FROM BOARD COMMITTEES

222/18/1 Audit Committee

Mr R Moore Audit Committee Non-Executive Director Chair sought Trust Board approval for the updated Counter-Fraud, Bribery and Corruption Policy, as recommended through the July 2018 Audit Committee Minutes. He also highlighted the Audit Committee's discussion on GDPR issues at that meeting, noting that further assurance had been requested on the Trust's review of contracts with third parties (further report now scheduled for the September 2018 Audit Committee). In response to a query from the Trust Chairman, it was confirmed that cyber-security issues would be reviewed by the People Process and Performance Committee in August 2018 and had also been covered in a recent Internal Audit review.

Resolved – that the Minutes of the 6 July 2018 Audit Committee be received and noted as per paper L1 (and the recommended item re: the UHL Counter-Fraud, Bribery and Corruption Policy approved). DCLA

222/18/2 Quality and Outcomes Committee (QOC)

Resolved – that the Minutes of the 28 June 2018 QOC be received and noted as per paper L2 (recommended items approved at the 5 July 2018 Trust Board).

222/18/3 People Process and Performance Committee (PPPC)

Resolved – that the Minutes of the 28 June 2018 PPPC be received and noted as per paper L3 (no recommended items).

222/18/4 Finance and Investment Committee (FIC)

Resolved – that the Minutes of the 28 June 2018 FIC be received and noted as per paper L4 (recommended items approved at the 5 July 2018 Trust Board).

223/18 TRUST BOARD BULLETIN – AUGUST 2018

Resolved – the following papers be noted as circulated with the August 2018 Trust Board Bulletin:-

(1) public minutes of the 21 June 2018 System Leadership Team (SLT) meeting.

224/18 QUESTIONS AND COMMENTS FROM THE PRESS AND PUBLIC RELATING TO BUSINESS TRANSACTED AT THIS MEETING

No questions or comments were raised.

225/18 EXCLUSION OF THE PRESS AND PUBLIC

Resolved – that, pursuant to the Public Bodies (Admission to Meetings) Act 1960, the press and members of the public be excluded during consideration of the following items of business (Minutes 226/18 to 234/18), having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.

226/18 DECLARATIONS OF INTERESTS IN THE CONFIDENTIAL BUSINESS

Mr A Johnson Non-Executive Director, and Mr P Traynor Chief Financial Officer declared their interests in Minute 230/18 below. It was agreed that they would not be required to absent themselves from the discussion on that item.

227/18 CONFIDENTIAL MINUTES

Resolved – that the confidential Minutes of the 5 and 12 July 2018 Trust Board meetings be confirmed as a correct record and signed by the Chairman accordingly.

**CHAIR
MAN**

228/18 CONFIDENTIAL MATTERS ARISING REPORT

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds that public consideration at this stage would be prejudicial to the effective conduct of public affairs.

229/18 REPORT FROM THE CHIEF OPERATING OFFICER

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds of commercial interests.

230/18 REPORTS FROM THE CHIEF FINANCIAL OFFICER

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds of commercial interests.

231/18 REPORTS FROM BOARD COMMITTEES

231/18/1 Audit Committee

Resolved – that this Minute be classed as confidential and taken in private accordingly, on the grounds of commercial interests.

231/18/2 Quality and Outcomes Committee (QOC)

Resolved – that the 28 June 2018 QOC confidential Minutes be noted as per paper R2 (no recommended items).

231/18/3 People Process and Performance Committee (PPPC)

Resolved – that the 28 June 2018 PPPC confidential Minutes and the 26 July 2018 PPPC confidential summary be noted as per papers R3 and R4 (no recommended items) – Minutes of 26 July 2018 to be submitted to the 6 September 2018 Trust Board.

231/18/4 Finance and Investment Committee (FIC)

Resolved – that this Minute be classed as confidential and taken in private accordingly on the grounds of commercial interests.

232/18 CONFIDENTIAL TRUST BOARD BULLETIN

Resolved – that any papers circulated for the August 2018 confidential Trust Board Bulletin be received and noted.

233/18 ANY OTHER BUSINESS

233/18/1 Winter 2018 – Modular Ward at the Glenfield Hospital

The Chief Executive advised that under the framework agreement with Galliford Try, a contract had now been placed for an additional (modular build) ward at the Glenfield Hospital to create additional cardio-respiratory capacity for winter 2018. Efforts were in hand to bring forward that ward availability from the end of January 2019. The additional ward would impact on carparking space availability at

Trust Board Paper A

the Glenfield Hospital and actions were planned to recreate those spaces as far as possible, with a focus on providing appropriate parking adjacent to that new ward (which might involve some displacement of staff parking to elsewhere). The Chief Executive also noted that work would start shortly to extend the Glenfield Hospital Clinical Decisions Unit (CDU) into ward 20.

Resolved – that the position be noted.

233/18/2 LLR Clinical Quality Audit (Learning Lessons to Improve Care Next Stage)

The Medical Director advised that the learning lessons to improve care next stage review clinical quality audit would be presented to the August 2018 QOC and September 2018 Trust Board, following August 2018 discussion at the CCG Boards.

MD

Resolved – that the (learning lessons to improve care next stage) LLR clinical quality audit be presented to the September 2018 Trust Board.

MD

233/18/3 Report from the Chairman

Resolved – that this Minute be classed as confidential and taken in private accordingly on the grounds of personal data.

234/18 **DATE OF NEXT TRUST BOARD MEETING**

Resolved – that the next Trust Board meeting be held on Thursday 6 September 2018 from 9am in Rooms A & B, Clinical Education Centre, Leicester General Hospital.

The meeting closed at 12.50pm

Helen Stokes – **Corporate and Committee Services Manager**

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

Voting Members:

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance
K Singh	8	6	75	A Johnson	8	8	100
J Adler	8	8	100	E Meldrum	7	6	86
V Bailey	8	6	75	R Moore	8	7	88
P Baker	8	7	88	B Patel	8	8	100
R Brown	3	3	100	J Smith	1	1	100
I Crowe	8	8	100	M Traynor	8	7	88
E Doyle	5	5	100	P Traynor	8	8	100
A Furlong	8	6	75				

Non-Voting Members:

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance
B Kotecha/J Tyler-Fantom	6	6	100	S Ward	8	8	100
L Tibbert	1	1	100	M Wightman	8	8	100
				H Wyton	1	1	100