

Trust Board paper P2

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD**

**DATE OF TRUST BOARD MEETING: 7 June 2018**

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

**CHAIR: Mr A Johnson, Non-Executive Director**

**DATE OF COMMITTEE MEETING: 26 April 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:**

- None.

**DATE OF NEXT COMMITTEE MEETING: 24 May 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 26 APRIL 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  
Professor P Baker - Non-Executive Director  
Col. (Ret'd) I Crowe – Non-Executive Director  
Ms E Doyle - Interim Chief Operating Officer  
Mr A Furlong – Medical Director  
Ms B Kotecha – Joint Acting Director of Workforce and Organisational Development  
Ms E Meldrum – Acting Chief Nurse  
Mr R Moore – Non-Executive Director  
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  
Ms J Tyler-Fantom – Joint Acting Director of Workforce and Organisational Development

**In Attendance:**

Mrs G Belton – Corporate and Committee Services Officer  
Mr M Caple – Patient Adviser (for Minute 37/18/1 only)  
Mr J Clarke – Chief Information Officer (for Minutes 30/18/3 and 30/18/4 only)  
Miss M Durbridge – Director of Safety and Risk (for Minute 37/18/1 only)  
Ms S Hotson – Director of Clinical Quality (for Minute 37/18/1 only)  
Mr D Kerr – Director of Estates and Facilities (for Minute 37/18/1 only)  
Ms S Leak – Director of Operational Improvement  
Mr W Monaghan - Director of Performance and Information  
Ms C Ribbins – Deputy Chief Nurse  
Mr B Shaw – Director of Efficiency and CIP

**RESOLVED ITEMS**

**26/18            APOLOGIES FOR ABSENCE**

Apologies for absence were received from Mr K Singh, Trust Chairman.

**27/18            MINUTES**

**Resolved** – that the Minutes of the previous meeting held on 22 March 2018 (paper A) be confirmed as a correct record.

**28/18            MATTERS ARISING**

Paper B detailed the actions from the 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.

- 28/18/1 Verbal Report from the Joint Acting Director of Workforce and Organisational Development
- Resolved – that this Minute be classed as confidential and taken in private accordingly.**
- 28/18/2 Verbal Report from the Chief Executive on matters arising in relation to the Emergency Performance and Organisation of Care Report (considered at the March 2018 PPP meeting)

In specific discussion on the matters arising report (paper B) relating to actions agreed during the previous meeting's consideration of the emergency care report, members made note of the revised 'bottom up' methods of preparation of the key metrics and targets for the UHL Emergency Department (ED) performance, which were to be agreed with NHS Improvement (NHSI). It was agreed that these would be shared with members of the Committee, once confirmed.

CE/DPI

Discussion also took place regarding the timetable for preparation of the Annual Operational Plan, incorporating the planned initiatives by which the Trust intended to cope with anticipated demand in 2018/19. It was agreed to review progress with the AOP with particular regard to targets, trajectories and initiatives at the May 2018 PPP meeting.

ICOO/DOI

**Resolved – that (A) this verbal information be noted,**

**(B) the Chief Executive and Director of Performance and Information be requested to share with PPP Committee members, once agreed with the NHSI, the key metrics and targets for UHL ED performance, and**

CE/DPI

**(C) the Interim Chief Operating Officer / Director of Operational Improvement be requested to review progress with the Annual Operating Plan (AOP), incorporating the planned initiatives by which the Trust intended to cope with anticipated demand in 2018/19, at the May 2018 PPP meeting.**

ICOO/DOI

**29/18 PERFORMANCE**

29/18/1 Emergency Performance and Organisation of Care Report

Paper C, as presented by the Interim Chief Operating Officer, provided an update on performance against the NHSI trajectory for emergency care, which remained below NHSI trajectory and acceptable levels, resulting in a poor experience for patients and failure to achieve a key national performance standard. The report provided an update on the actions to improve the current position and progression towards achieving the objective of balancing demand and capacity for 2018/19.

Specific discussion took place regarding:-

- (i) the subsequent monitoring process for actions which were being implemented, which were monitored via a series of performance metrics, assurance on such having been sought by Ms Tate, Patient Adviser, given the current poor experience for patients in ED;
- (ii) the planned additional medical resource in the overnight period which would assist in reducing the time taken to see patients, and

(iii) means of addressing staff morale and maintaining energy and momentum when, despite everyone's best efforts, performance remained below target due to the high demand being experienced – the Chief Executive explained plans under discussion for Winter 2018/19 to flex the Trust's elective workload in a planned way in order to absorb changes in emergency demand – this specific item would be covered in the Emergency Performance and Organisation of Care report to be submitted to the May 2018 PPP Committee meeting.

ICOO / DPI

In conclusion, the Committee noted the recent improvement in 4 hour wait performance but could not assure the Trust Board of the ability of the Trust to achieve its performance targets (noting these were still to be finalised for 2018/19 – Minute 28/18/2 above refers), however the Committee acknowledged the continued focus and efforts underway to address the position and the improvements which were starting to be observed.

**Resolved – that (A) the contents of this report, and the additional verbal information provided, be received and noted, and**

**(B) the Interim Chief Operating Officer / Director of Operational Improvement be requested to include updates regarding the progression of plans for Winter 2018/19 (relating to flexing of the Trust's elective workload in a planned way to absorb changes in emergency demand) within the Emergency Care Performance and Organisation of Care report to be submitted to the May 2018 PPP Committee meeting.**

ICOO/DPI

29/18/2 Report from the Interim Chief Operational Officer

**Resolved – that this Minute be classed as confidential and taken in private accordingly.**

30/18 **PROCESS**

30/18/1 Progress Update on the Review of CMG Capacity and Capability

Paper D, as presented by the Chief Executive, updated the Committee on progress with the review of CMG capacity and capability and next steps. The review had four main components: (1) Structure (with a completion date of 30.4.18), (2) Capacity (completion date of 30.11.18), (3) Capability (completion date of 31.12.18) and (4) Governance (completion date of 30.6.18). The outcome of the structural review, now completed, was that no changes were to be made to the overall structure or composition of CMGs for the reasons documented within the report. The Committee received and noted the contents of this report, noting the progress made to date.

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

30/18/2 CMG Performance Review Process and CHUGGS CMG Dashboard

The Chairman acknowledged the enhancements made to this further iteration of the CMG Performance Review Dashboard (paper D1 refers, as relating to the CHUGGS CMG), however considered that two elements remained outstanding: (1) the absence of 'targeting' information within the visual slides (e.g. the inclusion of targeted projects with timescales to achieve an overarching objective) and (2) an executive overview or précis, which the PPP Chairman suggested could potentially

be provided via the submission of the Minutes of the CMG Performance Management meetings to the PPP Committee, in order not to generate the requirement to produce a separate report for the purpose of the PPP Committee only. In light of the fact that the CMG Performance Management meetings were not formally Minuted (action logs were produced from these meetings) the Chief Executive undertook to consider how best to provide this information to the next and future PPP Committee meetings. Note was also made, in discussion, of the need for capture of more qualitative issues relating to each CMG, such as those highlighted through the results of the Staff Survey, along with the inclusion of Hospital Model work.

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

**(B) the Chief Executive / Director of Performance and Information to consider how best to provide the following additional information within the CMG Performance Dashboards at future PPP meetings:-**

**(a) an executive overview or précis (in light of the PPP Chairman’s suggestion that Minutes / action logs be submitted), and**

**(b) ‘targeting’ information within the visual slides (e.g. the inclusion of targeted projects with timescales to achieve an overarching objective).**

**CE/DPI**

30/18/3

IM&T Capital Plan Briefing

As this report (paper E), detailing the IM&T Capital Plan for 2018/19 pre-dated the outputs of the Star Chamber meeting held on 24 April 2018, the Chief Executive requested that this report was withdrawn and submitted to the next (May 2018) PPP meeting, with the updated figures included. In discussion, members requested information relating to cyber security. In response, it was noted that a briefing on cyber security was scheduled for a forthcoming meeting of the PPP Committee. It was further noted that a report was scheduled for discussion at the Trust Board meeting to be held on 3 May 2018 (this related to 2017/18 Data Security Protection Requirements).

**CIO/CCSO**

**Resolved** – that this report (paper E) be withdrawn and submitted to the May 2018 PPP meeting with the updated figures included.

**CIO/CCSO**

30/18/4

Report from the Chief Information Officer

**Resolved** – that this Minute be classed as confidential and taken in private accordingly.

31/18

**PEOPLE**

31/18/1

UHL People Capability and Talent Management Approach

Paper G, as presented by Ms B Kotecha, Joint Acting Director of Workforce and Organisational Development, outlined ideas, recommendations and actions to be considered to formulate an effective talent management strategy aligned to organisational priorities and national expectations. The PPP Committee was requested to comment on the proposed strategic talent management approach outlined. The Committee received and noted the contents of this report and, in discussion, the PPP Chairman suggested that additional CMG / Corporate-specific measures of adoption might prove helpful as part of the targeting and further clarity was considered to be required such that actions were SMART, with the potential

inclusion of a time-phased GANTT chart relevant to specific CMG and management groups.

**Resolved – that (A) the contents of this report be received and noted, and (B) Ms B Kotecha, Joint Acting Director of Workforce and Organisational Development, be requested to:**

- (1) consider the inclusion of additional CMG / Corporate specific measures of adoption as part of the targeting;**
- (2) provide further clarity in terms of ensuring that actions were SMART, and**
- (3) consider the potential inclusion of a time-phased GANTT chart relevant to specific CMG and Management groups.**

JADWOD

31/18/2

**National Changes to Agenda for Change Terms and Conditions**

Paper H, as presented by Ms Tyler-Fantom, Joint Acting Director of Workforce and Organisational Development, provided an update on the changes to national terms and conditions of service for Agenda for Change (AFC) staff. It summarised the key implications and proposed how these changes would be implemented within the Trust. It also captured changes required to the local clinical excellence award process required as part of a national agreement and necessary next steps. Members received and noted the contents of this report, highlighting the need to ensure that staff were fully aware of the changes and their implications. Assurance was provided that a communications plan would be developed upon conclusion of the consultation and confirmation of formal ratification at national level. Specific discussion also took place with regard to the funding requirements to facilitate implementation of the proposed changes.

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

**(B) Ms Tyler-Fantom, Joint Acting Director of Workforce and Organisational Development, be requested to develop and enact a communications plan advising staff of the changes (once agreed nationally with Trade Unions).**

JADWOD

31/18/3

**Nurse Recruitment, Retention and Future Nursing Workforce**

Paper I, as presented by Ms E Meldrum, Acting Chief Nurse, provided an overview of the work on-going around recruitment and retention and the initiative relating to increasing the flexibility of clinical ward teams to deliver care through different roles. The report focussed on the need for a system-wide approach to recruitment. The report concluded that the Trust needed to identify the gap between nurse supply demand and the best way to address the gap over the next five years (i.e. potentially through Nursing Associate / Apprentice Nursing degrees etc.). It was too early to conclude if the loss of the NHS Bursary would have a long-term impact upon nursing numbers but the Trust (and LLR as a whole) must have a 'Plan B' to ensure a future supply. It was noted that the Trust must work as a system with local universities to support and influence recruitment of older applicants and applicants from BME backgrounds. Success had been seen with some recruitment initiatives; however a system-wide recruitment and retention plan was required. It was noted that national regulatory guidance was currently awaited. In discussion relating to the need for the Committee to see a 3-5 year plan which identified and mapped the staffing requirement including the gaps and potential means of filling such, it was

noted that a 5 year workforce plan was due to be submitted to the PPP Committee in June 2018 which would include this detail and an overview of actions.

In further discussion, Professor Baker, Non-Executive Director expressed his hope that recruitment of overseas staff should form only a minor element of the Trust's workforce strategy, in light of global ethical concerns relating to depriving the originating nation of the skills of these individuals. Discussion also took place regarding clinical apprenticeship roles and the need to consider the strategy on a multi-disciplinary basis, including aspects relating to Allied Health Professionals and which also took account of Physician Associates. In relation to this latter aspect, it was agreed that the refreshed medical workforce plan, due for submission to the Trust Board in August 2018, would be submitted to the July 2018 PPP Committee. Note was also made of the need not to create any specific issues under Agenda for Change in relation to the reinstatement of the 'Senior Staff Nurse' job title.

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

**(B) the Five Year Workforce Plan be submitted to the PPP Committee meeting in June 2018, and**

**JADWOD**

**(C) the refreshed medical workforce plan be submitted to the PPP Committee in July 2018 (ahead of submission to the Trust Board in August 2018).**

**MD**

31/18/4

Staff Survey 2017

Further to Minute 19/18/2 of 22 March 2018, paper J detailed a further report on the Staff Survey Results 2017. Further communication of the results of the survey would be included in the next Chief Executive's Briefing to staff. Particular note was made of this year's disappointing results, which showed a reversal of trends observed in previous years' surveys. Specific action was planned in order to address the issues identified within the survey.

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

31/18/5

Workforce and Organisational Plan Update

Paper K detailed the Workforce and Organisational Plan Update, some elements of which would be the focus of 'deep dives' at future PPP meetings and was presented to the Committee for information.

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

31/18/6

Interpreting and Translation Service – Quarterly Monitoring Report

Paper L detailed the first quarterly monitoring report for the Interpreting and Translation Service, following mobilisation of the contract in February 2018, and was presented to the Committee for information.

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

32/18

**MINUTES FOR INFORMATION**

32/18/1 Executive Performance Board

**Resolved** – that the action notes of the meeting of the Executive Performance Board held on 20 March 2018 (paper M refers) be received and noted.

32/18/2 Executive Workforce Board

**Resolved** – to note that the action notes from the Executive Workforce Board meeting held on 17 April 2018 would be presented to the May 2018 meeting of the People, Process and Performance Committee.

**33/18 PEOPLE, PROCESS AND PERFORMANCE COMMITTEE WORK PLAN**

Paper N detailed the updated annual work plan for the committee.

**Resolved** – that the report be received and noted.

**34/18 ANY OTHER BUSINESS**

**Resolved** – that there were no additional items of business.

**35/18 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 3 May 2018.

Cttee  
Chair/CCSO

**36/18 DATE OF THE NEXT MEETING**

**Resolved** – that the next meeting of the People, Process and Performance Committee be held on Thursday 24 May 2018 from 11.15am in the Board Room, Victoria Building, Leicester Royal Infirmary.

**37/18 JOINT SESSION WITH MEMBERS OF QOC IN ATTENDANCE**

37/18/1 Quality and Performance Report - Month 12

Joint Paper 1, as presented by the Director of Performance and Information, detailed the quality and performance metrics as at month 12.

Particular discussion took place relating to performance against RTT, 52-week breaches, cancelled operations, performance against the 2 week, 31 day and 62 day cancer standards, the VTE screening target and performance in relation to ambulance handovers, single sex accommodation breaches and 12-hour trolley waits. Explanations were provided to PPP members as to the reason for the reported single sex accommodation breaches and 12 hour trolley breaches detailed within the report; in both instances, prioritising clinical safety above all other considerations had been the primary focus (note was also made of NHSE's decision to lift same sex compliance sanctions for January 2018 due to the intense winter pressures being experienced nationally). Specific discussion also took place regarding a planned initiative between UHL and Derby Teaching Hospitals to treat a number of urology patients, and the further opportunities which might arise from this initiative, if successful.



Col. (Ret'd) I Crowe, Non-Executive Director and Quality and Outcomes Committee (QOC) Chairman, considered that a report relating to infection prevention was overdue at the Quality and Outcomes Committee, with no date yet assigned for the receipt of such, and he undertook to raise this in discussion under the QOC work plan at the QOC meeting to be held later that afternoon, in order that such a report could be scheduled for an imminent QOC meeting. In further discussion on infection prevention, it was agreed that a re-focus of attention on this area would be beneficial now, in the post-winter period.

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

**(B) the QOC Chairman be requested to raise discussion at the QOC meeting to be held on the afternoon of 26 April 2018 regarding the need for imminent scheduling of a report on Infection Prevention to the Quality and Outcomes Committee.**

The meeting closed at 1.52pm.

Gill Belton  
Corporate and Committee Services Officer

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

*Voting Members*

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

*Non-Voting Members*

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>	<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>
<i>C Benham</i>	1	0	0	<i>C Ribbins</i>	1	1	100
<i>J Clarke</i>	1	1 *	100	<i>B Shaw</i>	1	1	100
<i>S Leak</i>	1	1	100	<i>S Tate (from Dec 2017)</i>	1	1	100
<i>W Monaghan</i>	1	1	100				

\* for IT items only