

Trust Board paper O2

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

DATE OF TRUST BOARD MEETING: 7 December 2017

COMMITTEE: People, Process and Performance Committee

CHAIR: Mr A Johnson, PPPC Chair

DATE OF COMMITTEE MEETING: 26 October 2017

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

- Minute 9/17/2 – UHL Lean
- Minute 10/17/1 – Quality and Performance report month 6

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

- Minute 14/17/1 – Workforce update

DATE OF NEXT COMMITTEE MEETING: 30 November 2017

Mr A Johnson, Non-Executive Director and PPPC Chair

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST
MINUTES OF THE PEOPLE, PROCESS AND PERFORMANCE QUALITY COMMITTEE
HELD ON THURSDAY 26 OCTOBER 2017 AT 11.15PM TO 2.00PM IN THE BOARD ROOM,
VICTORIA BUILDING, LEICESTER ROYAL INFIRMARY

Present:

Mr A Johnson – Non-Executive Director (Chair)
Mr J Adler – Chief Executive (for minute reference 10/17 to 13/17 and 15/17 to 19/17)
Prof. P Baker – Non-Executive Director
Mr M Caple – Patient Partner (non-voting member) (for minute reference 10/17 and 16/17 to 19/17)
Col. (Ret'd) I Crowe – Non-Executive Director
Mr A Furlong – Medical Director (for minute reference 10/17 to 13/17 and 15/17 to 19/17)
Ms M Gordon - Patient Partner (non-voting member)
Ms B Kotecha – Deputy Director of Learning and Organisational Development (until minute reference 15/17/2 excluding 10/17)
Mr T Lynch – Chief Operating Officer (for minute reference 10/17 to 13/17 and 15/17 to 19/17)
Mr B Patel – Non-Executive Director
Mr K Singh – Chairman
Ms J Smith, Chief Nurse (for minute reference 10/17 to 13/17 and 15/17 to 19/17)
Ms L Tibbert, Director of Workforce and Organisational Development
Mr M Traynor – Non-Executive Director
Mr P Traynor - Chief Financial Officer (until minute reference 15/17/2 excluding 10/17)

In Attendance:

Mr S Barton – Director of Operational Improvement (for minute reference 10/17 to 13/17 and 15/17 to 19/17)
Mr C Benham – Director of Operational Finance (until minute reference 15/17/2 excluding 10/17)
Ms F Bayliss – Deputy Director of Nursing and Quality, Leicester City CCG (on behalf of Ms C West, Director of Nursing and Quality, Leicester City CCG) (for minute reference 10/17 and 16/17 to 19/17)
Miss M Durbridge – Director of Safety and Risk (for minute references 10/17 and 16/17 to 19/17)
Mrs S Everatt – Interim Corporate and Committee Services Officer
Mrs S Hotson – Director of Clinical Quality (for minute reference 10/17 and 16/17 to 19/17)
Mr D Kerr – Director of Estates and Facilities (for minute reference 10/17 and 16/17 to 19/17)
Mr W Monaghan – Director of Performance and Information
Mr B Shaw – Director of CIP and FOM (until minute reference 15/17/2 excluding 10/17)

RECOMMENDED ITEMS

ACTION

8/17 PEOPLE

8/17/1 Report from the Director of Workforce and Organisational Development 1

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

8/17/2 Report from the Director of Workforce and Organisational Development 2

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

9/17 PROCESS

9/17/1 Report from the Chief Information Officer

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

9/17/2 UHL Lean

The committee received paper F which was provided following a request at the September 2017 Finance and Investment Committee, and detailed the lean capabilities at UHL including proposed next steps. The Trust Chairman noted that external advice and support could be sought from the NHSI by inviting the NHSI Director of Improvement to visit the Trust and in links developed with the University of Leicester. In discussion of the item, it was agreed that a further report detailing the resource requirements for the project and the proposed lean tools to be utilised would be provided at the December 2017 committee meeting. The paper would also highlight any outpatient convergence that could be achieved.

**Cttee
Chair**

**DCIP&
FOM**

Recommended – that (A) the contents of paper F be received and noted;

(B) that the Committee sought (and received) support for the UHL Lean Initiative (as presented) with onward recommendation to the Trust Board to support its implementation, and

**Cttee
Chair**

(C) that an update be provided in 2 months' time on the resources required to implement the Lean Working Project and the proposed lean tools to be adopted. To tie in, where possible, any areas where outpatient convergence could be achieved.

**DCIP&
FOM**

10/17 JOINT SESSION WITH MEMBERS OF QOC IN ATTENDANCE

10/17/1 Quality and Performance Report Month 6

The committee received joint paper 1 which detailed the quality and performance metrics as at month 6. Specific discussion took place around the following indicators:

- *52 week patient* – one patient at the end of September 2017; none anticipated for the end of October 2017 which represents a significant improvement year on year;
- *Diagnostic 6 week wait* – remains compliant for the 12th consecutive month;
- *Cancer 2 week wait* – the 93% trajectory has been achieved for over a year;
- *Cancer 31 and 62 day* – was not achieved in August 2017;
- *Referral to Treatment* – was 91.5% against a target of 92%, partly due to cancelled operations and loss of theatre capacity at Glenfield Hospital due to urgent essential maintenance;
- *MRSA* – that the two avoidable cases of MRSA (one reported in August 2017 and one in September 2017) be reported on further at QOC once investigation reports had been produced;
- *Inpatient and Day Case Patient Satisfaction (FFT)* – the Quality Commitment of 97% had been achieved, and
- *Pressure ulcers* – that the Trust Board be informed that there had been one Grade 4 pressure ulcer reported this financial year due to regrading of a Grade 3 pressure ulcer from June 2017; the data had been retrospectively

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Chair**

updated as per national requirements.

In addition to this paper the committee received a supplementary paper (joint paper a1) which focused on three specific areas of performance which were currently out of kilter with requirements, these were: **(1) RTT 18 and 52 weeks; (2) 62-day cancer and (3) cancelled operations.**

In discussion of **RTT 18 week performance** it was noted that the Trust currently ranked 6th out of 18 peers. Of the 18 trusts in UHL's peer group; five were achieving RTT performance with UHL at 91.8% narrowly missing the 92% performance standard for July 2017. The largest pressure for the Trust in achieving 18 weeks RTT performance was elective surgery. The paper detailed the reasons for the performance. Assurance was received that actions plans were in place for each of the lower performing CMG areas and that these would be monitored. It was anticipated that the standard would be achieved for October 2017.

In discussion of **62-day cancer** it was noted that support had been received from the NHSI team. The current peer information for July 2017 ranked UHL as 8th out of 18 peer trusts. Relative and actual performance had seen sustained improvement against peers and for July 2017 UHL performance of 8% exceeded the 81.3% national average. Work was underway to identify the resource requirements needed to reduce each of the tumour sites from a 2 week wait to 7 days, with the initial focus likely to take place in Urology, Lower GI and Gynaecology. Interviews would take place in December 2017 for five vacant Oncologist posts.

It was noted that late referrals from tertiary centres continued to impact on UHL performance, however as at 1 April 2018 reporting requirements would change and accountability would rest with the original centre after 38 days. In the interim it was noted that feedback to Chairs or Medical Directors in offending organisations could take place to highlight the poor practice. Work was underway with Nottingham to develop best practice pathways which would be published to encourage other centres to use them. In discussion of this item, it was agreed that a further update on 62-day cancer performance would be provided at the November 2017 committee meeting.

DPI

In discussion of **cancelled operations** on the day the reasons for the cancellations were sighted in more detail and a discussion took place around how these could be reduced. UHL achieved a ranking of 10th out of 18 peers for cancelled operations.

Recommended – that (A) the contents of joint papers 1 and 1a be received and noted;

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(B) that an update be provided at the Quality and Outcomes Committee on the two avoidable MRSA cases reported in August and September 2017;

Cttee
Chair

(C) that the Trust Board be aware of the regrading of one grade 3 pressure ulcer in June 2017 to a grade 4 pressure ulcer, and the consequent change in UHL data, and

DPI

(D) that a further update on 62-day cancer performance be provided at the joint section of the November 2017 PPP committee meeting.

RESOLVED ITEMS

11/17 APOLOGIES FOR ABSENCE

Apologies for absence were received from Ms C West, Director of Nursing and Quality, Leicester City CCG; Ms L Gallagher, Workforce Development Manager; Ms E Meldrum, Acting Deputy Chief Nurse; Ms S Tate, Patient Partner and Mr R Moore, Non-Executive Director.

12/17 MINUTES

Resolved – there were no minutes from the 28 September 2017 meeting due to staff sickness, it was noted that they would be provided in due course at a future meeting.

13/17 MATTERS ARISING

Paper A detailed the actions from the inaugural meeting of the People, Process and Performance Committee on 28 September 2017. Updates at the meeting had been incorporated into the Matters Arising log.

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

14/17 PEOPLE

14/17/1 Workforce Update

The Director of Workforce and Organisational Development presented paper B which provided an update as at month 6 on the following workforce metrics: (1) paybill, worked and contracted whole time equivalents and agency update (including workforce productivity measures); (2) recruitment, retention and redesign (including vacancy and turnover rates, and apprenticeship management levy); (3) attendance/sickness, staff well-being, inclusion strategies, and (4) organisational development indicators.

It was noted that agency spend was currently above target, although a regional agency event on 6 October 2017 with suppliers had been very successful. Time to Hire performance required improvement and CMGs were proactively engaging with HR to achieve this. It was acknowledged that there was a financial risk with regards to the apprenticeship levy. It was reported that forty nine apprentices had now commenced in post, with a further 80 new apprentices due to start work between October and December 2017 against a target of 334. There continued to be delays in publication of national standards. The Trust turnover figure had seen a reduction since March 2017 but there continued to be pockets of higher levels in some areas of the organisation.

The average sickness rate for the past 12 months was 3.37% against a Trust target of 3%. In discussion of this item, it was agreed that a deep dive on sickness and occupational health would be provided at the November 2017 committee meeting and that further improvements to the workforce update report would also be seen at that meeting, following challenge around content and length at this meeting.

DWOD

Resolved – that (A) the contents of paper B be received and noted, and

(B) that a deepdive on sickness/prevention/well-being and Occupational Health be provided at the next PPPC meeting.

DWOD

15/17 PERFORMANCE

15/17/1 Report from the Chief Executive

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

15/17/2 UHL and LLR Winter Plan

The committee received paper H which outlined the plan for winter pressures in 2017/18, building on learning from 2016/17. Due to limited timing the paper was only briefly discussed but members were requested to email their comments to the author, copying in the Committee Chair and Interim Corporate and Committee Services Officer. It was acknowledged that over the Winter period 20 additional respiratory beds would be opened at Glenfield Hospital from 4 December 2017 to cope with anticipated demand.

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

16/17 MINUTES FOR INFORMATION

16/17/1 Executive Performance Board

Resolved – that the action notes of the meeting of the Executive Performance Board held on 26 September 2017 (paper I refers) be received and noted.

16/17/2 Executive Workforce Board

Resolved – that the notes of the meetings of the Executive Workforce Board held on 18 July 2017 and 17 October 2017 (papers J1 and J2 refer) be received and noted.

17/17 ANY OTHER BUSINESS

17/17/1 None noted.

18/17 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 2 November 2017, and five items were noted as needing to be brought to the attention of the Trust Board.

Cttee Chair

19/17 DATE OF NEXT MEETING

Resolved – that the next meeting of the People, Process and Performance Committee be held on Thursday 30 November 2017 from 11.15pm until 2.00pm in the Board Room, Victoria Building, Leicester Royal Infirmary.

Post meeting note – the venue has now changed to the Glenfield Hospital due to the anticipated decision on East Midlands Congenital Heart Service.

The meeting closed at 2.06pm.

Sarah Everatt
Interim Corporate and Committee Services Officer

Cumulative Record of Members' Attendance (2017-18 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>	2	2	100	<i>B Patel</i>	2	2	100
<i>J Adler</i>	2	2	100	<i>K Singh</i>	2	2	100
<i>P Baker</i>	2	1	50	<i>J Smith</i>	2	1	50
<i>I Crowe</i>	2	2	100	<i>L Tibbert</i>	2	2	100
<i>A Furlong</i>	2	1	50	<i>M Traynor</i>	2	2	100
<i>T Lynch</i>	2	2	100	<i>P Traynor</i>	2	2	100
<i>R Moore</i>	2	0	0				

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>S Barton</i>	2	1	50	<i>W Monaghan</i>	2	1	50
<i>C Benham</i>	2	1	50	<i>B Shaw</i>	2	1	50
<i>L Gallagher</i>	2	0	0	<i>S Tate</i>	0	0	
<i>M Gordon</i>	2	2	100	<i>J Tyler-Fantom</i>	2	0	0
<i>B Kotecha</i>	2	1	50				