

Cover report to the Trust Board meeting to be held on 1 March 2018

Trust Board paper M

Report Title:	People, Process and Performance Committee – Committee Chair’s Report (formal Minutes will be presented to the next Trust Board meeting)
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Reporting Committee:	People, Process and Performance Committee
Chaired by:	Andrew Johnson, Non-Executive Director
Lead Executive Director(s):	Eileen Doyle, Interim Chief Operating Officer Louise Tibbert, Director of Workforce and Organisational Development
Date of last meeting:	22 February 2018

Summary of key matters considered by the Committee and any related decisions made:

This report provides a summary of the following key issues considered at the People, Process and Performance Committee on 22 February 2018:

- ***Emergency Performance and Organisation of Care Report***

The report 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 the progress of the Organisation of Care Programme (OCP) to achieve the objective of balancing demand and capacity for 2017/18.

Specific discussion took place regarding:-

- worsening delays in relation to ambulance handover times and the intention to review processes in place at Nottingham University Hospitals NHS Trust to determine any further actions UHL could put in place to improve its handover times;
- deterioration in relation to non-admitted breaches;
- nurse staffing levels on wards with a planned intervention to utilise non-clinical staff from other areas within the Trust to support ward staff in administrative-based tasks;
- the importance of planning ahead early for Winter 2018/19, involving community colleagues as appropriate – it was agreed that the Chief Executive would raise the issue of potential health community-wide initiatives through the A & E Delivery Board, and
- ensuring messages relating to current high demand within ED were communicated throughout the whole organisation to facilitate trust-wide awareness and a more co-ordinated response.

In conclusion, the People, Process and Performance Committee could not assure the Trust Board of the Trust’s achievement of its current targets, however it acknowledged the actions being implemented to address the position. It was agreed that the Interim Chief Operating Officer would provide a further update on progress at the next PPP meeting.

- **UHL Winter Plan Review**

The report detailed a review of last year’s winter planning process and highlighted areas for improvement in forthcoming years. Specific discussion took place regarding the efficiencies required to close the bed capacity gap, acknowledging the continuing strain placed on staff and the potential consequent effects of this. There was acknowledgement of the need to increase permanent staffing numbers on wards making the Trust less susceptible to times of reduced bank staff provision (e.g. at half terms etc.) and particular emphasis was placed on the need to plan early and in conjunction with partners within the wider health community, with enhanced governance processes in place.

In conclusion, given the importance of this exercise, it was agreed that the Chief Executive would refer to the Winter Plan within his report to the next Trust Board meeting on 1 March 2018 and that the first iteration of the Winter Plan for 2018/19 would be submitted to the March PPPC meeting for comment.

- **2018/19 EPR Plan B**

This report detailed the Trust's 'Plan B' solution to progressing to a paperless hospital. Unexpectedly, the Chief Information Officer was not present at the meeting. The Committee was requested to discuss the plan for 2018/19 and the impact of the lack of external funding. The Committee welcomed the clarity provided in the report and expressed assurance with the contents of the paper. In discussion, the Quality and Outcomes Committee Chairman noted particular matters in relation to the wider governance processes and project structure concerning the "Paperless Hospital 2020" initiative which he had previously raised with the Medical Director, who had undertaken to review these. It was agreed that information relating to the contents of this report would be included in the Chief Executive's report to the Trust Board on 1 March 2018.

- **National Workforce Development Strategy - UHL Response**

This report detailed the current version of the Trust's intended response to consultation on the Draft Health and Care Workforce Strategy for England 2027. The Director of Workforce and Organisational Development noted that further additions were required to the Trust's draft response following discussions held recently with LPT. The Committee noted the contents of this report as currently drafted, acknowledging that the Director of Workforce and Organisational Development would ensure submission of the Trust's response by the required deadline, ensuring that Committee members received a copy of the final response. The Committee took the view that an effective national workforce strategy, together with the ability to enact it, was vital and needed to be urgently addressed.

- **Workforce and Organisational Development Plan Update**

This report detailed key workforce datasets for Month 10 covering pay bill, worked Whole Time Equivalent (WTE) and productivity performance with a particular focus on medical reporting, agency and non-contracted bill performance, vacancies and turnover, recruitment performance and actions, sickness, appraisal and staff engagement and organisational development. Assurances were provided within the report, including any actions to improve the current position. The Committee received and noted the contents of this report, specifically noting the key KPIs and assurances in place including those which formed part of well led and safe CQC domains.

Minutes for Information

The Committee received the following Minutes for information:

- Executive Performance Board (23 January 2018);
- Executive Workforce Board – it was noted that no further meetings had been held since the 17 October 2017 meeting, the Minutes of which had been presented at the People, Process and Performance Committee meeting held in October 2017.

Joint PPPC and QOC session:

- ***Quality and Performance Report – Month 10***

The report detailed the quality and performance metrics as at month 10. Particular discussion took place relating to the data on page 11 of the report (Domain – Responsive Cancer), with the 2 week wait performance target having been met (Year To Date), but not the 31 day wait (YTD) or the 62 day wait (YTD) due to emergency pressures.

Specific discussion took place regarding actions put in place for patients whose treatment had necessitated cancellation due to emergency pressures and the intention to seek the view of those

patients as to what additional measures / action the Trust could take to further assist patients whose treatment required cancellation.

Particular discussion also took place regarding data relating to out-patients, specifically the plan to switch off the paper-based system of GP referrals from 9 April 2018, with a 4 week feedback system in place to assist any GP practices continuing to send paper-based referrals after this deadline. The Committee also considered the issue of the timeliness of the production of letters to GPs from the Trust and potential means of improving this.

Also discussed was the definition of 'stranded' patients as determined at national level and the Director of Performance and Information undertook to request that the Director of Operational Improvement produced a report for consideration in the next Joint session of QOC and PPPC in March 2018 which detailed the numbers of such patients within UHL and any observable trends.

Matters requiring Trust Board consideration and/or approval:

It was noted that the Trust Board would receive information in relation to the following specific areas as part of the Chief Executive's report to the Trust Board:

- the Winter Plan Review, and
- 2018/19 EPR Plan B.

The Trust Board should be aware of the intention to switch-off the paper-based system of GP referrals for out-patients from 9 April 2018.

Matters referred to other Committees:

There were no matters requiring onward referral to other meetings.

Date of next meeting:

22 March 2018