

Trust Board paper O1

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

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

**DATE OF TRUST BOARD MEETING: 1 March 2018**

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

**CHAIR: Mr A Johnson, PPPC Chair**

**DATE OF COMMITTEE MEETING: 25 January 2018**

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

- Minute 42/17/1 – Workforce Equality and Diversity Monitoring Report 2016-17.

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

- None

**DATE OF NEXT COMMITTEE MEETING: 22 February 2018**

**Mr A Johnson, Non-Executive Director and PPPC Chair**

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**  
**MINUTES OF THE PEOPLE, PROCESS AND PERFORMANCE COMMITTEE HELD ON**  
**THURSDAY 25 JANUARY 2018 AT 11.15PM TO 1.45PM IN THE BOARD ROOM, VICTORIA**  
**BUILDING, LEICESTER ROYAL INFIRMARY**

**Present:**

Mr A Johnson - Non-Executive Director (Chair)  
Mr J Adler - Chief Executive  
Prof. P Baker - Non-Executive Director (from minute reference 54/17)  
Col. (Ret'd) I Crowe - Non-Executive Director  
Ms E Doyle - Interim Chief Operating Officer  
Mr A Furlong - Medical Director  
Mr B Patel - Non-Executive Director  
Mr K Singh - Chairman (ex-officio member)  
Ms S Tate - Patient Partner (non-voting member) (until minute reference 54/17)  
Ms L Tibbert - Director of Workforce and Organisational Development (until minute reference 54/17)  
Mr M Traynor - Non-Executive Director  
Mr P Traynor - Chief Financial Officer (until minute reference 54/17)

**In Attendance:**

Dr D Barnes - Clinical Lead Cancer Centre (from minute reference 54/17)  
Mr M Caple - Patient Partner (non-voting member) (from minute reference 48/17/2)  
Mr J Clarke - Chief Information Officer (for minute reference 41/17/1 and 47/17/3)  
Ms S Leak - Director of Operational Improvement (until minute reference 54/17)  
Mr C Benham - Director of Operational Finance (until minute reference 54/17)  
Ms M Durbridge - Director of Safety and Risk (from minute reference 54/17/4)  
Mrs S Everatt - Interim Corporate and Committee Services Officer  
Ms L Gale - Head of Financial Planning (until minute reference 54/17) (observer)  
Mr M Hotson - Head of of Business, Commercial and Contracts (from minute reference 54/17/4)  
Ms S Hotson - Director of Clinical Quality (from minute reference 48/17/2)  
Mr D Kerr - Director of Estates and Facilities (from minute reference 48/17/3)  
Mrs H Majeed - Corporate and Committee Services Officer (from minute reference 54/17)  
Mr W Monaghan - Director of Performance and Information  
Ms C Ribbins - Deputy Chief Nurse  
Ms J Tyler-Fantom - Deputy Director of Human Resources (until minute reference 54/17)

**RECOMMENDED ITEMS**

**41/17            PROCESS**

41/17/1            Report from the Chief Information Officer

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

**42/17            PEOPLE**

42/17/1            Workforce Equality and Diversity Monitoring Report 2016-17

The Director of Workforce and Organisational Development presented paper J which detailed the workforce equality and diversity monitoring report for 2016-17. The report was a factual representation for the last financial year and provided

data against the nine protected characteristics. It was noted that the report would be refreshed and was due to be discussed at the Executive Workforce Board on 30 January 2018 prior to being discussed at the Trust Board on 1 February 2018 and published on the Trust's website. Updated Workforce Race Equality Standards (WRES) data would be included in the next report, but in the interim, the Director of Clinical Quality was asked to contact the Care Quality Commission (CQC) to ascertain their queries in relation to WRES following the January 2018 CQC visit.

DCQ

**Recommended – that (A) the report be received and noted;**

**(B) that the Director of Clinical Quality be requested to liaise with the Care Quality Commission to ascertain their queries in relation to Workforce Race Equality Standards following the recent CQC visit, and**

DCQ

**(C) that the People, Process and Performance Committee recommend to the Trust Board that the Workforce Equality and Diversity Monitoring Report 2016-17 (revised paper J) be approved.**

Cttee  
Chair

### **RESOLVED ITEMS**

#### **43/17 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Ms J Smith, Chief Nurse; Mr R Moore, Non-Executive Director; Mr B Shaw, Director of Efficiency and CIP, and Ms C West, Director of Nursing and Quality, Leicester City CCG.

#### **44/17 MINUTES**

Paper A detailed the minutes from the 21 December 2017 People, Process and Performance Committee meeting.

**Resolved – that the Minutes of this meeting (paper A) be confirmed as a correct record.**

#### **45/17 MATTERS ARISING**

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

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

#### **46/17 PERFORMANCE**

##### **46/17/1 Improving Emergency Access and Organisation of Care 2017-18**

The monthly report provided an update on performance against the NHSI trajectory for emergency care, in addition to incorporating a number of actions from the last People, Process and Performance Committee meeting and providing the Committee with transparency on the written feedback received from Luton and Dunstable. Following a

visit from Mr Simon Weldon, NSHE yesterday further work would be incorporated into next months version of the report.

Eileen Doyle, Interim Chief Operating Officer was asked to provide a reflection on performance. She noted that the number of patients combined with the complexity of providing services at three sites was impacting on performance. There also remained some structural, process and system issues. Floor management had been in place for two weeks and the early signs were positive with some improvements in performance having already been made. Work continued to further reduce non-admitted breaches, and overnight staffing remained challenging although it was acknowledged that staff continued to work hard. There remained a number of outlying patients due to an increased number of patients being admitted for respiratory problems during the Winter period. It was anticipated that the Trust would be sustaining performance of at least 80% in 3 months time.

It was reported that, following the Government directive, elective work would recommence in a phased approach from mid-February 2018, but that a corresponding decrease in ED performance was not anticipated. It was acknowledged that further work was required on cultural issues including a renewed focus on breach prevention, and medical ownership, leadership and professional standards, all of which would be incorporated in to future planning as a whole hospital approach.

A presentation was due to be produced for national and internal viewing with regards to the Trust's current performance, context and next steps. Assurance was provided that the key next steps outlined in the paper would be included in the Trust annual priorities for 2018-19. In discussion of this item it was agreed that a report would be provided to the February 2018 People, Process and Performance Committee on the priorities outlined in the resolution below.

DOI

In conclusion, whilst the Committee was not assured that ED was currently capable of achieving its national targets, it was assured that the recent initiatives implemented and actions in place were likely to lead to an improvement in performance over the next three months.

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

**(B) that a report be provided to the February 2018 People, Process and Performance Committee on the following agreed priorities: (1) progress on breaches – especially non-admitted; (2) night management initiatives including performance targeting; (3) embedding those initiatives indicated by the recent assessment as not currently effective; (4) developing teams and empowering decision-making; (5) embedding and expansion of the geographical scope of Red2Green (linked to cycle time); (5) Floor Manager role needs clarity: define the role; responsibilities; accountabilities; seniority and aims/targets of the Floor Manager; (6) step down beds – fully implement; (7) improvement in ED culture and how to measure that improvement; (8) how to tackle staff weariness/fatigue positively and how to communicate improvement, and (9) improving services to patients whilst chasing targets is a key priority, and**

DOI

**(C) that the Trust Board be advised that whilst the Committee was not assured that ED was currently capable of achieving its national targets, it was assured that the recent initiatives implemented and actions in place were likely to lead to an improvement in performance over the next 3 months.**

Cttee  
Chair

**47/17 PROCESS**

47/17/1 Report from the Chief Executive

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

47/17/2 Report from the Committee Chair

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

47/17/3 IT Priorities 2018-19

The Chief Information Officer presented paper F which outlined three broad priorities, with an additional one around the Quality Commitment to be added: (1) ensuring the organisation and its data was safe and secure; (2) managing technical obsolescence, and 3) strategic investments. It was noted that priorities would be accelerated if external capital was received.

A specific update was provided on the end user computing element, which noted that organisational requirements and specifications had now been worked up and required finalisation of costings. Organisational key imperatives had now been discussed and agreed.

In conclusion, the Committee were assured by the contents of the report and verbal update provided.

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

**48/17 PEOPLE**

48/17/1 Report from the Director of Workforce and Organisational Development

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

48/17/2 Off Payroll and IR35 Compliance

The Deputy Director of Human Resources updated the Committee on the position with IR35 (paper H). The report provided the national context, details around the current position and process and provided assurance against compliance with IR35 regulations. It was reported that 194 staff were currently off payroll, and 32 staff were outside IR35 at the present time. It was agreed that future reports would be included in the main body of the Workforce update report, and that assurance would be provided around the 32 roles which were currently outside IR35.

**Resolved – that (A) the contents of the report be received and noted, and (B) that future reports would be included in the main body of the Workforce**

**DDHR**

**update report, and that assurance would be provided around the 32 roles which were currently outside IR35.**

**DDHR**

48/17/3 Corporate Services Review update

The Director of Workforce and Organisational Development presented paper I which provided an update on the corporate services review and reported that the Trust had achieved its targets for 2017/18. It had been agreed with Leicestershire Partnership Trust that two areas would be the focus for synergies on transactional issues – Finance and HR, and the Director of Workforce and Organisational Development and the Chief Financial Officer were working to progress this work. The NHSI back office function was being utilised where possible for reporting on Human Resource related matters. Benchmarking had been undertaken against other trust's back office functions. Assurance was provided that the corporate services review was progressing but was not yet finalised. In discussion of this item it was agreed that details of the inclusion of Estates and facilities figures in the modelling would be provided to Committee members.

**DWOD**

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

**(B) that details of the inclusion of Estates and Facilities figures in the modelling would be provided.**

**DWOD**

**49/17 MINUTES FOR INFORMATION**

49/17/1 Executive Performance Board

**Resolved – that the action notes of the meeting of the Executive Performance Board held on 19 December 2017 (paper K refers) be received and noted.**

49/17/2 Executive Workforce Board

**Resolved – that no further meetings have been held since the 17 October 2017, the minutes of which were presented to the October 2017 People, Process and Performance Committee on 26 October 2017.**

**50/17 PEOPLE, PROCESS AND PERFORMANCE COMMITTEE WORK PLAN**

Paper L detailed the annual work plan for the committee.

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

**51/17 ANY OTHER BUSINESS**

51/17/1 No items were received for information.

**52/17 IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD**

**Resolved – that a summary of the business considered at this meeting be**

**Cttee**

presented to the Trust Board meeting on 1 February 2018, and two items were noted as needing to be brought to the attention of the Trust Board.

Chair

**53/17 DATE OF THE NEXT MEETING**

**Resolved** – that the next meeting would be held on Thursday 22 February 2018 from 11.15am until 1.45am in the Board Room, Victoria Building, Leicester Royal Infirmary.

**54/17 JOINT SESSION WITH MEMBERS OF QOC IN ATTENDANCE**

54/17/1 Quality and Performance Report Month 9

The report (joint paper 1) detailed the quality and performance metrics as at month 9. Due to timing issues the Director of Performance and Information did not provide an update but focused instead on three additional supplementary papers.

**Resolved** – that the contents of joint paper 1 be received and noted.

54/17/2 Report 1 from the Director of Performance and Information

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

54/17/3 Report 2 from the Director of Performance and Information

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

54/17/4 Report 3 from the Director of Performance and Information

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

The meeting closed at 2.32pm

Sarah Everatt  
Interim Corporate and Committee Services Officer

**Cumulative Record of Members' Attendance (2017-18 to date):**

*Voting Members*

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance
A Johnson (Chair)	5	5	100	B Patel	5	5	100
J Adler	5	5	100	K Singh (ex-officio)	5	5	100
P Baker	5	2	40	J Smith	5	3	60
I Crowe	5	5	100	L Tibbert	5	5	100
A Furlong	5	4	80	M Traynor	5	5	100
T Lynch (until Dec 2017)	4	3	75	P Traynor	5	4	80
R Moore	5	1	20				

*Non-Voting Members*

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance

<i>S Barton (until Dec 2017)</i>	3	2	66	<i>W Monaghan</i>	5	4	80
<i>C Benham</i>	5	4	80	<i>B Shaw</i>	5	2	40
<i>L Gallagher</i>	5	0	0	<i>S Tate (from Dec 2017)</i>	2	2	10
<i>M Gordon (until Nov 2017)</i>	3	3	100	<i>J Tyler-Fantom</i>	5	3	60
<i>B Kotecha</i>	5	2	40				