

Trust Board paper O3

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

DATE OF TRUST BOARD MEETING: 4 OCTOBER 2018

COMMITTEE: PEOPLE, PROCESS AND PERFORMANCE COMMITTEE

CHAIR: MR ANDREW JOHNSON, NON-EXECUTIVE DIRECTOR

DATE OF COMMITTEE MEETING: 30 AUGUST 2018

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

- None.

OTHER KEY ISSUES IDENTIFIED BY THE COMMITTEE FOR THE ATTENTION OF THE TRUST BOARD:

- Urgent and Emergency Care Performance (Minute 75/18/1) – the PPC was not currently assured regarding emergency and urgent care performance and was disappointed that the latest performance figures appeared to demonstrate that performance was deteriorating, despite significant continued focus in this area.

DATE OF NEXT COMMITTEE MEETING: 27 SEPTEMBER 2018

**Mr A Johnson
Non-Executive Director and PPC Chair**

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**MINUTES OF THE PEOPLE, PROCESS AND PERFORMANCE COMMITTEE (PPPC)
MEETING HELD ON THURSDAY 30 AUGUST 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
 Mr A Furlong – Medical Director
 Ms E Meldrum – Acting Chief Nurse
 Mr B Patel - Non-Executive Director
 Mr K Singh – Non-Executive Director (ex-officio member)
 Ms S Tate - Patient Partner (non-voting member) – up to and including Minute 82/18
 Mr M Traynor - Non-Executive Director
 Mr P Traynor – Chief Financial Officer - up to and including Minute 82/18
 Ms H Wyton – Director of People and Organisational Development

In Attendance:

Mrs G Belton – Corporate and Committee Services Officer
 Mr C Benham – Director of Operational Finance
 Mr M Caple – Patient Partner (for Minute 83/18)
 Miss M Durbridge – Director of Safety and Risk (from Minute 83/18)
 Mrs S Hotson – Director of Clinical Quality (from Minute 83/18)
 Mr I Khalifa – IM&T Enterprise Infrastructure Architect (for Minute 76/18/2 only)
 Ms B Kotecha – Deputy Director of Learning and Organisational Development
 Ms S Leak – Director of Operational Improvement – up to and including Minute 82/18
 Mr W Monaghan - Director of Performance and Information
 Ms J Tyler-Fantom – Deputy Director of Human Resources

RESOLVED ITEMS**ACTION****72/18 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Ms R Brown, Chief Operating Officer, Mr J Clarke, Chief Information Officer, Ms D Mitchell, Deputy Chief Operating Officer, Mr R Moore, Non-Executive Director and Ms C Ribbins, Deputy Chief Nurse.

73/18 MINUTES

Resolved – that the Minutes of the PPPC meeting held on 26 July 2018 (papers A and A1 refer) be confirmed as a correct record.

74/18 MATTERS ARISING

Paper B detailed the actions from previous meetings of the People, Process and Performance Committee (PPPC). In discussion regarding action 9b (Minute reference 31/18/3 of 26 April 2018), it was agreed that the Workforce Plans (covering medical, nursing and general posts) would be submitted to the Executive Workforce Board meeting on 16 October 2018 and, thereafter, to the People, Process and Performance Committee on 25 October 2018.

Resolved – that the matters arising log – and any referenced actions above – be noted.

75/18 PERFORMANCE

75/18/1 Urgent and Emergency Care Performance

Further to the Urgent and Emergency Care Review presented at the 24 July 2018 meeting of the Executive Performance Board (action note 4.1 refers) and the 26 July 2018 meeting of the People, Process and Performance Committee (Minute 63/18/1 refers), at which time it was agreed that there would be a new monthly report to both Committees covering urgent and emergency care, paper 'C' set out current progress against the action plan and the relevant corresponding performance metrics. Members received and noted the contents of this report, as presented by the Director of Performance and Information in the absence of the Chief Operating Officer, and particular discussion took place regarding the following :-

- (i) the intention, from the 27 September 2018 PPPC meeting onwards, to append the action plan to this report, as work was still on-going in relation to this currently;
- (ii) the significant growth in activity, both in attendances and in admissions; a picture which was reflected nationally;
- (iii) (albeit taking into account an increased volume of activity) concerns relating to performance against a range of metrics worsening, rather than improving, and the need to focus on whether the agreed actions were having the intended results;
- (iv) the need not to have duplicate discussions regarding urgent and emergency care performance at both the EPB and PPP. EPB was the executive forum at which issues were discussed, solutions were generated and action plans implemented; the role of PPP was to seek and obtain assurance in relation to the solutions identified and actions underway to address performance;
- (v) (in relation to the above point) a recognition that the EPB required specific detailed information on what had not happened which had been forecast to happen – it was agreed that the Director of Performance and Information would notify the Chief Operating Officer (not present at today's meeting) of this feedback;
- (vi) the need for specific focus in relation to driving down non-admitted breaches (balanced against other relevant qualitative indicators and patient experience) – the Director of Operational Improvement noted that such discussions were being held as part of the winter planning meetings;
- (vii) the need to apply lessons from the challenges of the Summer in the Trust's Winter Planning;
- (viii) note was made of the new model of care in relation to primary care attendances within ED which was being implemented on 12 September 2018, assurance was obtained that the change would be managed effectively and
- (ix) the application of Red 2 Green principles in ED and the introduction of two-hourly board rounds to address any particular delays within individual patient journeys and expedite these accordingly.

COO

DPI/
COO

In concluding discussion on this item, the PPP Committee could not currently be assured in respect of sustainable achievement of the performance metrics in relation to urgent and emergency care, however welcomed the significant work on going into addressing this matter.

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

(B) the action plan be appended to future iterations of this report (noting that work remained on-going in relation to this currently), and

COO

(C) the EPB to be provided with clear, specific and detailed information on what had not happened which had been forecast to happen within the monthly update report it received regarding emergency care performance.

COO

76/18 PROCESS

76/18/1 eHospital Programme

The Head of Projects and Programmes (IM&T) attended to present paper 'D', which updated members on the eHospital programme. The re-branded eHospital programme would upgrade, exploit and develop existing systems to enable the Trust to move towards a paperless hospital environment. The priorities for 2018/19 had been agreed as (1) End Use Compute (replacement of desktops and apple devices) (2) ePMA roll-out across all wards at UHL (3) ICE – Order Comms in OPD and acknowledging results (4) Localisation of GE PACS and (5) Nerve Centre (paperless nursing forms across UHL). Capital funds (£1.5m) had been allocated to support this programme, however there was no additional revenue to support the implementation and change aspects of the programme. The pace of implementation would therefore be constrained by the availability of capital funding and resources within IM&T and change leads across the Trust. Members received and noted the contents of this report and specific discussion took place regarding the following:-

- (i) other potential means of accessing additional funding, which were currently being pursued;
- (ii) progress, to-date, against the programme – specific note was made of the attention and time being devoted to ensuring the required resources were in place, and
- (iii) the need to be pro-active in seeking feedback from users in relation to the GE PACS programme – it was agreed that the Head of Projects and Programmes (IM&T) would ensure that relevant feedback mechanisms would be established for this purpose which would be clearly communicated to relevant staff.

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

(B) in relation to the GE PACS programme, the Head of Projects and Programmes (IM&T) be requested to ensure that relevant feedback mechanisms were established for this purpose and were clearly communicated to relevant staff.

**HoPP
(IM&T)**

76/18/2 Report by the Chief Information Officer

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

76/18/3 CMG Performance Review Process

Paper F, as presented by the Medical Director in the absence of the Chief Operating Officer, updated the PPPC on the progress of the Clinical Management Group (CMG) Performance Review meetings (PRM), which were the first step towards an accountability framework. The Executive Directors reported verbally on the benefits being observed to-date from these revised format meetings, with improvements and traction on specific issues being observed already in some areas. It was noted that the Chief Operating Officer intended to submit a report to the next meeting of the PPPC on the accountability framework. It was also agreed that the following information would be presented at the September 2018 PPPC in relation to this agenda item, for continued assurance purposes: ratings, summary of discussions and action plans. The PPPC Chairman noted that it would potentially be helpful, at a future date when the new format meetings were well-embedded, to invite a CMG to a PPPC meeting to provide their comments / observations on the process in place. The PPPC received and noted the contents of this report and the Medical Director undertook to feedback discussion on this item to the Chief Operating Officer.

COO

MD

In response to a query raised by the PPPC Chair, the Chief Executive confirmed that CMG annual objectives were taken from the Trust annual priorities.

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

(B) the Chief Operating Officer be requested to:-

- (i) submit the next steps (including the delivery of the Accountability and Performance Framework) to the September 2018 meeting of the PPPC, and**
- (ii) also present the following information at the September 2018 PPPC meeting in relation to this agenda item for continued assurance purposes: ratings, summary of discussion and action plan.**

77/18 PEOPLE

77/18/1 Report by the Director of People and Organisational Development

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

77/18/2 Looking After UHL – Health and Well-Being Strategy – Year 3

Paper H, and its associated appendices, as presented by Ms B Kotecha, Deputy Director of Learning and Organisational Development, provided an update on the Trust's Health and Wellbeing Policy – 'Looking after UHL'. It provided an update on all work streams that supported staff health and well-being. The evaluation of Wellbeing at Work activities demonstrated that these were well received and reflected the needs of staff. Successes had been communicated via Health and Well-Being newsletters and the Chief Executive Briefings. The decline in health and wellbeing results from the 2017 NHS Staff Survey meant that the first year of the CQUIN had not been met. Whilst there were many contributing factors to this, steps were being undertaken to try and improve the results from this year's survey. Next steps involved completion of the actions on the Year 3 implementation plan, delivery of health and wellbeing awareness raising sessions and an increase in the number of Health and Wellbeing Champions. Members received and noted the contents of this report. In consideration of this item, note was made that this report had been discussed at the Executive Workforce Board meeting held on 17 July 2018. It was also noted that UHL figures were in line with the national picture of a decline in health and wellbeing indicators.

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

78/18 REPORTS FOR INFORMATION

78/18/1 Workforce and Organisational Development Set

The slide deck accompanying paper I, as presented to the Committee by the Director of People and Organisational Development, captured key workforce datasets for Month 4 (July 2018), the contents of which were received and noted. In presenting this report, the Director of People and Organisational Development particularly highlighted (1) the work being undertaken by the Director of People and OD and the Acting Chief Nurse in the recruitment of qualified nurses (2) the planned focus on turnover in the particular specialties in which this was an issue (3) plans to improve performance, in collaborative working with CMGs, against the 'Time to Hire' metric and (4) the incorrect figure on the front sheet of the report in relation to statutory and mandatory training – the correct figure was presented within the body of the text within the main report. In discussion on the contents of this report, Ms V Bailey, Non-Executive Director noted that it would be helpful to have further granularity of sickness absence data to better understand the reasons for staff sickness, in response to which the Deputy Director of Human Resources advised that a deep dive of this data had been undertaken.

In general discussion, the intention to expand the 'People' section of the PPPC agendas in future was noted, once the recently appointed Director of People and Organisational Development had been afforded the opportunity to review the PPPC workplan, with specific reference to the HR items, and it was agreed that the Director of People and Organisational Development would provide notification of 'people' related items for scheduling within the work programme of the PPPC by October 2018. It was also confirmed, during discussion, that the

revised Workforce Strategy would be presented at the October meeting of PPP. It was further agreed that it would be appropriate for the Medical Workforce Strategy to be presented at the same meeting rather than at the September 2018 meeting.

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

(B) the revised Workforce Strategy be presented at the October 2018 meeting of the PPPC (along with the medical workforce and nursing workforce strategy), and

(C) the Director of People and Organisational Development be requested to provide notification of 'people' related items for scheduling within the work programme of the PPPC by October 2018.

DPOD/
MD/
ACN

DPOD

78/18/2 Leadership Conference Update

Paper J provided an update on the Trust's annual Leadership Conference to be held on 11 September 2018, the contents of which were received and noted.

Resolved – that this report be received and noted.

79/18 **MINUTES FOR INFORMATION**

Resolved – that (A) the 26 July 2018 Executive Performance Board action notes be received and noted as per paper K, and

(B) the 17 July 2018 Executive Workforce Board actions be received and noted as per paper L.

80/18 **ANY OTHER BUSINESS**

Resolved – that there were no additional items of business.

81/18 **IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD**

Resolved – that the following item be highlighted for the attention of the Trust Board, through the PPPC meeting summary presented to the September 2018 public Trust Board meeting:-

- Urgent and Emergency Care Performance (Minute 75/18/1 above) - the PPPC was not currently assured regarding emergency and urgent care performance and was disappointed that the latest performance figures appeared to demonstrate that performance was deteriorating, despite significant continued focus in this area.

PPPC
CHAIR/
CCSM

82/18 **DATE OF THE NEXT MEETING**

Resolved – that the next meeting of the People, Process and Performance Committee be held on Thursday 27 September 2018 from 11.15am in the Board Room, Victoria Building, Leicester Royal Infirmary.

83/18 **JOINT SESSION WITH MEMBERS OF QOC**

83/18/1 Quality and Performance Report - Month 4

Joint Paper 1, as presented by the Director of Performance and Information, detailed the quality and performance metrics as at month 4 (period ending 31 July 2018). PPPC/QOC noted in particular:-

- (a) the 'responsive' domain, in particular the need for focus on elective activity (and achievement of corresponding performance indicators);
- (b) current variations between planning assumptions and the activity actually being experienced;
- (c) transfers out to other providers (where relevant) to ensure timely treatment for patients;
- (d) diagnostics performance and the current spike in endoscopy referrals;
- (e) 62 day cancer performance;
- (f) the observed growth in GP referrals, particularly relating to 2 week wait referrals, and the referral support services in place early in the pathway supported by UHL Consultants;
- (g) RTT performance against trajectory;
- (h) mortality performance;
- (i) positive progress against statutory and mandatory training, particularly for medical staff;
- (j) discharge processes and reasons for cancelled operations – it was considered helpful to look at 'themes' of cancellations and the Director of Performance and Information advised that these would be identified through the cancelled operations exceptions report, and
- (k) the Director of Safety and Risk briefed members of intended focus on the current performance against the indicators comprising the 'Safety' domain at the Executive Quality Board meeting planned for 4 September 2018.

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

(B) 'themes' of cancellations be identified through the cancelled operations exception report.

DPI

The meeting closed at 1.56pm.

Gill Belton – **Corporate and Committee Services Officer**

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

Voting Members

| Name | Possible | Actual | % attendance | Name | Possible | Actual | % attendance |
|--------------------------|----------|--------|--------------|--|----------|--------|--------------|
| A Johnson (Chair) | 5 | 5 | 100 | B Kotecha / J Tyler-Fantom (Apr 18 – 31 July 2018) | 4 | 4 | 100 |
| J Adler | 5 | 3 | 60 | E Meldrum (Apr 18 - | 5 | 4 | 80 |
| V Bailey | 5 | 5 | 100 | R Moore | 5 | 2 | 40 |
| P Baker | 5 | 3 | 60 | B Patel | 5 | 5 | 100 |
| R Brown (from June 2018) | 3 | 2 | 67 | K Singh (ex-officio) | 5 | 2 | 40 |
| I Crowe | 5 | 5 | 100 | M Traynor | 5 | 5 | 100 |
| E Doyle (until May 2018) | 2 | 2 | 100 | P Traynor | 5 | 4 | 80 |
| A Furlong | 5 | 5 | 100 | | | | |

Non-Voting Members

| Name | Possible | Actual | % attendance | Name | Possible | Actual | % attendance |
|------------|----------|--------|--------------|-----------|----------|--------|--------------|
| C Benham | 5 | 4 | 80 | C Ribbins | 5 | 4 | 80 |
| J Clarke | 5 | 2 * | 40 | B Shaw | 5 | 2 | 40 |
| S Leak | 5 | 4 | 80 | S Tate | 5 | 5 | 100 |
| W Monaghan | 5 | 5 | 100 | | | | |

* for IT items only