

Agenda Item:

Board of Directors Meeting

Report

Subject: TRUST MANAGEMENT BOARD

Date: 24th SEPTEMBER 2015

Author: SHIRLEY A CLARKE, DEPUTY DIRECTOR OF CORPORATE SERVICES

Lead Director: KAREN FISHER, ACTING CHIEF EXECUTIVE

The September meeting of the Trust Management Board was held on Monday 21st September 2015. The full agenda and attendees are included below, the meeting was chaired by Dr Andy Haynes, Medical Director

Escalations:

There were no items identified for escalation to the Board of Directors

Key Issues discussed:

The Overseas Visitors Policy was presented and approved by TMB with a request for a full implementation and communication plan to be submitted to the next meeting.

The Hospitality Policy was presented and approved with a minor change to the wording regarding declarations on the hospitality register.

The Head of Strategic Procurement presented an updated on how the trust was performing against the Carter recommendations. The Trust was already reviewing a number of the areas suggested in the report and were working with procurement colleagues across the region to ensure the Trust was achieving best value from its contracts and NHS supplies.

The Head of Estates and Facilities presented a proposal to increase visitor car parking charges and directed members of the committee to the different options. The proposal has been discussed informally at a Board Development Session and had been distributed to the Governors for consultation. A brief Council of Governors was being held prior to the AGM on Wednesday 23rd September in order for the Governors to approve or not the proposal. The proposal was scheduled for discussion at the public meeting of the Board of Directors on Thursday 24th September.

The Car Parking Policy was presented and approved subject to the inclusion of annual RPI increases to visitor parking charges being included. The annual increase of staff car parking charges was already identified in the policy.

The outcome of the external review of Diabetic Podiatry was presented, further work was required to populate all of the actions identified from the recommendations and a working group had been established to complete this by the end of the month. There was discussion regarding how this group would report through the governance process and it was agreed it

would be via the Divisional Management Board with escalations to TMB. There were further discussions regarding how this work 'fitted' externally as there are clear links with community provision and the overarching Better Together Programme.

The Divisional General Manager for Diagnostics and Rehabilitation, on behalf of the Chief Operating Officer presented a report regarding the NHS England Assurance process for Emergency Preparedness Resilience. The Trust had self-assessed against the compliance criteria at Substantial, 'the plans and work programme in place do not appropriately address one or more of the core standard themes standards that the organisation is expected to achieve'. The additional work identified is – a need to fully embed Business Continuity Plans, update some procedures and training e.g. Trusts Evacuation Plans and CBRN plans to reflect updated NHSE guidance. The Trust has invested in the role of Emergency Planning & Business Continuity Officer and this was being recruited to. TMB approved the content of the self assessment and noted the actions identified on the action plan.

Emergency Care and Medicine

The division presented an update on the Single Front Door and informed TMB that the second phase would commence w/c 21st September.

The Quality Assurance Team from the Bowel Cancer Screening Programme is scheduled to visit the Nottinghamshire Bowel Cancer Screening Centre on 7th October, although the main focus of the visit will be at Nottingham City hospital, it is expected a small team will visit KMH prior to the main visit to review patient notes for a documentation audit. There are no known outstanding issues. An area of risk identified may be the Endoscopy admin support; the Trust is already in discussion with NUH regarding managing admin processes across both sites to mitigate this risk.

A review of progress against the annual plan resulted in a discussion regarding how the risks identified on the annual plan related to the issue previously discussed.

The division raised the issue of lack of capacity within the Business Support Unit to develop the robust business cases required to drive service improvements forward.

Planned Care and Surgery

On-going issues within outpatients with ASI and incomplete PTL and how this impacted on the Trust's performance against the RTT target are being unpicked. 410 patients have been identified and 67 urgent patients have been booked onto clinics. The full action plan is being led by the Divisional General Manager for Diagnostics and Rehabilitation. There had been problems recently regarding letters to patients on the Syntec system, however this has been resolved and all letters have been re-issued. This incident has been placed on the risk register, a briefing will be provided to the CCG tomorrow, 22nd September and the COO will be consulted regarding how to update CQC.

Assurance route for the outpatient programme confirmed as the risk committee.

Risk identified regarding Theatre upgrades and Theatre 5 had to close due to issues identified, the impact of this will be more weekend working as the work is absorbed into other theatres.

Community Paediatric review starting in October will require support from the Strategic Planning and Commercial Development department and finance colleagues.

Vascular pathway – NUH have appointed a Programme Manager to drive this.

Diagnostics and Rehabilitation

An update on the annual plan was given. EMRAD the new PACs programme was due to be implemented December 2015, this is on target however, it had been identified that £90K of revenue had not been included in reserves.

Capacity was becoming an increasing issue with the need to hire the mobile MRI up to 5 days a week from 3, the impact on this was reporting which was now a challenge and the division were considering outsourcing CT scanner reports.

Recommendations

1. The Board is invited to receive assurance from this report regarding issues discussed and approved by the Trust Management Board

Relevant Strategic Priorities (please mark in bold)	
To consistently deliver a high quality patient experience safely and effectively	To develop extended clinical networks that benefit the patients we serve
To eliminate the variability of access to and outcomes from our acute services	To provide efficient and cost-effective services and deliver better value healthcare
To reduce demand on hospital services and deliver care closer to home	

How has organisational learning been disseminated	Learning identified will be disseminated via the appropriate governance processes
Links to the BAF and Corporate Risk Register	Principal Risks 1 - 5
Details of additional risks associated with this paper (may include CQC Essential Standards, NHSLA, NHS Constitution)	N/A
Links to NHS Constitution	N/A
Financial Implications/Impact	All financial implications are approved via the SFI's
Legal Implications/Impact	N/A
Partnership working & Public Engagement Implications/Impact	N/A

Committees/groups where this item has been presented before	N/A
Monitoring and Review	N/A
Is a QIA required/been completed? If yes provide brief details	N/A

MEETING: TRUST MANAGEMENT BOARD

DATE & TIME: MONDAY 21st SEPTEMBER 2015, 1 – 4PM

VENUE: BOARDROOM LEVEL 1

MEMBERS: Executive Directors, Directors, Divisional Management Teams, Head of PMO, Head of Communications (*statutory powers and/or voting rights*)
(*MUST send deputies when absent but not part of quoracy*)

IN ATTENDANCE: DIRECTORS & SENIOR MANAGERS

AGENDA

	ITEM	ACCOUNTABLE EXEC/LEAD DIRECTOR	ENCLOSURE
1	Apologies: Quoracy Check: The quorum necessary for the transaction of business shall be 4, 2 of whom executive director status, but must include one of the Chief Executive, Deputy chair or a nominated Deputy (Executive status) (in such event, thereby nominated chair)		
2	Declaration of any conflict of interest in relation to any agenda item	All	
3	Minutes and actions of the previous meeting		
3.1	Minutes		Enclosure 3.1
3.2	TMB Action Tracker		Enclosure 3.2
3.3	Board of Directors Action Tracker		Enclosure 3.3
COMMITTEE BUSINESS			
4	Overseas Visitors Policy – For Ratification	Phil Harper	Enclosure 4
5	The Hospitality Policy – For Ratification	Liz Nicholas	Enclosure 5
6	Carter Recommendations	Bob Truswell	Enclosure 6
7	Car Parking - Proposal to increase charges for patients and visitors	Peter Wozencroft	Enclosure 7
8	Car parking policy	Peter Wozencroft	Enclosure 8

9	Strategic Narrative & Service Line Management (including Comms Plan)	Phil Harper	Enclosure 9
10	External Reviews: Diabetic Podiatry	Amanda Robson	Enclosure 10
11	Emergency Preparedness Resilience and Response	Sue Barnett	Enclosure 11
12	Safer Staffing	Victoria Bagshaw	Verbal Update
13	Reports from Divisional Management Boards: <ul style="list-style-type: none"> Progress against Annual Plan Risks to delivery Escalations e.g. Quality/Safety issues		
13.1	EC & M	Amanda Robson, Phil Bolton, Ben Owens	Enclosure 13.1 Enclosure 13.1.1 Enclosure 13.1.2
13.2	PC & S	Dale Travis, Liz Williamson, Richard Hind	Verbal
13.3	D & R	Elaine Torr, Lynn Smart	Enclosure 13.3
13.4	Newark	Tracey Wall	Verbal
14	TMB Committee reports from Chair of Committee: <ul style="list-style-type: none"> Escalations for TMB action 		
14.1	Clinical Quality & Governance Committee	Susan Bowler	Verbal
14.2	Risk Committee	Susan Bowler	Verbal
14.3	OD & Workforce Committee	Graham Briggs	Verbal
14.4	BI & IT	Peter Wozencroft	Verbal
14.5	Business Process Assurance Committee	Paul Robinson	Verbal
14.6	Commercial Development Group	Peter Wozencroft	Verbal
15	Any Other Business		
	Date of next Meeting – Monday 26th October 2015		

TMB attendance 2015/16

Terms of reference indicate members should attend the majority of meetings (ie 7/12)

	KF	AH	SBow	PR	SBa	PW	KR	SC	BOw	RH	SE	ET	YM	LW	PB	DT
Apr	√	√	√	√	x	√	√	x	x	√	x	√	x	√	x	√
May	√	√	√	√	√	x	√	x	x	√	x	√	x	x	x	√
June	√	√	√	√	√	√	√	√	x	√	√	x	√	x	x	√
July	x	√	√	√	√	x	√	√	x	x	√	√	√	x	x	x
Aug	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Sept	√	√	x	x	x	√	N/A	√	x	√	N/A	√	x	x	x	√
Oct																
Nov																