

UN-CONFIRMED MINUTES of the Board of Directors meeting held in Public at 09:00 on
Thursday 5th December 2024, in the Boardroom, King's Mill Hospital

Present:	Graham Ward	Acting Chair	GW
	Steve Banks	Non-Executive Director	SB
	Barbara Brady	Non-Executive Director	BB
	Andrew Rose-Britton	Non-Executive Director	ARB
	Neil McDonald	Non-Executive Director	NM
	Manjeet Gill	Non-Executive Director	MG
	Claire Hinchley	Acting Director of Strategy and Partnerships	CH
	Richard Mills	Chief Financial Officer	RM
	Simon Roe	Acting Medical Director	SR
	Rob Simcox	Director of People	RS
	Rachel Eddie	Chief Operating Officer	RE
	Phil Bolton	Chief Nurse	PB
	Sally Brook Shanahan	Director of Corporate Affairs	SBS
In Attendance:	Kathy Smiley	Matron ACCU and CCOT	KS
	Paula Shore	Director of Midwifery	PS
	Sue Bradshaw	Minutes	
	Jess Baxter	Producer for MS Teams Public Broadcast	
	Rich Brown	Head of Communications	
Observers:	Darren Fernandes	Chief Registrar	
	Ian Holden	Public Governor	
	2 members of the public		
Apologies:	Aly Rashid	Non-Executive Director	AR
	Andy Haynes	Specialist Advisor to the Board	AH
	David Selwyn	Acting Chief Executive	DS

Item No.	Item	Action	Date
24/369	WELCOME		
1 min	<p>The meeting being quorate, GW declared the meeting open at 09:00 and confirmed that the meeting had been convened in accordance with the Trust's Constitution and Standing Orders.</p> <p>The meeting was held in person and was streamed live. This ensured the public were able to access the meeting. The agenda and reports were available on the Trust Website and the public were able to submit questions via the live Q&A function.</p>		
24/370	DECLARATIONS OF INTEREST		
1 min	There were no declarations of interest pertaining to any items on the agenda.		
24/371	APOLOGIES FOR ABSENCE		
1 min	<p>Apologies were received from Aly Rashid, Non-Executive Director, Andy Haynes, Specialist Advisor to the Board, and David Selwyn, Acting Chief Executive.</p> <p>It was noted Phil Bolton was attending the meeting in the capacity of Acting Chief Executive and Paula Shore was attending the meeting in the capacity of Chief Nurse.</p>		
24/372	PATIENT STORY - MARTHA'S RULE, THE FIRST PATIENT TO ACTIVATE MARTHA'S RULE		
13 mins	<p>KS joined the meeting.</p> <p>KS introduced the Patient Story, which highlighted the Trust's work in piloting Martha's Rule.</p> <p>GW felt it is good to see Martha's Rule 'in action'. GW noted two members of staff had used Martha's Rule to escalate concerns and queried how awareness of Martha's Rule can be increased to ensure all staff are aware they can use it. KS advised the Martha's Rule Team attend multiple forums to provide feedback. A report from the first three months of the pilot is currently being produced and this will be fed back to the teams involved.</p> <p>KS left the meeting.</p>		
24/373	MINUTES OF THE PREVIOUS MEETING		
1 min	Following a review of the minutes of the Board of Directors meeting in Public held on 7 th November 2024, the Board of Directors APPROVED the minutes as a true and accurate record.		
24/374	MATTERS ARISING/ACTION LOG		
1 min	The Board of Directors AGREED that actions 24/251.1, 24/316.2, 24/316.4, 24/345.2, 24/345.3, 24/346, 24/347.1 and 24/347.2 were complete and could be removed from the action tracker.		

	NM noted the deadline for three of the actions had been extended and queried what the reason for this was. PB advised in order to complete these actions, reports need to be presented to different sub-committees and, therefore, the date has been changed to fit in with committee work cycles.		
24/375	ACTING CHAIR'S REPORT		
4 mins	GW presented the report, which provided an update regarding some of the most noteworthy events and items over the past month from the Acting Chair's perspective, highlighting Non-Executive Director (NED) recruitment, work of the Trust's volunteers, visit from Mansfield Town Football Club to mark World Prematurity Day, meetings with system partners and Board of Directors Time Out session.		
1 min	The Board of Directors were ASSURED by the report. Council of Governors Highlight Report GW presented the report, highlighting 15 Steps visits and approval of the reappointment of Steve Banks, NED, for a further three years. The Board of Directors were ASSURED by the report.		
24/376	ACTING CHIEF EXECUTIVE'S REPORT		
8 mins	PB presented the report, which provided an update regarding some of the most noteworthy events and items over the past month from the Acting Chief Executive's perspective, highlighting recruitment for a Director of Improvement and Change, operational activity, extended opening hours for the Newark Urgent Treatment Centre (UTC), introduction of Automatic Number Plate Recognition (ANPR) system for car parking, single point-of-contact sexual health service, Community Diagnostic Centre (CDC) engagement event, visit to the Trust by the Regional Chief Midwife, Gaynor Armstrong, and Staff Survey. RS advised the Staff Survey closed on 29 th November 2024. The final figures are awaited but currently the Trust has had just under 4,000 colleagues respond to the survey, which is the highest number of responses ever. The percentage of responses is higher than the 2023 Staff Survey. BB noted the extended opening hours of the UTC and queried if there is the same increase in patient demand as is evident in A&E at King's Mill Hospital. RE advised the increase in the number of walk-ins at the UTC has been greater than the increase in walk-ins at A&E, but it is not clear if this is due to the extended opening hours. Since the change in opening hours at the UTC, there are more people queuing in the morning. Therefore, the shift patterns are going to be reviewed to address this. The Board of Directors were ASSURED by the report.		

24/377	STRATEGIC OBJECTIVE 1 – PROVIDE OUTSTANDING CARE IN THE BEST PLACE AT THE RIGHT TIME		
mins	<p>Maternity Update</p> <p>Safety Champions update</p> <p>PS presented the report, highlighting quality improvement work, Friends and Family Test responses, Care Quality Commission (CQC) Maternity survey, Safety Champions Walkaround, visit to the Trust by the new Regional Chief Midwife, Staff Survey responses and focus on clinical excellence.</p> <p>MG requested a report be presented to a future Board of Directors meeting in relation to inequalities and equity of access issues and the actions the Trust is taking to address these. PS advised there is a lot of work ongoing in relation to this and the tools developed by the Trust's Governance Team provide some useful information. PB advised a report would be prepared for the Perinatal Assurance Committee for onward reporting to the Quality Committee. The Chair of the Quality Committee would then decide how this is reported to the Board of Directors.</p> <p>Action</p> <ul style="list-style-type: none"> Report to be presented to the Perinatal Assurance Committee (and onwards to the Quality Committee) in relation to inequalities and equity of access issues in maternity. <p>BB requested a trend line be added to all the graphs in the report.</p> <p>Action</p> <ul style="list-style-type: none"> Trend line to be added to all graphs in future Safety Champions update reports. <p>BB noted the number of emergency caesarean sections are increasing, as are the number of cases of induced labour, and queried if there is a link. PS advised if labour has to be induced, this increases the likelihood of a caesarean section or assisted delivery being required. With increased activity, this has also led to increased complexity. PS acknowledged the increase in the number caesarean sections and the reasons for this are being investigated.</p> <p>SB referenced the CQC survey and the assurance being sought in relation to follow up by GPs and queried if there was visibility of follow up by community health visitors. PS advised there was nothing in the free text comments about health visiting services, but the Trust works closely with teams, both post-natal and antenatal. There were some feedback comments for GPs which can be passed on via system working groups.</p> <p>SB queried if the standard for the number of community visits is being met. PS advised a minimum of three community midwifery visits is required and this is being met. There is a local area agreement which states the final discharge visit is not completed until the mother has</p>	<p>PB</p> <p>PB</p>	<p>03/04/25</p> <p>06/02/25</p>

	<p>been seen by their health visitor. Visits by the community midwives are aligned with health visitor appointments.</p> <p>NM advised space management is becoming an issue for the maternity team, noting there are opportunities to drive the efficiency of the unit if space management was improved, which requires estates work, which comes at a cost.</p> <p>The Board of Directors were ASSURED by the report.</p> <p>Maternity Perinatal Quality Surveillance</p> <p>PS presented the report, highlighting an improvement in the number of massive obstetric haemorrhages and third and fourth degree tears, high levels of activity and suspension of maternity services.</p> <p>The Board of Directors were ASSURED by the report.</p>		
24/378	STRATEGIC OBJECTIVE 5 – SUSTAINABLE USE OF RESOURCES AND ESTATE		
8 mins	<p>Financial Improvement Performance 2024 / 2025 Update</p> <p>RM presented the report, advising financial efficiency is discussed at each meeting of the Finance Committee. RM highlighted the target, unweighted forecast, weighted forecast, current position, next steps and recurrent / non-recurrent savings.</p> <p>ARB acknowledged there is a drive to make savings, but expressed concern regarding recurrent versus non-recurrent savings. GW advised recurrent savings are now the important driver.</p> <p>RM advised there was an initial discussion at the Executive Team meeting on 27th November 2024 in relation to planning for 2025/2026 and there will be a report presented to the Executive Team on 11th December 2024 to set out the initial draft of the programme for 2025/2026.</p> <p>SB queried if other potential income streams were being considered as part of the 'forward look'. RM advised he would welcome any ideas for other income streams, noting there are contractual and space issues for any retail opportunities.</p> <p>The Board of Directors were ASSURED by the report.</p>		
24/379	STANDING FINANCIAL INSTRUCTIONS (SFIS) AND SCHEME OF DELEGATION		
6 mins	<p>RM presented the report, advising a full review of the Standing Financial Instructions (SFIs) and Scheme of Delegation (SoD) has been undertaken in line with the two-yearly review cycle. The changes made are detailed in the report.</p> <p>ARB confirmed the SFIs and SoD had been presented to the Audit and Assurance Committee, who are content with the changes made.</p>		

	The Board of Directors APPROVED the Standing Financial Instructions (SFIs) and Scheme of Delegation.		
24/380	ASSURANCE FROM SUB-COMMITTEES		
15 mins	<p>Finance Committee</p> <p>GW presented the report, highlighting the Financial Improvement Programme (FIP), Month 7 financial position, capital forecast assurance, Elective Recovery Fund (ERF), financial strategy, cash position and review of Board Assurance Framework (BAF) Principal Risk 4 (PR4) - Insufficient financial resources available to support the delivery of services and PR8 - Failure to deliver sustainable reductions in the Trust's impact on climate change.</p> <p>The Board of Directors were ASSURED by the report.</p> <p>Audit and Assurance Committee</p> <p>ARB presented the report, highlighting SFIs and clarification of the procurement process for Charitable Funds.</p> <p>The Board of Directors were ASSURED by the report.</p> <p>Quality Committee</p> <p>BB presented the report, highlighting an increase in catheter associated urinary tract infections (UTIs), lack of resources to ensure completion of medicines reconciliation, ongoing issues with water safety and positive assurance taken from the presentation and discussion around the mortality update and changes to Hospital Standardised Mortality Ratio (HSMR) methodology.</p> <p>GW felt it would be useful to present an update on HSMR to the Council of Governors.</p> <p>ARB noted the ongoing issues in relation to water safety and queried what additional actions could be taken to address this. PB advised engagement, processes and visibility has improved and mitigations are in place. However, there is a need for a long-term solution, but this is costly and will cause a lot of disruption within the organisation. There is a need to balance the risk.</p> <p>RM advised water safety is regularly discussed at various forums and options are reviewed. GW advised the issues have been raised with the Private Finance Initiative (PFI) provider and Skanska. However, there is also the need for cultural discipline from everyone in the Trust in terms of regularly turning taps on to flush them out.</p> <p>PB advised the Water Safety Group meets monthly and is attended by representatives from Skanska and the Trust. Better processes are in place and some outlets which are no longer used have been removed. A lot of proactive work has been undertaken.</p> <p>The Board of Directors were ASSURED by the report.</p>		

	People Committee SB presented the report, highlighting Staff Survey, pharmacy workforce update and plans to further develop Freedom to Speak Up. The Board of Directors were ASSURED by the report.		
24/381	OUTSTANDING SERVICE – SURGICAL SDEC		
7 mins	A short video was played highlighting the work of Surgical Same Day Emergency Care (SDEC).		
24/382	COMMUNICATIONS TO WIDER ORGANISATION		
3 mins	The Board of Directors AGREED the following items would be disseminated to the wider organisation: <ul style="list-style-type: none"> • Martha's Rule. • Implementation of ANPR system for car parking. • Thanks to staff for their ongoing hard work during times of operational pressure. • Visit to the Trust by the Regional Chief Midwife. • Surgical SDEC. • Extended opening hours of the UTC. • Staff Survey. • Work of the Trust volunteers. • Work to improve the Trust's financial position. • Encourage staff to access flu and Covid vaccinations. • Approval of SFIs and SoD. 		
24/383	ANY OTHER BUSINESS		
1 min	GW expressed thanks to AR for his contribution to the work of the Trust, noting this is his last Board of Directors meeting.		
24/384	DATE AND TIME OF NEXT MEETING		
	It was CONFIRMED the next Board of Directors meeting in Public would be held on 6 th February 2025 in the Boardroom at King's Mill Hospital. There being no further business the Chair declared the meeting closed at 10.30.		
24/385	CHAIR DECLARED THE MEETING CLOSED		
	Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted. Graham Ward Acting Chair		
	Date		

24/386	QUESTIONS FROM MEMBERS OF THE PUBLIC PRESENT		
1 min	<p>GW reminded people observing the meeting that the meeting is a Board of Directors meeting held in Public and is not a public meeting. Therefore, any questions must relate to the discussions which have taken place during the meeting.</p> <p>No questions were raised from members of the public.</p>		
24/387	BOARD OF DIRECTOR'S RESOLUTION		
1 min	<p>EXCLUSION OF MEMBERS OF THE PUBLIC - Resolution to move to a closed session of the meeting.</p> <p>In accordance with Section 1 (2) Public Bodies (Admissions to Meetings) Act 1960, members of the Board are invited to resolve:</p> <p>"That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest."</p> <p>Directors AGREED the Board of Director's Resolution.</p>		