

COUNCIL OF GOVERNORS

Minutes of the Meeting of the
University Hospitals Birmingham NHS Foundation Trust
Council of Governors held on 9 May 2016

Meeting Rooms 1 & 2 - Trust Headquarters

■ indicates text to be redacted from published version

- Present: Rt Hon Jacqui Smith (Chair)
Mr Paul Burgess
Mrs Edith Davies
Dr John Delamere
Mr Alex Evans
Mrs Aprella Fitch
Dr Tom Gallacher
Mrs Sandra Haynes MBE
Dr Elizabeth Hensel
Mr Patrick Moore
Mrs Linda Stuart
Surgeon Vice Admiral Alasdair Walker
Dr Iestyn Williams
- In attendance: Ms Fiona Alexander (Director of Communications)
Mr Kevin Bolger (Director of Strategic Operations)
Mr David Burbridge (Director of Corporate Affairs & Foundation Secretary)
Mr Tim Jones (Executive Director of Delivery)
Mr Andrew McKirgan (Director of Partnerships)
Mr Philip Norman (Chief Nurse)
Dr David Rosser (Executive Medical Director)
Mr Mike Sexton (Chief Financial Officer)
Miss Sarah Snowden (Corporate Affairs & Governor Liaison Manager)

G16/79 Welcome and Apologies for Absence

The Chair welcomed everyone to the meeting.

Apologies for absence were received from Mrs Bernadette Aucott, Mr Paul Darby, Dr John Cadle, Ms Helen England, Ms Margaret Garbett, Rabbi Dr Margaret Jacobi, Mrs Bridget Mitchell, Ms Susan Price and Cllr Valerie Seabright.

Apologies were also received from Dame Julie Moore (Chief Executive Officer), Ms Rachel Cashman (Director of Projects), Ms Catriona McMahon (Non-Executive Director), and Ms Cherry West (Executive Chief Operating Officer).

- G16/80** **Quorum**
The Chair noted that a quorum was present and, accordingly, the meeting could proceed to business.
- G16/81** **Declarations of Interest – for publication**
The Governors' Declarations of Interest was accepted as a true record with the exception of one matter: Dr Iestyn Williams is a Reader, not a Senior Lecturer in Health Policy & Management, University of Birmingham, and he is no longer Chair of the Irish Welfare Forum, Birmingham
- G16/82** **Minutes of the Meeting of the Council of Governors of 16 February 2016**
It was agreed that the minutes of the meeting held on 16 February 2016 were an accurate and true record with one word change in G16/68 paragraph 3 from "regulators" to "providers".
- G16/83** **Matters Arising from the Minutes**
None
- G16/84** **Chair's Report**
The Chair reported that the CEO was absent from the meeting as she was attending a meeting of the Birmingham and Solihull Sustainability and Transformation Programming Board. This group is working to improve services around hospitals in the future and taking their plans to the Chair and leaders of Solihull City Council who can then communicate them out to the wider public. More details of progress will be given at the next meeting.
- The Chair went on to report that the Trust is working with Birmingham City Council to set up the first "Green Travel District" looking at sustainable methods of travel, improvements to rail services, cycle links, footpaths etc. Money has now been allocated by the Council in order that a Director of the District can be appointed who will engage with the community and will help us hopefully with our parking situation.
- The Chair suggested that the Governors take a look at a piece of artwork which was recently installed about half way along the Fourth Floor in the New Hospital. This had been compiled by young people giving their thoughts and feelings on the hospital and how it related to them.
- Resolved: To accept the report.**

G16/85 Patient Care Quality – Quarterly Report to include Infection Control Update

The Council of Governors considered the report presented by the Chief Nurse which covered the period up to the end of Q4.

Infection Prevention and Control performance

As at 31 March 2016 Clostridium Difficile Infection (CDI), a total of 9 cases were reported in March 2016, of which 4 were Trust apportioned.

In total for 2015/16, there were 66 Trust apportioned cases of CDI, which was just above the annual trajectory of no more than 63 Trust apportioned cases. However, microbiology colleagues have been tracking the national CDI trend and for the first time in recent years, this is increasing and at a rate higher than the Trust is currently experiencing. The Trust annual trajectory for 2016/17 remains no more than 63 Trust apportioned cases.

Actions to further improve CDI performance continue with a specific focus on antimicrobial prescribing, choice of antibiotic and duration of use.

With regards to MRSA, there were no Trust reported cases of MRSA in March 2016. In total for 2015/16 and as previously reported, we had 8 Trust apportioned MRSA bacteraemias, against an annual target of 0 avoidable cases. Quarter 1 & 2 being the months of concern.

A Trust wide MRSA reduction plan was put in place and agreed with the Clinical Commissioning Group. The plan has a specific focus on hand hygiene, MRSA screening, decolonisation and care of devices.

New medicines management system

The new system, 'Abloy Cliq' is aimed at:

- Further improving the safety and security of medicines
- Ensuring patients receive their medication in a timely manner
- Releasing more nursing time to care for patients (e.g. eliminates the need for nursing staff to 'search' for the member of staff who has the medicine key. Pilots have shown that, on average, during a 12 hour shift up to 75 minutes was spent 'searching' for the medicine keys).

The roll out of this system is going well and has received positive feedback from staff. Roll out to all Wards will complete by mid-May, following which the roll out to Theatre areas will commence.

Monitoring of the system

An observational medicines round audit tool is currently being developed to compare pre and post installation medication round activity, time taken to access medications and time to administer the medicine to the patient. This observation will take place in a variety of ward settings during 2016/17.

Annual Nursing Conference

The annual nursing conference will be held in the Education Centre on Thursday 12th May 2016 (national nurses' day). This year's conference theme is Dignity and Compassion. There will be a balance of speakers from our Divisions and from visiting speakers. It was agreed that an invitation would be extended to all Governors interested in attending.

Dementia & Learning Disabilities

Various work-streams continue around further improving staff knowledge, awareness and skills in caring for individuals living with dementia or a learning disability and to further embed training and development within our established programmes. The Trust is also signed up to the National Dementia Action Alliance and the new Birmingham Dementia Action Alliance.

Nutrition & Hydration

Focused work continues to further improve nutrition and hydration, especially in the frail and elderly patient group. This includes improved crockery, improved MUST (Malnutrition Universal Screening Tool) training, audits and partnership working with the other 9 Trusts within the Shelford Group re shared learning etc.

Resolved: to receive the report

G16/86

Performance Indicators Report 2015/16, Annual Plan Update

The Executive Director of Delivery reported that NHS Improvements (Monitor) are going to change the reporting framework going forward and more details regarding this will follow at the next meeting.

With regards to actual performance, the Trust is on target for nine of the twelve indicators. Of the three requiring improvement, the worse issue is with the A&E 4 hour wait targets – these have been deteriorating since January and is also a national problem. An action plan has been discussed and agreed with the CCG who have looked closely at the attendances per month and the actions taken to try and

reduce the amount. A 4.9% increase has been assumed for the forthcoming year, however this is already seen as too low a figure and the Trust is unlikely to hit target this year.

The 62 day GP Urgent Referral for Cancer target has now been missed for a number of quarters. This is due to the fact that although internal performance has improved, we are struggling with tertiary referrals.

The Trust's internal plan has improvements in place until February 2017, however as yet these have not been agreed with NHS England or the CCG.

With regards to the national targets monitored locally through CCG Contract the Trust is on target for 13 of the 16. The main issue is with regards to the 28 day cancelled operations guarantee which has a big negative impact on patient experience along with fines being levied against the Trust from the CCG. Performance is affected and determined by ITU demand.

One Governor raised a question about safer staffing at night (currently as low as 82%) – this is seen as a general problem across the Trust with difficulties recruiting staff and rising patient numbers. Bank spends have increased significantly. Specific focus areas have been targeted with open days which have been immensely successful. A recruitment drive is currently underway for Critical Care and a detailed recruitment and staff retention plan is in place for the Trust as a whole. Staffing is one of the Trust's top three risks and it is not helped that we are in a market where it is difficult to recruit and there are insufficient people being trained.

Overall good progress has been made with the objectives against the Annual Plan.

Resolved: to accept this report.

G16/87

Finance and Activity Report – Quarterly Update

The Council of Governors considered the report presented by the Chief Financial Officer. An end of year underlying deficit of £4.6m has been achieved which was about £2m better than the plan agreed with the regulator. These figures are still subject to an external audit and exclude the impact of accounting adjustments linked to changes in the valuation of Trust buildings. The Trust remains in a strong position due to tighter expenditure control, increasing income and the benefit of commissioners being stopped from issuing most fines and penalties.

The New Hospital has had a valuation reduction of £17m due to VAT not being included in re-build figures. The Heritage Building has increased in value by £3m, however there has been a £3m reduction on the costs of the offices in Edgbaston due to the amount being spent on improvements works when the Trust took them over. The Trust's actual financial performance has been better than plan therefore it has not faced central restrictions on the level of capital expenditure, the Trust ended 2015/15 with a cash balance of just short of £60m which will allow autonomy to be maintained.

With regards to national cost improvements, the Trust compares well nationally and is completely transparent, not counting or including things that it's not believed can be delivered.

Resolved: to approve this report.

[The Executive Team left the meeting at this point]

G16/88

Non-Executive Director Appraisals

The Chair reported that appraisals had been carried out for each of the Non-Executive Directors (NEDs) by the Remuneration and Nomination Committee who had acted in accordance with the process agreed by the Council of Governors in 2007. All NEDs have performed satisfactorily against their objectives from last year and have made significant contributions to the work of the Executive team bringing a wide range of experience to the Trust.

Dr Elizabeth Hensel, Public Governor for Hall Green offered to undertake some research in how other Foundation Trusts appraise their NEDs and will feed back to the Council at the next meeting.

Resolved: to accept the recommendations of this report.

[The Chair left the meeting at this point]

G16/89

Chair's Appraisal

The Vice Chair took over the meeting for this item and explained that the same process had been followed for the Chair's appraisal as that of the NEDs. The Remuneration and Nomination Committee believe that the Chair has excellent chairing skills, generates respect and is very approachable both inside and outside the Trust and has also developed a good working relationship with the CEO.

The Committee specifically looked into whether they felt the work undertaken by the Chair at HoEFT had impacted negatively on her role at this Trust, but rather it was believed this experience had enhanced the opportunities for patients at this Trust as there was synergy between the roles. It is felt that the Chair puts a firm focus

on Excellence in Care and meets all the other objectives showing an enthusiasm for the job which comes through in everything she does.

Resolved: to accept the recommendations of this report.

[The Chair re-joined the meeting at this point]

G16/90 **Governors' Feedback**
No feedback received

G16/91 **Any other business**
No other business was raised.

G16/92 **Date of Next Meeting**
Friday 22 July 2016
2.00 p.m. – 4.00 p.m.
(1.30 p.m. – 2.00 p.m. Pre-Meeting)
Meeting Rooms 1 & 2, Trust HQ

Chair.....

Date.....