

**Minutes of the Public Trust Board Meeting held on
Thursday 26th September 2019 at 10.00am
Seminar Room 4, Learning & Research Building, Southmead Hospital**

Present:

Ms M Romaine	Chair	Ms A Young	Chief Executive
Mr K Blake	Non-Executive Director	Ms H Blanchard	Interim Director of Nursing & Quality
Mr J Everitt	Non-Executive Director		
Mr T Gregory	Non-Executive Director	Dr C Burton	Medical Director
Ms J Meekings-Davis	Non-Executive Director	Mr N Darvill	Director of Informatics
Prof J Iredale		Mrs C Phillips	Director of Finance
Mr R Mould	Non-Executive Director	Ms J Marshall	Director of People & Transformation
	Non-Executive Director	Mr S Wood	Director of Estates, Facilities & Capital Planning

In Attendance:

Mr X Bell	Director of Corporate Governance & Trust Secretary	Nikki Jordan**	Palliative Care Nurse
Ms R James	Deputy Chief Operating Officer	Dr Sue Wensley**	Consultant Clinical Educator
Isobel Clements	Corporate Governance Officer	Emma Parslow**	Ward Manager
Simi George*	Clinical Matron	Professor David Wynick***	Joint Director of Research
Liz Perry*	Deputy Director of People	Rebecca Smith***	Deputy Director and Head of Department, Research & Innovation
Pete Bramwell	Head of Communications		
Mr M Pender	Deputy Trust Secretary		

*Attended for minute no.03 only.

**Attended for minute no.10 only.

*** Attended for minute no.12 only.

Observers: No members of staff / public attended.

Apologies:

Ms E Barker Chief Operating Officer

Action

TBC/19/09/1 Welcome

The Chair welcomed everyone to the public meeting of the Board.

TBC/19/09/2 Apologies For Absence and Welcome

The Board noted that apologies for absence had been received from Evelyn Barker Chief Operating Officer with Rosanna James attending as deputy.

TBC/19/09/3 Patient Story / Staff Story

The Board received a presentation from Simi George, Clinical Matron for Trauma & Orthopaedics who shared her experiences of joining and working in the organisation; her career journey including challenges she faced and how she overcame them herself and with the support she received; her career aspirations and volunteering as a cultural ambassador for North Bristol NHS Trust (NBT).

Simi described growing up in Kerala, India where she completed her A-levels and progressed to New Delhi to study at the All India Institute of Medical Sciences (AIIMS) after being selected as one of 50 people out of 60,000 applicants.

After working at AIIMS for a year, Simi progressed to work at the Ministry of Health, Bahrain by again defying the odds and being selected as one of 40 nurses out of 300 applicants. After two years, Simi was successfully selected to join NBT in May 2000 as part of NBT's overseas recruitment initiative from Bahrain.

Simi outlined her career progression from a Band 5 nurse to a Band 8a Clinical Matron and emphasised that NBT was a second family to her.

Simi's top achievements included achieving her Masters in Advanced Nursing Practice in 2010 alongside working as a full-time Band 7 Ward Sister job and having a 1-year old child and husband completing GP training.

Simi also reported the setbacks in her career such as unsuccessful interviews. Simi explained these were difficult and disappointing but motivated her to improve and access NBT support services such as mentors, interview coaching and skills development. Mutual support from the mentor who helped Simi settle in the UK was invaluable alongside formal staff mentoring.

Simi highlighted the additional layers of complexity regarding multiple translations involved in interviews for those with English not as a first language.

Looking to the future, Simi stated she was applying for the Elizabeth Garrett Anderson NHS leadership programme and was an NBT Cultural Ambassador. Her aim was to ensure all staff were aware of and able to access the opportunities NBT provided such as leadership programmes and interview skills.

In respect of why Simi chose to stay at NBT for 19 years, she outlined the support from colleagues, good career progression and encouraging managerial support.

During the ensuing discussion the following comments were made:

- It was confirmed NBT was currently committed to an overseas nurse recruitment programme with Yeovil hospital to recruit Indian and Philippine nurses from Dubai;
- International nurses require £13000 investment per nurse but with support, motivation and drive, they bring much greater value to NBT;
- It was noted international nurses have made an amazing contribution to NBT;
- NBT must continue to support staff from BAME backgrounds;
- NBT has more to do regarding talent-spotting and this should be included in the People strategy.

The Board thanked Simi for sharing her story.

No declarations were made at the beginning of the meeting.

[Post-meeting note: Kelvin Blake declared an interest during discussion under item 16 as he was a Non-Executive director of BrisDoc.]

TBC/19/09/5 Minutes of the Public Trust Board Meeting Held on 25 July 2019.

RESOLVED that the minutes of the public meeting held on 25 July 2019 be approved as a true and correct record.

TBC/18/09/6 Action Log and Matters Arising from the Previous Meeting

The updates provided in the action log were considered and approved. It was noted that actions relating to stepping up, theatre doors and DOLS were updated at the previous meeting and could be closed.

Regarding the action: 'review of exec and non-exec walk around'; it was agreed a formal proposal would be brought to December Trust Board. Xavier Bell advised that a task and finish group had been created to consider options.

RESOLVED that the updates to the Action Log be received and approved.

TBC/19/09/7 Chair's Business

The Chair provided an update on the following:

- It was reported that Rob Mould and Kelvin Blake had agreed to be interim Non-Executive Directors at Weston hospital until the formal merger of WAHT and UHB. The Board thanked them for this and noted that this highlighted NBT as an active system partner;
- Michele outlined the NHS /BNSSG diversity programme that she is championing. This programme aims to ensure diversity development was encompassed into Boards and non-executive membership. NHS partners and Sirona were reported to be committed alongside NBT. The next step was to refine the formal proposal and work with respective HR departments and Trust secretaries to translate training ideas into reality. It was noted this was another positive example of NBT providing leadership. Kelvin Blake noted Bristol is a multi-cultural city which NBT would benefit from if this programme is optimised;
- Michele Romaine reported she attended three meetings in London including NHS Providers quarterly meeting. Key notes from this meeting reported as: NHS providers are planning for a no-deal Brexit and there are challenges in the NHS system around the long-term plan;
- Neil Darvill and Michele Romaine attended a digital session at NHS Providers where they voiced NBT's ideas regarding digital intervention. The Board approved of NHS Providers' objective to

have a forum that supports Boards digitally;

- Michele reported attending a meeting with the Chair of the CQC at his invitation. This meeting highlighted the importance of NBT's focus on CQC work and the shift in the CQC's lens to focus on safety and risk. CQC were particularly focused on the airline industry and their approach to airline safety and risk. The Board suggested that it may be suitable to strengthen links NBT had with Bristol airport. The Board encouraged working with the CQC to further understand this perspective.

RESOLVED that the Chair's verbal update be noted.

TBC/19/09/8 Chief Executive's Report

The Board considered the Chief Executive's report, which provided a summary of local and national issues impacting on the Trust. The following points were highlighted:

- The Board extended their congratulations to two members of staff achieving significant national roles: Tim Draycott – Vice President, Royal College of Obstetricians & Gynaecologists and Fiona Donald – Vice President of Royal College of Anaesthetists;
- Catherine Phillips updated on the Brexit task and finish group that had been created to ensure Trust specific risks are noted and mitigated. It was noted NHS England are preparing for a no-deal Brexit on the 30th October.

RESOLVED that the Chief Executive's report be noted.

TBC/19/09/9 CQC Inspection Report

The Board received a presentation from Helen Blanchard, Interim Director of Nursing and Quality, in respect of the CQC Inspection Report.

The Trust Board paid tribute to all staff and volunteers who worked at NBT including the executive team. It was reported the CQC 'good' overall and 'outstanding' for caring was a significant achievement which provided a platform for NBT to build from. It was noted NBT was to focus attention on confirming aspirations and how to move forward.

Helen Blanchard confirmed NBT would now focus on clarifying what 'outstanding' was for NBT and prepare so that the Trust was ready for the next inspection. This would require honest conversations regarding what actions and skills were needed to achieve outstanding.

Helen Blanchard progressed through a presentation focusing on the CQC highlights and issues for each CQC rating category: Safety, Effective, Caring, Responsive and Well-led. Key points of the presentation are outlined below:

The Non-Executive Directors (NEDs) congratulated Helen regarding the co-ordination of the CQC process and standard of the CQC report. The NEDs were assured that relevant areas within the Trust had support and oversight from senior leaders and the Board over the last 12

months and that services were improved.

RESOLVED:

- **It was noted the Trust was to continue to strive for improvement in all areas by using the CQC report as a platform to understand where improvements are required;**
- **The Trust will submit plan for must-do and should-do actions on 1 November 2019;**
- **The CQC report was noted;**
- **That Quality and Risk Management Committee (QRMC) will retain oversight of the CQC action plan.**

TBC/19/09/10 End of Life Care Annual Report

A presentation was received from Dr Sue Wensley, Consultant Clinical Educator, Nikki Jordan, Palliative Care Nurse and Emma Parslow, Ward Manager in respect of the End of Life Care Annual Report. It was noted this was on behalf of Claire Kendel, Palliative Care Consultant who was away on leave but whose contribution to the service was acknowledged in the CQC report. The presentation brought the Annual Report up to date and linked it to national standards. It was noted the engagement and commitment from staff in NBT was evident around the wards.

Key transformational achievements were outlined including:

- Use of 'purple butterfly' which highlighted to staff the focus of care had shifted from active medical treatment to symptomatic and support care. This allowed improved quality of life and patient-centred care;
- Assurance that NBT are providing personalised care planning had been received from VOICES survey, patient and family feedback and thank you cards;
- 4000 staff completed a form of End of Life training including E-learning for deceased which stemmed from patient feedback.

It was noted future projects included the roll out of ReSPECT (launching 10 October 2019) and embedding of a digital service to improve communication with GPs.

During the ensuing discussion, the following points were made:

- The team were thanked by the Board for their presentation especially regarding the focus on patient feedback;
- After a question from the Board regarding the support staff receive, it was confirmed formal monthly supervisions were completed and informal mutual staff support and reflective practice was encouraged. It was also noted support was received from fellow staff and positive feedback from family, friends and patients;
- It was noted 'purple butterfly' means different things across different NHS organisations;
- It was noted the MDT approach was outstanding. In addition, the focus on self-betterment and learning was commendable;
- It was noted the End of Life team aimed to involve the learning

disability team with staff support to ensure better care for these patients.

RESOLVED that the End of Life Annual Care Report and future actions be noted

TBC/19/09/11 Quality & Risk Management Committee Report

John Iredale, Non-Executive Chair of the Quality and Risk Management Committee presented the report and drew out the key highlights.

The Committee was tasked with seeking assurance on processes for managing patient harm for patients on diagnostic and RTT 2-week wait pathways at its next meeting.

XB

RESOLVED that the QRMC upward report be received and noted and that the QRMC forward plan be updated to include assurance on patient harm management.

TBC/19/09/12 Annual Research & Innovation Review

The Board received the Annual Research & Innovation update. This provided an update on the previous year and clarified the focus for the current year in order to deliver the Year Two priorities.

The Board received a presentation from Rebecca Smith Deputy Director and Head of Department, Research & Innovation and David Wynick, Joint Director of Research which provided further details. Key achievements included:

- Numbers of new studies within NBT have increased dramatically with a 50% increase in research grants across 3 years. It was reported NBT was in the top 10 in England for number of studies opened (112);
- There had been a 93% increase in non-doctor staff undertaking research at NBT;
- It was noted NBT combined with University Hospitals Bristol NHS Foundation Trust (UHB) were in the top 10 National Trusts for recruiting for research, with NBT alone in the Top 20.

Priorities for Year 3 included:

- Focus on research around NBT priority areas e.g. acute patient flow;
- Increasing staff engagement in research, which was also a corporate objective and recognised as a key CQC component for providing best care;
- Increasing patient involvement in research through better communications.

The following points were made in the discussion leading from the presentation:

- It was clarified the Government have protected existing Horizon 2020 research funding;

- Due to Brexit, it is likely NBT will not hold lead partner role in big European studies but this does not rule out involvement;
- It was suggested that due to Brexit, it is likely research funding will reduce. Rebecca clarified data would need to be collected to confirm this. The Board noted NBT plus UHB sat 7th behind Oxford, Cambridge, Manchester and the big three in London Trusts for research funding income;
- When asked, the research team stated barriers to research include the lack of financial headroom and competing research priorities across the system.

TBC/19/09/13 Medical Revalidation & Appraisal Report

The Board considered the Medical Revalidation & Appraisal Report for 2018/19. This report provided assurance to the Board that well established processes are in place to quality-assure the appraisal process and to identify doctors who have missed their appraisals. It was reported that there were no unapproved or incomplete appraisals.

RESOLVED that the content of the report be confirmed in order for the statement of compliance to be submitted to NHS England

TBC/19/09/14 People and Digital Committee Report

The Board received the report from the meeting of the People and Digital Committee held on 21 August 2019.

RESOLVED that the People and Digital Committee assurance report be received and noted.

TBC/19/09/15 Month 4 Corporate Objectives Update

The Board received a report which provided an update on progress against all of the Trust's annual objectives identified for 2019/20 as at month 4.

It was noted that some sections of the report still needed to be complete, including those sections relating to the governance oversight for various corporate objectives. It was agreed that this would be improved for the next update.

RESOLVED that the update on progress against the Trust's annual objectives be noted.

TBC/19/09/16 Integrated Performance Report – August 2019

Andrea Young, Chief Executive Officer, introduced the Integrated Performance Report for August 2019 and provided a summary of the headline issues:

- There was an improvement in Urgent Care performance. The Board acknowledged there is a mismatch in capacity and demand but were pleased to note the improved situation of urgent care and improvement in standing in BNSSG;
- Elective care was a mixed picture across various specialities. The Board were assured about actions being taken to achieve

- performance against diagnostic targets.
- The 62 day standard is planned to recover in quarter 1 of 2020/21 but Improvement of a number of other standards was dependant on action from the CCG on demand management. Details of these were discussed at QRMC and Finance and Performance Committee (FPC);
- Complaints metrics were improved with overall reports of pressure injuries reduced;
- NBT staffing levels were reported as steadily rising which is positive against the backdrop of national staffing shortages across the health and social care sector.

During the ensuing discussion the following points were made:

- The Board acknowledged the Urgent Care improvement and further requested the Trust consider how NBT can support the Healthcare system as a whole to move from reactive to proactive urgent care;
- Concern was raised over the financial resource requirement and reputational consequences of not meeting the 4-hour target and highlighted a need to reduce the national increase in demand;
- Concern was raised over the regulator's use of the 4-hour target in light of the demand increase. It was clarified the regulator has recognised NBT's position and drive to tackle this;
- The Board noted system responsiveness was needed to tackle this long-term issue;
- It was conveyed time and effort had been put in to expand out of hours services such as Primary Care Networks. The NEDs highlighted NBT should incorporate this when planning for next financial year and different Models of Care. For example, how NBT specialists could support primary care i.e. with delivery of clinics to prevent ED attendances;
- Work BrisDoc had carried out to develop clinical triage service in 111 was discussed. Kelvin Blake declared an interest during this discussion as he was a Non-Executive director of BrisDoc;
- It was noted the system architecture was being formed with improvements between primary care, local authority and secondary care having been strengthened through the BNSSG healthcare system;
- Concern was voiced about a potential downward curve regarding cancer targets. Rosanna James, Deputy Chief Operating Officer, confirmed the 62 day performance would get worse before it gets better as the backlog is cleared. The main driver for the two-week-wait was skin which super clinics should help to recover;
- The NEDs raised a concern regarding the high Delayed Transfers of Care's (DTCOC's) leading to winter. It was clarified issues surrounding this stem from a lack of council provision, split between assessment times and discharge plan issues;
- It was noted Andrea attended the system-wide Urgent Care Oversight Board which included all partners and regulator and would raise the Boards' concerns regarding DTCOC levels.

Helen Blanchard reported that the Trust had forecasted that it would

achieve 80% of its CQUIN targets but delivery of this was currently off-track. It was agreed this would be looked at in more detail at the next Board in October.

RESOLVED that:

- **The IPR be noted;**
- **Board concerns be acknowledged and fed into Urgent Care Oversight Board discussions;**
- **The Board approved the ‘Board Compliance Statements at August 2019’ noting that improvement trajectories are under review.**

TBC/19/09/17 Finance and Performance Committee Assurance Report

The Board received the report from the meeting of the Finance and Performance Committee held on 22 August 2019. John Everitt, Non-Executive Director and Chair of the Committee highlighted particular points of interest to the Board.

RESOLVED that the Finance & Performance Committee assurance report be received and noted.

TBC/19/09/18 Sustainable Development Management Plan (2019/20)

The Board considered the Sustainable Development Management Plan (2019/20). It was noted the paper reflected on last year and looked forward to the current year. It had been produced with engagement from 66 staff teams. Simon Wood mentioned the special input of Matt Champion to this report.

It was noted the STP/BNSSG Climate Change Adaption Plan had been written by NBT.

RESOLVED that the Sustainable Development Management Plan (2019/20) be approved and authorised sharing with other partners.

TBC/19/09/19 Health & Safety Annual Report 2019/20

The Board received the Health & Safety Annual Report 2019/20. It was noted violence and aggression to staff, particularly by patients, was still an ongoing issue. Actions to mitigate this included increased enhanced staff training on conflict resolution. It was agreed the Trust wanted to minimise patient restraint by security.

The Board were assured this issue is reviewed regularly at the People & Digital Committee and will continue to come to Board annually.

John Everitt clarified it was the responsibility of the Trust Board to ensure proper policies and procedures were in place and collective responsibility to ensure Governance routes were in place to manage this issue. Xavier Bell confirmed that all Health & Safety policies were updated ahead of the recent CQC inspection.

The Board sought assurance that learning and expertise in the health and safety team around ‘Slips, trips and falls’ is fed into the patient safety team.

SW

RESOLVED that the Health & Safety Annual Report 2019/20 and

following actions be received and noted.

TBC/19/09/20 Any Other Business

John Iredale asked that it be noted that he was chair of QRMC rather than Tim Gregory as stated in the QRMC upward report.

Mark Pender, Deputy Trust Secretary was thanked for all his hard work and support to the Board and members, and the Board wished him well in his future role at UHB.

TBC/19/09/21 Questions from the Public in Relation to Agenda Items

No questions were received from the public.

TBC/19/09/22 Date of Next Meeting

The next public meeting of the Board was scheduled to take place on 28th November 2019 at 10.00am, Southmead Hospital.

The meeting concluded at 12.50pm