

Audit Committee

Key summary points from the meeting held on 16th April 2015:

Internal Audit

- Noted the Head of Internal Audit Opinion. This gives moderate assurance (a positive opinion) and describes an improvement on last year in terms of overall control. The Opinion states that the Board Assurance Framework provides Substantial Assurance and is used effectively by the organisation as a tool to manage risk rather than merely logging issues.
- Discussed the Internal Audit Forward Plan (attached), and was pleased to note that Internal Audit will share progress and findings along with any learning as the plan progresses, especially in relation to FTT.
- Discussed the numbers of patients who are deemed 'Fit-to-transfer' (FTT) and expressed concern about the significant impact this is having on patient safety, costs, and performance. The planned Internal Audit will investigate the link between FTT and patient harm with a focus on patients with dementia.
- Noted the Cash and Treasury Management Audit. The Committee discussed patient property and recognised that the loss of patient property is of continued concern. The Trust will work closely with the Local Counter Fraud Specialist to raise awareness of the revised Patient Property Policy with staff. The updated Policy makes it clear that failure to follow the policy could result in disciplinary action.
- Noted the limited assurance report on IT controls, and noted that although last year this core audit had received Substantial assurance, the scope had changed significantly. The Committee agreed that the high priority recommendations in relation to the Computer Rooms need to be actioned promptly to ensure that adequate cooling controls are implemented at both sites to protect assets and services. It was noted that urgent discussions are being held with the interim Estates Director to progress the issues raised through the capital planning process.
- The Committee was disappointed that SLAs are not signed by our 'customers' of the Payroll Shared Service in a timely way, and that this is both a historic and continuing issue and asked that measures be put in place to resolve this problem.

Counter Fraud

- Received a report from the LCFS on Consultant job planning and was pleased to note the progress with job plans, but recognised that the actual planning process needs more rigour with more involvement of the management teams to ensure plans reflected reality and operational needs. The recommendations will be added to the recommendation tracking system and the Workforce Committee will be asked to oversee implementation. The Medical Director will be invited to the Audit Committee to update on progress in six months' time.
- Noted the progress with annual declarations of interest with three-quarters of eligible staff having made a declaration. 124 members of staff have yet to return their declaration despite numerous reminders. Letters will be sent to Care Group managers, and the Committee asked that any individuals still outstanding are reported at Trust Board in June.
- Discussed the draft Annual Governance Statement and emphasised that liquidity was still a significant issue, stressing that there must be an ongoing solution to the underlying deficit caused in part by the duplication of services on two sites and the continuing FTT pressures.

Chair: Robin Hooper, 16th April 2015

3. 2015/16 Timing

The table below sets out the individual core and advisory internal audit reviews proposed for 2015/16 and levels of prior year assurance. Proposed timings are shown below. Agreed timing will be discussed with audit sponsors and named audit contacts and included in the terms of reference for each audit.

	Audit Area	2014/15 Assurance	2015/16 Timing				Audit Sponsor
			Q1	Q2	Q3	Q4	
Governance statement	Assurance Framework	Substantial	Fieldwork	Reporting			Julia Clarke
	Care Quality Commission (CQC)	N/A		Fieldwork	Reporting		Sarah Bloomfield
Core internal audit	Cash management	Substantial		Fieldwork	Reporting		Neil Nisbet
	Income and debtors	Substantial		Fieldwork	Reporting		Neil Nisbet
	Payments and creditors	Substantial		Fieldwork	Reporting		Neil Nisbet
	Budgetary Control	Moderate		Fieldwork	Reporting		Neil Nisbet
	Payroll	TBC		Fieldwork	Reporting		Neil Nisbet
	IT Controls	TBC			Fieldwork	Reporting	Neil Nisbet
Performance reviews	Governance: Future Fit	n/a	Fieldwork	Reporting			Neil Nisbet
	Fit to Transfer	n/a	Scoping	Fieldwork	Reporting		Debbie Kadum
Contract management	Planning, control and Audit Committee attendance	n/a					

Business Development and Engagement Committee

Key Summary Points from the Meeting held on Tuesday 14th April 2015

The Committee:

1. Received a presentation from Assistant COO in Unscheduled Care on a number of developments planned in Medicine. A list of actions for progression of cardiology service in particular was discussed and the committee requested more detail to include proposed timescales for service developments (including non primary PCI).
2. Discussed a number of opportunities in cardiology diagnostics including repatriation of activity. The challenge around accessing referral data and market share analysis was noted.
3. Noted the value of the new Horizon Scanning Report and members asked that it become a standing agenda item within Care Groups Executive / Management Meetings.
4. Noted a number of concerns around the current web site quality and capability relative to other Trusts. This is felt key to improving marketing opportunities and influencing patient choice.
5. Received information on the top 10 profit and loss making HRGs within each Centre. Whilst this analysis will be discussed in more detail as part of the specialty deep dive reviews and therefore may be modified, the Committee felt circulation to Care Groups management teams at this stage with an expectation that it would be discussed at their Care Group Boards would still be useful. The routine use of this data as part of the assessment framework for any future business development opportunities and individual business cases was the necessary way forward.
6. Noted the need to collate any details of latest innovation bids from the Trust and potential future opportunities for external funding. Details of European Funding opportunities was specifically identified by radiology and was to be circulated for information.

Chair: D Vogler, Director of Business & Enterprise

Workforce Committee

Key summary points from the meeting held on 10th April 2015

The committee continues to focus on three areas to ensure appropriate assurance and strategic developments.

1. **Workforce Performance**

The Committee discussed the importance of achieving sustainable improvement in performance, as they measure the fundamentals of employment experience. In particular statutory training, this is essential training for all staff and the Committee is keen to see improvement across the organisation. The committee will remain focused on this area.

2. **Strategy - Embedding our Values**

The Committee received an update regarding the organisations journey to be a values driven organisation. This included a review of progress to date; values based recruitment, developing behaviors and sign up to the values. This year's staff survey demonstrated that the values are known by 80% of staff, the focus moving forward needs to be ensuring they are lived. The Committee discussed the importance of ensuring the values are real and authentic.

3. **Strategy – Employment Experience**

The Committee received Health and Wellbeing results from last years Staff Survey. The committee reviewed the results against staff engagement scores and discussed the insight the results provide to employment experience. The presentation supported committee members to review findings across the organisation with insight into specific areas. The committee is keen to see improvement in this year's survey.

Victoria Maher
10th April 2015

Quality & Safety Committee

Summary from meeting 23rd April 2015:

Long waits for admission from Emergency Department

The committee considered the individual reviews of the care of all 19 patients who waited more than 12 hours for a hospital bed to become available. These reviews were properly conducted after the episode of care was complete and the outcome known. None of these patients suffered identifiable clinical harm as a consequence of the wait, clinical assessment had generally been timely and treatment started whilst waiting for the bed. We recognise that the experience of these patients was unsatisfactory and know that there are many patients who face delays of rather shorter duration whose experience is similarly compromised. These reviews demonstrate that the clinical care of these patients, in very difficult circumstances, has been carefully managed.

Benefits realisation in the Women & Children's Unit

Our site visit at PRH included the Neonatal Intensive Care Unit and the Post-Natal Ward. The physical environments are obviously vastly improved. Particularly impressive to us, was the strong sense of clinical cohesion and patient focus in the way the services are organised. Staff have settled well into the new configuration and are exploiting the facilities in the new building to best advantage of patients. Parental opinion is excellent with high participation in the family and friends feedback. This is an excellent qualitative assessment of realisation of the benefits of the investment.

Simon Walford
Chairman
23rd April 2015

HOSPITAL EXECUTIVE COMMITTEE

Key summary points from the meeting held on Tuesday 28th April 2015:

The Committee **NOTED** and discussed both operational and financial performance of the Trust, for Month 12 and the year-end position; including detail on the challenges faced, successes in implementing changes and improvements, and recovery plans and trajectories for challenged areas.

Detail was also given on the national initiative around cultural change called 'Breaking the Cycle' where all possible factors that may contribute to optimised performance, flow, and patient throughout are put in place; including suggestions from staff of what they believe would make a difference.

Suggestions are being gathered from across the whole health economy of various measures that can be put in place or done differently, and the Trust has agreed to pilot 'Breaking the Cycle' the week 1st – 8th June 2015.

The Workforce Director delivered a presentation providing an overview of the results from the 2014 Staff Survey covering those areas where the Trust has improved and excelled, and those areas that remain problematic and require ongoing focus. Detail was also given on progress surrounding the embedding of the Trust Values amongst the workforce.

A progress update was given on the CQC action plan that came out of the review and visit conducted last year and was shared amongst the Committee for discussion as a reminder that the actions remain very much a point of focus, and will be reviewed and assessed against during the follow up CQC visit when that takes place.

The Committee **NOTED** the annual assurance statement of compliance for the Trust against the core requirements of the Emergency Preparedness, Resilience and Response (EPRR) core standards issued by NHS England.

The assurance statement and update included both a self-assessment against the 'new' core standards issued in 2014, as well as a progress update on completion of the former core standards.

The annual statement declares that in terms of every area having up to date and robust business continuity plans we are not fully compliant, however there are plans already underway to address this.

Despite that however, in terms of the Trust being an emergency responder we are rated 'Green' as compliant.

The Committee received an annual update on operational changes that have been made to the 'live' Major Incident Plan during the last 12 months.

The Committee **NOTED** the draft operating plan as submitted to the TDA in April, outlining the Trust's high level strategic objectives.

A presentation was delivered that provided an overview of the 'Deep Dive' initiatives now underway to fully explore various specialties encompassing in-depth cross analysis for that specialty, based on the 4 legged stool; including quality, workforce, safety and finance, as well as cost and profitability all based on enhanced levels of intelligence & information, drilled-down scrutiny, and focused discussion to enable a number of changes to be agreed, some radical, where those areas of that specialty can be improved. Specialty-based sessions have now commenced and will culminate in presentations of findings and plans to the Trust Board.

Peter Herring, Chair
Tuesday 28th April 2015

Finance Committee

Key summary points from the meeting held on 28th April 2015:

Finance report

Provisional outturn 2014/15 - is stated as a deficit of £12.13m, marginally below the figure forecast in recent months.

Within the outturn, points evident in the final month include:

- Pay costs for the month are slightly down but within this the volume and cost of agency staff [especially medical] were the highest in the year, confirming the need for continued control emphasis,
- CIP total achieved per latest forecasts,
- Non-pay costs higher in month reflecting certain year end adjustments and costs,
- Cash on course at £1m, significant creditor payments undertaken and net liabilities significantly reduced as reflecting the cash injection completed in February,
- Capital spend totals achieved, including justifiable creditor charges for equipment related work

In terms of the overall outturn the Committee's interpretation of this is that, whilst it is a significant deficit, it is a deficit that has been predicted and controlled at this level through the second half of the financial year and this "stability" compares favourably with many other Trusts. In this context the Committee acknowledges the significant efforts across the organisation to deliver this outcome.

Budget 2015/16

Within the report an updated risk rating for 2015/16 CIP schemes sees the level of red rated CIP schemes reduced by over £1m. There remains a substantial sum still rated as red. The Committee stress the need for early measures to be completed to assure on the delivery of these CIP benefits as essential to the new financial year plan.

Historic Due Diligence (HDD) Actions

Three issues remain red rated – related to medium term financial planning and CIP programmes, CIP assurance and the effectiveness of pay controls – and the Committee see these as good practice requirements consistent to the revised governance assurance framework. It is perhaps more suited that these be developed as part of such governance rather than simply responding to HDD process.

The Committee also reviewed the latest **summary of losses and special payments.**

Name of Chair: Dennis Jones

Date report prepared: 29th April 2015