

Audit Committee

Key summary points from the meeting held on 5th June 2014

The Committee:

- Approved the Annual Report and Annual Accounts and recommended them to the Trust Board for adoption. It was noted that the Trust had received a small surplus of £0.065m after the receipt of £4m non-recurrent support from the TDA and that the Trust had experienced liquidity issues during the year which required a temporary working capital loan of £7.5m to be utilised, which was repaid in March 2014. The Committee discussed the liquidity and historical issues facing the Trust in 2014/15 resulting in a budgeted deficit of £8.2m, predicated on delivery of £9m CIP and supported the CEO and Finance Director in their submission for a permanent non-repayable loan to address the position, in line with other organisations.
- Received the External Audit ISA260 Audit Memorandum relating to KPMG's audit of the 2013-14 Financial Statements. It was noted that the Auditors would write to the Secretary of State regarding the breach of the five year break-even duty, but that they intended to issue an unqualified audit opinion on the accounts, with a qualified conclusion paragraph due to the Trust's financial resilience
- The Committee discussed pay controls and the need to ensure these were robust and appropriate. It was noted that the Finance Committee had been tasked to provide assurance to the Board, through Internal Audit, that all appropriate measures were in place.
- The Committee also discussed the Trust's recognised financial consequences of duplication of clinical services and welcomed the early Board-level discussions with partners in the Local Health Economy to minimise these

Chair: Robin Hooper

6th June 2014

Quality and Safety Committee

Key summary points from the meeting held on 19th June 2014:

Committee received the annual PLACE (Patient Led Assessment of the Care Environment) and Cleanliness Report, which the Trust is required to submit annually. Some specific areas for improvement have been identified and revised cleaning arrangements for the Emergency Department at RSH have been made. Collaborative arrangements between Facilities Managers and Care Group Lead Nurses have also been introduced which involve routine joint site visits and performance improvement. Two significant areas for improvement identified from PLACE are a need to invest in making hospital environments more user friendly for people with dementia and to explore ways to improve the delivery of food to the wards at RSH. Generally, the report confirmed across-the board improvement compared to last year.

The Annual Report about the Trust's success in reducing Pressure Ulcers was considered a thorough and objective review of progress with clear objectives for further improvement set for this year. The investment in the Tissue Viability Nurses is realising benefits to patients.

It was of concern to Committee that the CQUIN (Commissioning for Quality and Innovation) programme for the current year has still not been agreed with local commissioners. Several million pounds of income remains uncertain until constructive dialogue with the CCGs is concluded so as to find a mutually agreeable approach.

Dr Simon Walford
Chairman
20th June 2014

Workforce Committee

Key summary points from the meeting held on 13th June 2014

1. The committee discussed the workforce assurance report at length. Areas of focus included the employee relations agenda recognising the need to progress key employment policies such as on call against the potential impact these changes in terms of employment experience. A further area of discussion was the implementation of centralised recruitment and weekly pay for bank staff.
2. The committee approved the organisations approach to implementing the friends and family test for staff. The test asks two key questions:

How likely are you to recommend Shrewsbury and Telford Hospital to friends and family if they needed care or treatment?

How likely are you to recommend Shrewsbury and Telford Hospital to friends and family as a place to work?

The test will be completed three times a year to compliment the staff survey providing a regular temperature check for employment experience.

The committee would recommend using the test result as a performance indicator for people.

3. The committee received an update on actions following the 2013 Staff Survey results. Each care group have shared the results with their teams. They have identified areas to focus on following feedback from staff. The committee is holding a special employment experience meeting in September during which each care group will present their responses to the 2013 survey.
4. The committee held a discussion on stakeholder engagement which will be used to inform the engagement strategy.

Name of Chair Victoria Maher

Date report prepared 13th June 2014

Finance Committee

Key summary points from the meeting held on 24th June 2014

1. Update on Booking and Scheduling

The Committee received an update in respect of improvements to “Booking and Scheduling” and it was noted that there was minimal improvement in the position with regard to “cashing up” of clinics. The Patient Access Centre is working with Centres at an individual patient level where necessary to establish the issues with a view to reducing the backlog.

The introduction of Netcall, a system of text message or telephone reminder of patient appointments is in the process of being rolled out. Initial findings in Centres where this is already in operation, indicate that over 70% of patients have consented to being contacted in this way.

There had been an increase in the short notice requests for additional clinics and significant number of amendments to existing clinics. This was due to a number of reasons including annual leave, thus reinforcing the need for annual leave to be managed across the year.

The Committee reflected on the progress made in booking and scheduling and at the same time acknowledged that there were further improvements to be made.

2. Update on Future Configuration of Hospital Services

The Committee received an update on the project. The project is progressing well and being managed within the agreed programme and budget. It was noted that the main building has been handed over from Balfour Beatty. The refurbishment of wards 12/14 is ongoing and remains on course for completion on 10th September. A programme of staff training and familiarisation is underway. An open weekend is planned for 6th and 7th September 2014 in advance of the official opening on 29th September 2014.

3. Update on the implementation of the new car parking arrangements

Chris Needham provided an update on the implementation of the new car parking arrangements at RSH. The Committee noted that the date for delivery of the change machines is yet to be identified. Until this time an arrangement has been put in place between the cashiers and League of Friends.

The majority of hardware has been installed at PRH, although the scheme will not be launched at PRH until such time as the software is working properly at RSH. It is expected that this will be resolved in the next few weeks.

4. Finance Director Report Month 02

The Committee reviewed the position as also reported to the Board, noting that the Trust is required to improve its financial deficit of £8.2 million, where possible.

The Committee focussed its discussion on pay expenditure, how this had risen to £17.8 million in May and the reasons for this. The Trust had tightened up their control mechanisms to manage this and nursing teams are actively seeking to work to the nursing templates. However the effect of sickness and annual leave and use of agency staff to cover this was impacting on their ability to do this. May had seen an increase in medical staff expenditure and controls needed to be put in place to manage this.

Analysis of the financial impact of activity levels in the first two months of the year suggest a case mix issue appears to exist. Investigation of this is taking place to determine the reasons for this.

The Trust delivered £1.9 million CIP savings against a plan of £2.4 million. It is anticipated that the Trust will fully achieve the CIP by the year end.

With regard to the cash position, the Trust's liabilities are increasing and it is projected that temporary borrowing will need to be secured throughout the year.

It was noted that the Trust has commissioned Deloitte to undertake a review of pay expenditure controls.

5. Update on Internal Audit Recommendations

Internal audit recommendations were received and reviewed. Updates on outstanding actions were provided and revised deadlines noted.

6. Losses and Special Payments

The latest reports on expenditure items over £100k and on Losses/Special Payments were received and noted.

Name of Chair: Harmesh Darbhanga

Date report prepared: 24th June 2014

HOSPITAL EXECUTIVE COMMITTEE

Key summary points from the meeting held on Tuesday 24th June 2014.

The Committee NOTED and discussed operational performance for Month 2 and year to date; exploring causes and trends behind the challenged standards and discussing in detail the planned rectification steps.

The Committee NOTED the finance position for Month 2 and year to date. Discussion took place around anomalies within contracted case mix where delivered and paid activity appears to not be matching budgeted & planned activity. Finance teams conducting depth of coding analysis to further explore causalities behind the variance.

The Committee also discussed Pay spend that remains in excess of the required budgeted position. Various areas were explored in detail including enhanced measures being put in place around nurse staffing and the management of vacancies, sickness absence, and use of Bank and Agency, and the need for similar levels of focus on now overhauling medical staffing.

The Committee NOTED a progress update on the Trust's compliance against an action checklist as part of the Emergency Preparedness, Resilience and Response plan (EPRR). Significant improvements made in the last the year against the 100 new core standards of which the Trust is 'green' for 81 of them, and 'amber' for 31.

The Committee NOTED the Trust's Annual Security Report for 2013/14 and the progress to date with significant reductions in levels of violence and aggression towards staff.

The Workforce Director delivered a presentation on absence management providing an overview of ascertained causalities, problem areas, and planned next steps in improving staff health & wellbeing, effective leadership and improving overall absence statistics.

The Committee received a progress update on Future Fit and the agreed system principles, along with the planned next steps in feasibility studies and driving through the vision.

The Committee received a presentation outlining the draft 5 year strategic plan from 2014 to 2019; its core objectives, SWOT analysis and detail of interdependencies where one thing happening is reliant on achieving something else. The Committee were asked to peruse the slides and provide any comment or feedback.

The Committee NOTED the results of the Risk Management Healthcheck and reviewed and APPROVED the draft Risk Management Assessment and action plan.

Peter Herring, Chair
Tuesday 24th June 2014