

The Shrewsbury & Telford Hospital NHS Trust
Board of Directors 'meeting in PUBLIC

Thursday 6 May 2021 via MS Teams (and live streamed to a public audience).

Minutes

NAME	TITLE	ITEM
MEMBERS (voting)		
Dr C McMahon	Chair	
Mrs T Boughey	Non-Executive Director	
Mr A Bristlin	Non-Executive Director	
Mr D Brown	Non-Executive Director	
Prof. C Deadman	Non-Executive Director	
Mrs H Flavell	Director of Nursing	
Dr J Jones	Acting Medical Director	
Dr D Lee	Non-Executive Director	Left - 13:58 Re-joined 15:37
Mr N Lee	Chief Operating Officer	
Prof. T Purt	Non-Executive Director	
Ms H Troalen	Director of Finance	
ATTENDEES (non-voting)		
Ms R Boyode	Acting Workforce Director	
Mrs J Clarke	Director of Corporate Services	
Ms A Milanec	Director of Governance & Communications	
Mr C Preston	Interim Director of Strategy & Planning	
Mr R Steyn	Co-Medical Director	
Ms C West	Improvement Director	
Ms P Neil	Interim Board Secretary	Minutes
APOLOGIES		
Mrs L Barnett	Chief Executive Officer	
Dr A Rose	Medical Director	

Mr J Drury	Interim Director of Finance	
GUESTS		
Dr M Hon	Clinical Director for Obstetrics, Women and Children's Division	Item 115/21
Mrs J McDonnell	Divisional Director of Operations, Women and Children's Division	Item 115/21
Mr N Nisbet	Director of Transformation	Item 101/21
Ms J Payne	Head of Midwifery, Women and Children's Division	Item 115/21
Mr A Tapp	Medical Director, Hospital Transformation Programme	Item 101/21
Ms H Turner	Freedom to Speak Up Guardian	Item 115/21
Mr M Underwood	Medical Director, Women and Children's Division	Item 115/21
Mr M Wright	Programme Director: Maternity Assurance	

No.	ITEM	ACTION
GENERAL BUSINESS		
092/21	<p>Welcome and apologies.</p> <p>The Chair welcomed all those present and observing members of the public attending the meeting via the live stream. Apologies were noted.</p> <p>The Chair thanked all members of the public who attended the previous Board of Directors' meeting in public on 6 May 2021 and provided feedback. It was brought to the attention of the public that the attending members of the Board would be using the digital chat box to indicate when they wished to ask a question.</p>	
093/21	<p>Patient Story</p> <p>The Board of Directors received the report from the Director of Nursing and the accompanying video screened live at the meeting and published on the Trust's website.</p>	
094/21	<p>Quorum</p> <p>The Chair declared the meeting quorate.</p>	
095/21	<p>Declarations of conflicts of Interest</p> <p>No conflicts of interest were declared that were not already declared on the register. The Chair reminded members of the need to</p>	

	highlight any interests which may arise during the meeting.	
096/21	<p>Minutes of the previous meeting.</p> <p>The minutes of the meeting held on 8 April 2021 were approved by the Board of Directors as an accurate record.</p>	
097/21	<p>Matters Arising</p> <p>No matters were raised which were not already covered in the action log or agenda.</p>	
098/21	<p>Action Log</p> <p>2020/52 - Waiting List Initiatives [WLI] Review of Policy – The Board of Directors' approved a request for an extension of this item to June 2021.</p>	
STRATEGIC MATTERS		
099/21	<p>Report from the Chair</p> <p>The Board of Directors received the verbal report from the Chair, Dr McMahon.</p> <p>Dr McMahon confirmed that she had been appointed Chair of the Shrewsbury, Telford and Wrekin Integrated Care System (ICS) People's Committee from the 1 April 2021.</p> <p>Dr McMahon impressed upon those attending and observing the meeting that questions from the public afforded an excellent opportunity for the Trust to engage closely with the public and that therefore, questions about the previous Board of Directors' meetings from the public were welcomed. However, as a result of the increased volume of questions being received, work to improve the process for managing the Trust's response was being undertaken.</p> <p>The Board of Directors noted the verbal report.</p>	
100/21	<p>Report from the Chief Executive</p> <p>The Board of Directors received the verbal report from the Acting Chief Executive, Mr Preston.</p> <p>Mr Preston reported that, now the impact of Covid-19 for patients was being contained, the Trust's focus would be on restoring clinical capacity across all specialties as quickly as possible with the support of the Trust's strategic partners, UHB and Sherwood Forest. However, attendance at A&E had returned to pre-pandemic levels.</p>	

	<p>Refocusing the Trust's attention on the large change programmes such as the HTP and staff wellbeing, were a priority.</p> <p>The Board of Directors noted the verbal report</p>	
101/21	<p>Hospital Transformation Programme Report</p> <p><i>Neil Nisbet and Andrew Tapp joined the meeting.</i></p> <p>The Board of Directors received the report from the Interim Director of Strategy and Planning, Mr Preston who introduced Mr Nisbet and Mr Tapp.</p> <p>Mr Preston summarised key highlights from the report along with re-establishment of the programmes' timelines and goals. Mr Preston reported that the System Recovery Plan was critically dependent on the development of the Strategic Outline Case for HTP and confirmed that a bi-monthly report would be submitted to the Board of Directors outlining programme progress.</p> <p>Mr Tapp provided background to the change in the model of care developed by the Future Fit Board for delivery by the Hospital Transformation Program, providing a system wide approach to the delivery of high quality NHS care.</p> <p>The model chosen had one Emergency Hospital co-located with all the specialties required by patients attending the Emergency Department and supported by a correctly staffed, and sized, ITU together with an emergency hospital with adequate bed numbers.</p> <p>The approach was consistent with the development of Same Day Emergency Care and community delivered admission avoidance schemes etc. Both hospitals would have Urgent Treatment Centres and the centre on the PRH site would be enhanced to ensure that patients who did not need admission to hospital, could be seen locally. There would be one Planned Care Hospital, resolving the systemic risk of unplanned and planned care pathways becoming mixed with a separation of patient flows.</p> <p>Mr Tapp suggested that an effect of the current model of care had been recruitment failure causing a subsequent reliance on agency staff. Resourcing both hospitals with the right number of highly skilled staff to provide the wide range of patient services had become challenging.</p> <p>Prof. Deadman suggested that the positive benefits of the plan for patients should be promoted to stakeholders highlighting the potential for a centre of excellence and curtailing service leakage out of the county. Mr Tapp agreed that the fear of loss could be greater than gain.</p>	ACTION

	<p>Dr McMahon sought assurance that the new HTP would include regard for learnings from Covid-19, single rooms to ensure patient dignity and respect, recognition of the local environmental strategies, and the proposed digital agenda. Mr Nisbet confirmed that in order to progress through the national application process (SOC & Business Case etc.) these questions would need to be addressed in the HTP Plan and design solution. PA Consulting have been advising on the digital agenda.</p> <p>Mr Preston reported that the difference between the approved funding of £312m and the revised budget of £533m was 43% (£162m) which could be attributed to an inflationary increase on the original price. No inflationary increase had been factored into the original cost of the project (£312m) because the Royal Institute of Chartered Surveyors (RICS) indices used at the time was based on capital spending of zero due to a lack of construction schemes.</p> <p>The Board of Directors noted the report.</p> <p><i>Mr Nisbet and Mr Tapp left the meeting</i></p>	
Operational Reporting		
102/21	<p>Integrated Performance Report [M12]</p> <p>The Board of Directors received the report from the Interim Director of Strategy and Planning, Mr Preston, and were asked to take assurance from the report.</p> <p>Mr Preston drew the Board’s attention to the executive summary stating that the areas covered by the report were continually being improved and refined, progressively improving the benchmarking process against other stakeholders and trusts with a focus on forward actions.</p> <p>Quality</p> <p>Mrs Flavell confirmed that the Trust had not met the annual reduction in methicillin-susceptible <i>Staphylococcus aureus</i> (MSSA) in the financial year 2020/21 with four cases above the target.</p> <p>The Trust had two Methicillin-Resistant <i>Staphylococcus aureus</i> (MSRA) in 2021 with the most recent in March 2021.</p> <p>The Trust had seen a reduction in falls, with a focus on training and a review of each fall within 24 hours.</p> <p>Covid-19 had impacted the Trust’s use of same sex accommodation during 2020/21. Mitigations, with the reduction in Covid-19 patients, were now being put in place.</p>	

The CNST position statement was due to be submitted in mid-July 2021 following a discussion at the Board of Directors' Seminar in June 2021.

Mrs Flavell confirmed, in response to a question from Mr Preston, that a deep dive into the recent rise in the number of pressure ulcers was currently underway.

Operational

Mr Lee confirmed that for March 2021, Covid-19 levels had reduced significantly, along with a reduction in patient numbers in Critical Care and a reduction in the mutual aid staffing with partners.

Maintaining infection control standards and the management and retention of pathways (red - Covid-19, Amber - non-elective, and Green - elective and Cancer) had been critical. Significant backlogs remained and prioritisation was being clinically lead with focus on the highest priority patients.

Activity in A&E had increased in March 2021 and improvement work on patient flow had being undertaken. The Emergency Department continued to focus heavily on quality metrics. The Trust was benchmarking itself against other organisations.

Workforce

Ms Boyode wished those Trust staff members whose families were in India well and acknowledged the enormous contribution they were making to the Trust during the pandemic.

Ms Boyode highlighted from the report, safety culture, health and wellbeing, quality of care and staff morale as the key areas of focus. Staff need to believe they can deliver quality care to all patients. The Trust's focus was currently on the skill set required to deliver the right care, including support from military personnel, retirees, volunteers, and temporary agency staff to support this work.

Quality of care emerged as an important issue in the recent staff survey. The Trust remained below the target for mandatory training (90%) which is currently at 85%. All executives were being encouraged to ensure all staff were given the time to complete training notwithstanding any competing challenges from annual leave, sickness demands and any impact from the supernumerary status of new staff.

Mr Brown endorsed the healthy upward trend in Whole Time Equivalent (WTE) staff. Ms Boyode confirmed that a report would be coming to a future Board of Directors' meeting on forecasting the reduction of agency staff as a result of an improvement in sickness absence, recruitment and retention.

ACTION

	<p>International nurse recruitment would be subject to the outcome of any Covid-19 issues emerging in India.</p> <p>Finance</p> <p>Ms Troalen reported that the draft month 12 position showing a surplus of £4.2m for the YE 2020/21 would be subject to the external audit process.</p> <p>A significant shift in the value of the estate, which was undertaken every 5 years and included in the accounts for 2020/21, had reflected positively on the I&E position which would be stripped out once the performance position was included. This adjustment for 2020/21 would result in the Trust reporting a deficit of £3.8m. A provision of £6m for carrying forward staff annual leave for YE 2021/22 and beyond had been included. The capital position for YE 2020/21 was £43m.</p> <p>External Financing Limit (EFL) is the amount of cash the Trust was expecting to hold at the end of the year. Whilst the Trust was holding more cash than expected due to Covid-19, it was not an outlier when benchmarked against other Trusts.</p> <p>Mr Bristlin mentioned that Mr Drury, Mrs Clarke and the Estates Team, were instrumental in making sure the capital expenditure for YE 2020/21 was committed.</p> <p>Transformation</p> <p>Mr Preston reported net performance transformation levels for were similar to April 2021. The Trust's emphasis was now on recovery and finalising ambitions for YE 2021/22.</p> <p>The Board of Directors discussed the report</p>	
103/21	<p>Public Participation Report</p> <p>The Board of Directors received the report from the Director of Corporate Services, Mrs Clarke and were asked to take assurance from the report.</p> <p>Mrs Clarke reported that the Department of Community Engagement Volunteers and the Trust's Charity had been merged to form Public Participation run by Hannah Roy.</p> <p>A Social Inclusion Facilitator had been appointed by the Trust to manage community engagement work being undertaken with hard to reach groups, and a number of health lectures had been successfully held.</p> <p>Work was underway to restore the 500 Trust volunteers recently paused during Covid-19 following guidance from NHS England and</p>	

	<p>it was noted that the Trust now had 88 young volunteers providing 352 hours / 10 WTE of ward support to staff and patients - meeting and greeting, supporting discharge, deliveries to patients on wards.</p> <p>Income and donations in kind into the Trust's Charity had been maintained notwithstanding Covid-19. The stage two bid of £222.7k for 9 organisations across Shrewsbury, Telford and Wrekin and the stage 3 bid of £143k for improvements to the outdoor environment from NHS Charities Together had both been successful.</p> <p>The Board of Directors took assurance from the report.</p>	
104/21	<p>Estates & MES Quarterly Report</p> <p>The Board of Directors received the report from the Director of Corporate Services, Mrs Clarke, and were asked to note the report.</p> <p>Mrs Clarke reported on the highlights from the newly formatted report.</p> <p>Mr Brown commented on the percentage of high level reactive maintenance jobs for 2020/21 (due to backlog), the relationship to the aged estates that was being managed, and the role that this information would play in discussions regarding the investment for the HTP. Mr Preston confirmed that this work is being incorporated into the development of the SOC. It was noted that the Trust managed circa 10,000 planned and reactive maintenance jobs in the last three months.</p> <p>Mr Bristlin praised the MES Team.</p> <p>The Board of Directors noted the report.</p>	
Assurance Framework		
105/21	<p>The Ockenden Report – Action Plan</p> <p><i>Mr Underwood, Dr Hon, Ms McDonnell joined the meeting.</i></p> <p>The Board of Directors received the report from the Director of Nursing, and were asked to take assurance from the report.</p> <p>Mr Underwood, in response to a question about the rate of C Sections and inductions of labour undertaken at the Trust, confirmed that the Trust's C Section rates were in line with a national increase of 3-4% across the UK and were probably a reflection of patient choice. Dr Hon suggested that, whilst the induction rate was in line with a national trend, it may also be a data quality problem - confusion between the use of the terms 'induction' and 'augmentation'.</p>	

	<p>Mrs Flavell highlighted key issues from the report including the update of actions in the Ockenden Report Action for April 2021. She confirmed that a Maternity Transformation Assurance Committee, chaired by her, had been convened for oversight of the delivery and evidencing of Ockenden Report actions. As at April 2021, 15 actions had progressed from 'not yet delivered' to 'delivered but not yet evidenced'. 45 actions were on track and 4 were off track. Three of the four off-track actions related to actions that required input / actions to be implemented by the region / system as a whole.</p> <p>In response to a question from Prof. Deadman, Ms Troalen confirmed that the Trust was working with the system to ensure there the Trust would not suffer non-delivery of the required actions due to lack of central funding. However, the Trust would also need to demonstrate an ability to deliver an appropriate balance of efficiencies, including the prioritisation of quality, safety, and investment.</p> <p>Mr Wright, in response to a question from Mr Bristlin, confirmed that implementation of Ockenden Report actions was progressing at pace. Dr Hon confirmed that the timeframe for delivery of the Ockenden Report Action Plan was realistic and Mr Wright confirmed that that the Board of Directors would be advised if progress or delivery of any of the actions, was seriously inhibited.</p> <p>Dr Hon, in response to a question from Mr Preston, confirmed that whilst work was being undertaken to ensure the Trust appropriately engaged with the community, it would take some time before evidence of that embedded relationship could be provided. Mrs Clarke extended an invitation for Dr Hon to attend one of the regular community engagement meetings held.</p> <p>The Board of Directors took assurance from the report.</p>	
106/21	<p>Board Assurance Framework</p> <p>The Board of Directors received the report from the Director of Governance and Communications and were asked to take assurance from the report.</p> <p>Ms Milanec reported on the work being undertaken to update the document for 2021/22 and sought approval to close the close the year end with Quarter 4 2020/21 BAF as at 31 March 2021 as recommended by the ARAC; approval of the new risk descriptors (1-9) for the BAF YE 2021/22 as agreed at the Board of Directors' Seminar, including allowance for recent developments; and approval of the draft BAF risk descriptors (10-11) for the BAF 1021/22 not previously seen by ARAC and the Board of Directors' Seminar.</p> <p>The Board of Directors approved the first two elements of the proposal. However, with regard to the draft descriptors 10 - 11 for</p>	

	the BAF YE 2021/22, it was agreed that these would be further discussed at a future Board Seminar.	ACTION
107/21	<p>Risk Management Report</p> <p>The Board of Directors received the report from the Director of Governance and Communications and were asked to take assurance from the report.</p> <p>Ms Milanec confirmed that all risks at the Trust with a residual risk value of 15 and above (the net risk remaining after mitigations had been factored in) would be submitted to the Board of Directors' meeting quarterly together with the BAF. Focus over the next few months would be on reviewing the older risks and mitigations. Consideration would be given to convening an Operational Risk Management Committee responsible for oversight of operational risks.</p> <p>Dr McMahan suggested that the Risk Management Report submitted to future Board of Directors' meeting include deteriorating risks regardless of their rating.</p> <p>Ms Milanec confirmed that as at 31 March 2021 the Trust had 460 risks logged onto the register including closed risks.</p> <p>Dr McMahan suggested that thought be given to how the Trust might develop a risk management culture. Ms Milanec and Ms Boyode agreed that a collaborative approach would be worthwhile.</p> <p>Mr Bristlin suggested that an assurance pathway for risk management should be identified to ensure a robust audit trail to the Board of Directors.</p> <p>The Board took assurance from the report.</p>	ACTION
Regulatory & Statutory Reporting		
108/21	<p>Report from the Responsible Officer</p> <p>The Board of Directors received the report from the Acting Medical Director.</p> <p>Dr Jones reminded the Board of Directors that the Responsible Officer's (RO) role was statutory and responsible for monitoring the performance of doctors by undertaking 5 year re-validations together with annual appraisals.</p> <p>Dr Jones summarised the key components of the report including the appraisal process; the outcome from Covid-19 in the Trust; the rescheduling of the revalidation process agreed to by the GMC for 2020/21; and management of the missed appraisals and the fit to practice process.</p>	

	<p>Dr Jones, in response to a question from Mr Preston, impressed upon the Board of Directors' the need to communicate clear performance measures and expectations to clinicians about work being undertaken and appraised, together with GMC demands.</p> <p>Dr Jones confirmed that the next submission to the GMC was due in September 2021.</p> <p>The Board of Directors took assurance from the report.</p>	
109/21	<p>Learning From Deaths Report</p> <p>The Board of Directors received the report from the Acting Medical Director.</p> <p>Dr Jones highlighted key aspects of the report, in particular the data sets for mortality benchmarked across organisations.</p> <p>The Trust's mortality currently sat at <100 although had higher during the Covid-19 outbreaks. This increase in mortality (coding on death certificates) during Covid-19 was being investigated. As a result of Covid-19, all mortalities at the Trust would initially be investigated internally by a medical examiner who was independent of the patient's care, and who had the authority to refer cases to the Coroner.</p> <p>Dr Jones confirmed that from May 2021, all Covid-19 related mortalities will be deemed an SI. A peak in SIs was anticipated nationally after May 2021.</p> <p>Dr McMahon invited Dr Jones to consider including a category for learning disability mortalities in the report.</p> <p>The Board of Directors took assurance from the report.</p>	
110/21	<p>Freedom To Speak Up Guardian's Report</p> <p><i>Ms Turner joined the meeting.</i></p> <p>The Board of Directors received the report from the Freedom To Speak Up Guardian (FTSUG), Ms Turner.</p> <p>Ms Turner confirmed there had been a 200% increase in issues reported in 2020/21 against a national increase of 34%. The increase suggested the emergence of a positive and confident response by staff within the Trust, but that it was too early to be sure, and the situation would be closely monitored.</p> <p>Ms Turner highlighted key aspects of the Quarter 4 report and End of Year position, stating that nurses, in line with the national average, were consistently the group who spoke up the most with a focus during 2020 on safe staffing numbers. Junior Doctors, deemed the</p>	

	<p>hardest group to reach nationally, were also speaking up more, and a significant rise in Midwives speaking up in Quarter 4, had been noted.</p> <p>Dr McMahon suggested that the increase in reporting could be due to a general increase in unhappiness, as distinct from an increase in confidence to speak up and asked the FTSPG what they were hearing to suggest it was the latter and not the former. Ms Turner reported there had been a number of positive signals including receipt of a good deal of positive feedback by the FTSU team, and soft intelligence on the ground. Mr Lee suggested, by way of an example to support an increase in incident reporting overall, that it be viewed as positive in order to encourage reporting as part of an open and honest culture.</p> <p>Mrs Boughey asked what more the Board of Directors' could do to support the FTSU Guardian. Ms Turner confirmed that a Business Case for additional staff and a data base had been submitted to finance for approval and the outcome was pending.</p> <p>The Board of Directors took assurance from the report.</p> <p><i>Ms Turner left the meeting.</i></p>	
Board Governance		
111/21	<p>Standing Financial Instructions Annual Review</p> <p>The Board of Directors received the report from the Director of Finance, Ms Troalen.</p> <p>Ms Troalen summarised the SFI annual review, emphasizing changes following the previous review, and the work that was required to improve the SFI process.</p> <p>In response to a question from Mr Preston, Ms Troalen suggested that mention in the document of the current financial position with the system was being considered in future iterations. Ms Troalen confirmed that a revision would be undertaken in 6 months with an extensive review in 12 months.</p> <p>The Board of Directors approved the revisions to the SFIs.</p>	ACTION
112/21	<p>Quality & Safety Assurance Committee Report</p> <p>The Board of Directors received the report from the Committee Chair, Dr Lee.</p> <p>Dr Lee highlighted the Trust's dependency on IT systems to deliver assurance required, with particular reference to Badgernet and the new A&E system.</p>	

	The Board of Directors took assurance from the report.	
113/21	<p>Finance & Performance Assurance Committee Report</p> <p>The Board of Directors received the report from Mr Brown on behalf of the Committee Chair, Prof. Deadman.</p> <p>Mr Brown highlighted a reduction in sickness levels and staff turnover rates; delivery of the key capital schemes on time and within budget; and appointment to the Trust of the Authorised Competent Person responsible for overseeing a range of regulatory appointments.</p> <p>The Board of Directors took assurance from the report</p>	
114/21	<p>Audit & Risk Assurance Committee Report</p> <p>The Board of Directors received the report from the Committee Chair, Prof. Purt.</p> <p>Prof. Purt suggested a need to consider a review of the waiver process in light of 46 waivers (£7m) requested recently.</p> <p>Ms Troalen suggested that whilst a number of the tender waivers were due to the speed with which the vaccination programme had been implemented, an investigation was currently underway with procurement.</p> <p>The Board of Directors took assurance from the report.</p>	
115/21	<p>Ockenden Report Assurance Committee Report</p> <p>The Board of Directors received the report from the Committee Chair, Dr McMahon.</p> <p>Dr McMahon confirmed that the second multi-stakeholder ORAC meeting had been held on 22 April 2021. It was noted that it had been live streamed to the public, attended by the Trust's alliance partners, and on this occasion, had been chaired by Jane Garvey one of two co-chairs.</p> <p>Three items were covered at the meeting IEA Theme 1 (enhancing safety), LAFL Theme 2 (maternal deaths) & 4 neonatal services) and common themes were anticipated including audit, Badgernet etc. The dates for future meetings in public were confirmed.</p> <p>The Board of Directors took assurance from the report.</p> <p><i>Mr Underwood, Dr Hon, Mr Wright, and Ms McDonnell left the meeting.</i></p>	

116/21	<p>Any other Business</p> <p>No further business was raised.</p>	
117/21	<p>Date of next Board of Directors' meeting in public:</p> <p>13:00 on Thursday 10 June 2021.</p> <p>Via MS Teams</p>	
Stakeholder engagement		
118/21	<p>Response to Questions From the Public</p> <p>The Chair thanked the public for the questions sent and advised that the Trust had provided one response to those questions received on one particular topic under multiple names. All questions and answers had been published on the Trust's website.</p> <p>The Chair reminded the public that any questions arising directly from the papers presented to a Board of Directors' meeting, should be submitted to by 17:00 on the second Friday following the meeting.</p> <p>Responses would be provided on the website as soon as possible thereafter, with some individual questions read out at a future Board of Directors' meeting, where the question may inform a discussion of a particular agenda item at that meeting.</p> <p>Questions which did not relate to items raised at the previous Board of Directors' meeting would be considered through the Trust' public engagement process, including complaints, and responded to accordingly. The Trust will naturally be bound by Data Protection legislation when responding to all questions from the public.</p>	
MEETING CLOSED		