

**Minutes of the meeting of Trust Board on
29th March 2017**

Present

Baroness Tessa Blackstone	Chairman
Dr Peter Steer	Chief Executive
Mr David Lomas	Non-Executive Director
Mr Akhter Mateen	Non-Executive Director
Ms Mary MacLeod	Non-Executive Director
Mr James Hatchley	Non-Executive Director
Professor Stephen Smith	Non-Executive Director
Ms Juliette Greenwood	Chief Nurse
Ms Nicola Grinstead	Deputy Chief Executive
Dr David Hicks	Interim Medical Director
Mr Ali Mohammed	Director of Human Resources and OD
Ms Loretta Seamer	Chief Finance Officer

In attendance

Ms Cymbeline Moore*	Director of Communications
Mr Matthew Tulley	Director of Development
Dr Anna Ferrant	Company Secretary
Ms Victoria Goddard	Trust Board Administrator (minutes)
Mrs Herdip Sidhu-Bevan*	Assistant Chief Nurse – Patient Experience and Quality
Miss Emma James*	Patient Involvement and Experience Officer
Dr John Hartley*	Director of Infection Prevention and Control
Mr Simon Hawrey-Woore*	Members' Council (observer)
7 public and staff observers	

**Denotes a person who was present for part of the meeting*

*** Denotes a person who was present by telephone*

182	Apologies for absence
182.1	Apologies for absence were received from Professor Rosalind Smyth, Non-Executive Director.
183	Declarations of interest
183.1	There were no declarations of interest.
184	Minutes of the meeting on 1st February 2017
184.1	The minutes of the previous meeting were approved .
185	Matters Arising/ Action Checklist
185.1	Minutes 59.6, 59.7 and 59.8: It was noted that the work on the education plan and international education had been subsumed into the work that was taking place on the strategy and was being reported to the Board as part of normal business.
185.2	Action: Minute 156.3 – It was agreed that discussion outside the meeting would

	determine which committee would review issues with transport which had been the subject of PALS contacts.
186	Chief Executive Report
186.1	<p>Dr Peter Steer, Chief Executive gave an update on the following matters:</p> <ul style="list-style-type: none"> • Positive engagement had taken place with NHS England on Congenital Heart Disease. • A positive meeting had taken place between Jim Mackey, Chief Executive of NHS Improvement and the GOSH Executive Team.
187	Patient Story
187.1	The Board received a patient story by video from a parent who had experienced GOSH throughout her fourteen year old son's lifetime.
187.2	<p>The parent gave the following recommendations:</p> <ul style="list-style-type: none"> • A welcome pack to be provided for parents of inpatients including information such as directions to the laundry and the kitchen areas; • Sending a parking slip out with relevant appointment letters as it was difficult to manage a complex child or young person whilst having to leave the car to go to main reception; • Whole hospital accessibility in new buildings including railings on the wall for people with visual impairments, visual aids and the use of pictorial exchange; • The use of tactile timetables on which a family could use their own visual labels.
187.3	Ms Mary MacLeod, Non-Executive Director welcomed the patient story and queried the way in which transition would be planned for a complex patient. Ms Juliette Greenwood, Chief Nurse said that transition planning would take place on an individual basis and would involve discussion with commissioners and the relevant adult hospital.
187.4	Action: Ms Greenwood said that a welcome pack had been introduced since the family had first visited the Trust and agreed to look into the matter of issuing timed parking slips. It was agreed that updates on the recommendations would be considered at the Quality and Safety Assurance Committee.
188	Update from the Audit Committee in January 2017
188.1	The Board noted the written update provided and noted that a verbal update had been provided at the January 2017 meeting.
189	Update from the Finance & Investment Committee in January 2017
189.1	Mr David Lomas, Chair of the Finance and Investment Committee said that the committee had noted that the Trust was moving towards meeting its control total. Activity had been reviewed in the context of the contract and it had been confirmed that GOSH was meeting its contracted activity.

190	Members' Council Update – January 2017
190.1	Dr Anna Ferrant, Company Secretary presented the report and said that the Chairman recruitment process continued positively.
191	Integrated Quality Report – 28th February 2017
191.1	Dr David Hicks, Medical Director presented the report and said that updates had been made as requested by the Quality and Safety Assurance Committee. He said that additional data had been added to correlate quality information with patient experience and a theme analysis had been provided.
191.2	The Board discussed a Never Event which occurred in June 2016 the action plan for which was not yet complete. Mr James Hatchley, Non-Executive Director emphasised the importance of ensuring that actions were timely and lessons learnt were disseminated as quickly as possible. Dr Hicks said that there had been a national patient safety alert on the same issue and the Trust was completing the action plan as part of the overall workstream within the required timetable. He confirmed that the learning from the incident had been communicated.
191.3	Action: Mr Hatchley asked for assurance that there was not a systemic issue behind the respiratory arrests outside ICU. Dr Hicks confirmed that all incidents had been reviewed and no common theme had been found. It was agreed that the coversheet would include a summary of the issues that had potential to be of concern which were included throughout the paper.
191.4	Ms Mary MacLeod, Non-Executive Director confirmed that she would provide her comments and queries in advance of the next meeting of the Quality and Safety Assurance Committee.
191.5	Mr Akhter Mateen, Non-Executive Director highlighted feedback from the Friends and Family tests which was that all staff had not introduced themselves to the patient and family. He queried why this was not standard behaviour for all staff. Ms Cymbeline Moore, Director of Communications said that the Trust had implemented SHOW which was a local version of the 'Hello my name is' campaign. Dr Peter Steer, Chief Executive said that he attended a large number of induction meetings for new staff and discussed this issue and the importance of all staff introducing themselves.
192	Integrated Performance Report (28th February 2017)
192.1	<u>Performance Scorecard</u>
192.2	Ms Nicola Grinstead, Deputy Chief Executive said that the report presented February data and highlighted that the Trust had returned to RTT reporting. Considerable work had taken place around RTT and achievement against the target had been higher than anticipated.
192.3	Action: Mr Akhter Mateen, Non-Executive Director said that an equal number of indicators had remained red over the past three months as had remained green. He drew attention to the bed occupancy metric which showed a downward trend but no target was identified in the paper. Ms Grinstead said that the data was drawn from the midnight bed census and the paper at the next meeting would

	provide a key of the meaning of the data. It was agreed that the report at the next meeting would give a target of 85% - 92%.
192.4	The Trust Board discussed theatre utilisation metrics and noted that the standard NHS target was 77%. Work was taking place on efficiency, particularly for theatres which were devolved to their own management. Ms Grinstead said that a key barrier to improved utilisation was the availability of ICU beds. Agreement had now been reached with commissioners to increase the number of beds in ICU and additional theatres were planned as part of the new Premier Inn Clinical Building, however it was important to ensure that existing theatres were being efficiently utilised before this additional investment was made.
192.5	Action: It was agreed that a report on theatre utilisation would be provided at the next meeting.
192.6	Action: It was agreed that the actual number of outpatient appointment cancellations would be provided at the next meeting.
192.7	Mr Hatchley highlighted that there had been 83 patients who had not been admitted to PICU and NICU due to lack of beds. Ms Grinstead emphasised that patients were not going without appropriate care within London. She said that only one patient had been transferred out of London. She confirmed that this data had been shared with commissioners.
192.8	Action: It was confirmed that the prototype scorecard would be implemented from the next meeting and Ms Grinstead asked the Board to provide any feedback in advance of this.
192.9	<u>Workforce Metrics & Exception Report</u>
192.10	Mr Ali Mohammed, Director of HR and OD said that the Trust's turnover was gradually reducing and was approaching the London average. He said that concerns had been raised around agency costs however this would be significantly reduced once there had been a reduction in the RTT validation team and remaining staff had been transferred to substantive contracts within teams.
192.11	Work was taking place to ensure that all elements of the Trust's mandatory training were relevant and efficiently delivered.
192.12	The Board discussed PDR rates which remained red rated. Baroness Blackstone, Chairman said that there were a number of areas which remained below 80% and emphasised that changes in these areas must be urgently made. She said that PDRs were an important part of good practice and the message must be disseminated to managers in these areas from the Board.
192.13	Dr Peter Steer, Chief Executive suggested that, along with mandatory training, if requirements were not met, the Board should have a policy in which after a given time, staff could not continue in their roles without a valid PDR.
192.14	Ms Mary MacLeod, Non-Executive Director welcomed the assessment of mandatory training that was taking place and said that as a substantial amount of time was taken out of the workforce for training it was vital that all training was relevant.

192.15	<u>Finance Update</u>
192.16	Ms Loretta Seamer, Chief Finance Officer said that it was likely that the Trust would meet its control total at year end however was unlikely to meet plan due to the increased depreciation of donated assets. There had been an improvement in IPP debtors with further payments being received. It was confirmed that the Trust was on plan to deliver the NHS England contract and despite having not met the productivity and efficiency target, the control total had been met due to non-recurrent savings.
193	Infection Control Report
193.1	Dr John Hartley, Director of Infection Prevention and Control presented the report. He highlighted action 129.3 on the action log around nudge theory and said that rather than using nudge theory it was vital to communicate to staff the importance of following standard precautions.
193.2	It was reported that the Trust was working well to control the incidence of MRSA and central venous line (CVL) infections. Dr Hartley said that resistant infections were increasing year on year and additional work was required to prevent and treat these. Dr Hartley highlighted the importance of compliance with CVL care bundles in reducing the number of related infections.
194	Safe Nurse Staffing Report January 2017 and February 2017
194.1	Ms Juliette Greenwood, Chief Nurse said that the Trust had met the required staffing rates and there had been no unsafe shifts in the period of the report.
194.2	Work was taking place around care hours per patient per day to calculate a recognised average and tolerance which could be used to benchmark with other paediatric hospitals.
194.3	Discussion took place around the number of cardiac and respiratory arrests in the period. It was highlighted that the figures provided were different in the safe staffing and quality reports. This was because the safe staffing report referred to arrest taking place on wards whereas the arrests in the Quality Report were Trust wide, including a number which took place on non-inpatient ward areas.
194.4	Baroness Blackstone, Chairman raised the issue of bed closures caused by refurbishment. Mr Matthew Tulley, Director of Development said that although the length of the closure was dependent on the scope of the project, considerable planning took place to minimise the impact as far as possible.
195	2016 Annual Staff Survey Results
195.1	Mr Ali Mohammed, Director of HR and OD presented the report and expressed some concern about the number of staff reporting poor behaviour from colleagues. He said that following improvements in understanding the reasons for staff leaving the Trust, further work would be conducted.
196	Deputy Chairman and Senior Independent Director roles from 1st May 2017
196.1	Dr Anna Ferrant, Company Secretary confirmed that the Members' Council had approved the proposal for Ms Mary MacLeod, Deputy Chairman to become

196.2	<p>Interim Chairman when Baroness Blackstone stepped down as Chairman at the end of April 2017. She said that it was further recommended that Mr Akhter Mateen became the Deputy Chairman, Mr James Hatchley the Senior Independent Director and Professor Stephen Smith, the Chair of the Quality and Safety Assurance Committee.</p> <p>The Board agreed to recommend the proposals to the Members' Council for approval.</p>
197	Revised Trust Board Workplan 2017/18
197.1	Dr Ferrant said that the Well Led Review had recommended that the Board Assurance Framework was reported to the Board four times per year. She said that the update workplan proposed that this took place three times annually, but that this was scheduled around the review of progress with the strategy.
197.2	It was proposed that six patient stories were reported to the Trust Board and that a number of these would be around patients and families involved in research.
197.3	Mr David Lomas, Non-Executive Director said that the meeting of the subcommittee chairs had agreed that the Legal Team Report would be considered by both the Quality and Safety Assurance Committee and also the Audit Committee.
197.4	<p>Mr Lomas suggested that it was important to undertake horizon scanning and to support this work, individuals from the following organisations should be invited to present to the Board:</p> <ul style="list-style-type: none"> • Commissioners • The King's Fund • Chief Executive of another Children's hospital • Chief Executive of a referring Trust to discuss better joint working.
197.5	Action: It was agreed that feedback from the GOSH Children's Charity and UCL GOS Institute of Child Health would be provided at Trust Board seminar sessions in rotation as the Board was keen to undertake horizon scanning with the Trust's closest partners.
198	Register of Interests and Register of Gifts and Hospitality
198.1	Action: Dr Anna Ferrant, Company Secretary said that work was taking place to implement a revised process across the Trust for both declarations of interest and declarations of gifts and hospitality. It was agreed that Dr Ferrant would circulate the newly updated NHS England guidance on the matter.
198.2	Ms Mary MacLeod, Non-Executive Director welcomed the increase in declarations received but said that there was work to be done to ensure all staff were aware of the declarations they should be making.
199	Any Other Business
199.1	There were no items of other business.