

Report from Yeovil District Hospital NHS Foundation Trust

Executive Portfolio Holder: Cllr Sylvia Seal, Leisure and Culture
SSDC Representative: Cllr David Recardo

Councillor David Recardo will attend the District Executive meeting to answer any questions from Members regarding the Yeovil District Hospital NHS Foundation Trust. The minutes of the Council of Governors meeting of 8th September 2016 are included below for information.



COUNCIL OF GOVERNORS

Minutes of the Council of Governors meeting held on 8 September 2016
**Marsh Jackson Room, Academy, Yeovil District Hospital, Higher Kingston,
Yeovil, BA21 4AT**

WELCOME AND APOLOGIES

Paul von der Heyde welcomed the governors, Non-Executive Directors and those in attendance to the meeting.

DECLARATIONS OF INTEREST

Paul von der Heyde stated his declarations noted in the previous Council meeting on 3 March still applied [item 2/16]. There were no other declarations of interest.

MINUTES OF THE PREVIOUS MEETING AND MATTERS ARISING

Paul von der Heyde noted in item 21/16, interest would still be accrued on the loans. This would require rewording within the minutes to reflect. Subject to the above correction, the minutes from the meeting held on 8 June 2016 were approved as a true and accurate record.

Paul von de Heyde went through the actions of the previous minutes where it was noted/discussed:

- Car parking machine was now working.
- John Park questioned the inclusion of the new governor indicator. It was noted it was included on the dashboard, but further discussions took place for this indicator to have a bigger profile within the pack. Ben Edgar-Attwell agreed to liaise with the Management Information Team.
- David Recardo questioned the discussions in previous meetings regarding the allocation of funding. He noted that in the Strategy and Performance Group minutes, it was stated that the NHS deficit for the county would sit at £380million. He asked for assurance that funding that is normally allocated towards the hospital would remain and not be distributed elsewhere. Paul Mears agreed this was the countywide deficit, which has started discussions on which services Yeovil Hospital and Musgrove Park Hospital

currently fulfill which may benefit from more collaborative working. These discussions are taking place within work underway for the STP and are in the very early stages.

ANNUAL REPORT, QUALITY REPORT AND ACCOUNTS 2015/16 AND THE EXTERNAL AUDIT OPINION

A summary of the Annual Report was provided to the Governors. The auditors (KPMG) reviewed the annual accounts in May where an Audit Committee was held to receive this report. The auditors provided an unqualified opinion on the accounts and a qualified opinion on the quality report.

Jo Howarth provided an overview of the production of the quality report. There were some challenges faced in regards to how some of the data was collected for various indicators; these have been addressed and changed for this year, one of which is the Governor Indicator.

Jo Howarth also noted that there had been some successes and challenges within the year. One example was patient falls. There was no overall reduction inpatient falls; however there was a reduction in falls resulting in harm. There was also an improvement in skin damage with a 20% reduction in pressure ulcers.

Julian Grazebrook noted that the auditors are always complimentary regarding the Trust's Finance team at Yeovil, there are very rarely any adjustments made to the accounts.

Paul von der Heyde updated the Council that the external auditors will be attending the December Council of Governors meeting. Jade Renville provided some context to their visit, with the auditors carrying out a session on what is required from the hospital governors regarding their statutory responsibilities, including membership and communications.

The Council of Governors formally received the accounts in advance of presentation at the AGM this afternoon.

EXECUTIVE REPORT

The Council of Governors noted the content of the executive report presented by Paul Mears (which included updates on TrakCare, Car Park, CQC Feedback, La Manga). There was particular discussion of the following:

CQC Action Plan

The Council was provided with the current CQC Action Plan which is being implemented following publication of the Trust's CQC inspection report. Paul Mears provided an update on the CQC report and the actions that are underway to address the concerns raised. He noted that with regards to the emergency department pressures, this is not something that is unique to the Trust and the inspection took place during a period when the Trust was in black escalation.

With regards to the CQC's concern about young adults being admitted to the children's' and young peoples' ward, the inspectors raised concerns around safeguarding, although the Trust was able to show evidence of no safeguarding issues ever been raised. The criteria has now been changed to admit only those who are known to the paediatric team, with a weekly report sent to the CQC with all patients admitted over the age of 18 to ensure that this criteria is being met.

Paul Mears said that the action plan presented is currently addressing the 'must do' actions from the CQC report, and there may well be an inspection on these areas in the future.

Peter Shorland asked about the financial pressures these actions would have on the Trust, considering the existing deficit; also noting that the report carried clear and logical attempts to achieving the pathways. Paul Mears confirmed that there had been additional financial pressure stemming directly from the CQC report, but that the Trust recognises the importance of continuing to invest to ensure the quality and safety of patient care.

Paul Mears noted that there were also lots of positive aspects raised within the report, with the Trust achieve a rating of Good across the board within the Caring category. Paul Mears explained that whilst there was disappointment in the overall rating, particularly given the enormous amount of work which every member of staff put in prior to and during the inspection, the report will be used as a tool to make services even more responsive, caring and safe.

Paul von der Heyde explained that, following concerns being raised by the Trust to the inspectorate, a meeting with the Deputy Chief Inspector of the CQC and the Head of Hospital Inspections would take place late September/early October to discuss the inspection and report. This meeting will be an opportunity to provide feedback, outlining areas of concern the Trust experienced with the inspectors and overall inspection process.

David Recardo raised the issue that the general public are disappointed with the report and how the hospital performed. He asked whether it was possible for the Trust to include an overview of the report that provides context. Paul Mears explained that it is the CQC's report, which they publish.

Local media channels were used to express the Trust's response to the ratings and the usage of the ratings grid showcased that the hospital achieved more Good ratings than Requires Improvement. The positive work that is underway will hopefully provide assurance to the general public and it was noted that negative aspects are generally picked up on rather the positive areas.

Judith Lindsay-Clark questioned whether there would be another visit from the CQC in the same approach. Paul Mears explained that the CQC are currently reviewing their methods and the way in which inspections are undertaken. In future they may be more themed and target based.

Car Park

Paul Mears provided an update on the car park, with the development moving along quickly. The floors and drainage are now being completed and the project is still on track to open at the end of January. The new slip road exit is set to be ready at the end of November.

Mary Belcher asked whether there were any stipulations on working hours as work was taking place on Sundays. Paul Mears agreed to speak with the estates team and check this.

Paul Porter asked whether the flooding issue on the road would be addressed within the works. It was confirmed that this was being looked into.

TrakCare

Paul Mears provided an update on the implementation of TrakCare. The new system was running for Inpatients, Outpatients, Maternity and Emergency Department. The supplier, Intersystems noted that this was the smoothest transition to a new system they had experienced. Phase 2 is underway and is planned for next year; this will include aspects such as electronic prescribing and theatres.

La Manga

Paul Mears addressed concerns regarding the Trusts partnership with La Manga Hotels. He confirmed that there is no monetary benefit to the Trust from this partnership. John Hawkins asked about the public aspects of the promotion. Paul Mears explained that in no way would the Trust be actively pushing the promotion of holidays to patients; it is merely an option for staff and patients to acquire a discount should they wish.

Helen Ryan's retirement

Paul Mears noted that further to communication sent out previously, Helen Ryan, Director of Nursing was planning on retiring next year. He confirmed that the recruitment process would be starting towards the end of this month, in the hope that there would be a handover period before Helen leaves in May 2017.

David Recardo asked whether an internal recruitment would involve an immediate transfer or would the candidate's previous post need to be filled prior to the transfer. Paul Mears confirmed that a flexible approach would be taken in the event of an internal appointment.

NHS Improvement (NHSI) investigation

Paul Mears updated the Council on the NHSI investigation into the Trust. He explained that the Trust was behind on the 5 year plan, and NHSI wanted assurance and understanding what actions were being taken to address this. NHSI reviewed the Trust's assurance processes and provided positive feedback. Paul von der Heyde noted that the Trust has not yet been found to be in breach of licence despite the financial position.

OVERVIEW OF SYSTEMISED SURGERY WITH DAYCASE UK

Kelvin Donald and Shelagh Meldrum presented to the Council an overview of the partnership with AmSurge (ASI) which included a background of the company and the plans going forward to standardise day case procedures, including the building of a new day case unit.

John Webster agreed that this was an exciting venture for the Trust; however he questioned why ASI should claim 'proven superiority' over Yeovil. He suggested that YDH's day case unit works well, but is now facing increasing demand and requires expansion. Kelvin Donald explained that ASI were not claiming superiority over YDH, but that with their background knowledge and being USA's biggest day case unit provider, they are able to provide expertise in the area and suggest improvements in the current system. Judith Lindsay-Clark noted she had visited one of the ASI sites in the USA and saw first-hand the improvements and changes which can be made to improve the service efficiency and the experience for patients at YDH.

John Tricker asked from where the staff required to run the new facility would be recruited; would they be ASI or YDH staff? Shelagh Meldrum confirmed that the unit would be staffed using existing staff from YDH and that these models are currently being developed.

Michael Fernando asked whether ASI is limited to YDH or is there an intention to expand. John Hawkins also asked if this would be expanded to Dorset, Devon and other surrounding counties. It was confirmed that ASI are not limited to YDH and there is the intention to use the learning from this partnership to expand to other Trusts. It is anticipated that other providers will approach ASI post go live.

David Recardo queried why there was a need to partner with ASI; the unit will be run with YDH staff and the building would be built with the Trust's estates partner. Paul Mears confirmed that the Trust does have an estates partner who would be constructing the new building, however ASI are able to provide knowledge and expertise in the development of the layout of the new unit and how to run the overall service. ASI are world leaders in this area and they have complimentary skill set to those at YDH.

Jane Lock questioned the involvement of ASI in NHS service delivery. Kelvin Donald noted that the partnership is in place to access expertise rather than handing over control. ASI are working in collaboration with YDH, with the Trust being the senior partner (70%). Shelagh Meldrum explained that there are similar models within the UK, but that these are wholly subcontracted with no shared learning compared to the joint venture at YDH.

Jane Lock also noted that there was no explanation on the cost or the savings involved. Paul von der Heyde explained that the partnership would improve the speed and efficiency of the unit, which in turn would lead to benefits for patients and cost saving benefit.

Paul Porter asked about the timelines involved in the new unit. Kelvin Donald explained that work was currently being undertaken to drive change in the existing unit for improvements, with the idea of the new unit opening in 2018.

John Tricker asked whether the new unit would be linked with any hotels for patients to have a 'full stay package'. Kelvin Donald stated that there were no plans in place to link with any hotels. The new unit would be a day case unit with no requirement for patients to stay overnight.

Tony Robinson asked whether there could be a standardised statement for the governors to share with their constituencies. Ben Edgar-Attwell/Jade Renville agreed to follow this up.

GOVERNOR QUALITY AND OPERATIONAL PERFORMANCE DASHBOARD AND FINANCIAL PERFORMANCE

Operational Performance

Paul Mears presented the performance dashboard where the following items were particularly discussed:

- RTT performance. It noted that although the 92% target had still not been achieved, the Trust was on track to achieve this within the near future. There are still ongoing challenges being faced regarding RTT performance, although operation cancellation rates are improved.
- A&E performance. The Trust had just missed the 95% target in August (94.09%), but this was an issue being faced by numerous trusts around the country. Against the national ratings, YDH was the second best performing emergency department in the country during some of the preceding weeks.

- Delayed Transfers of Care. This is still proving to be a big challenge within the hospital, although much work is ongoing to improve this position.
- Infection Control rates and Friends and Family rates remain good.

Alison Whitman noted that the iWantGreatCare results look to be incorrect. The scoring is out of five, with many months appearing show a number over this amount. Ben Edgar-Attwell agreed to check this with the Management Information Team.

Paul von der Heyde explained that new flooring had been laid in the emergency department over the bank holiday weekend, whereby the department had been temporarily moved into the orthopaedics outpatient area and day case unit. Yvonne Thorne provided an overview of the work undertaken and explained there had been no ambulance delays and the 4 hour performance was good during this period. This work also provided an opportunity to test the continuity plans which are in place.

John Park queried the rag ratings on the performance dashboard compared to the slides. Jade Renville confirmed that discussions are underway to review of indicators are rated.

David Recardo questioned the first to follow up appointments ratio. He noted that orthodontics was at a very high rate. Paul Mears confirmed that the follow up ratio appears high as it includes all patients who have their braces adjusted.

Financial Performance

Sheena Morrow presented the Financial Performance update for this year to date where the following points were particularly discussed:

- The Trust's financial position as of the end of July 16 was £81k adverse variance to budget. Total year-to-date deficit is £6.2m.
- External Providers; this is one area in which there was a large overspend. Paul Porter questioned why this would be classified as an overspend. Sheena Morrow explained that the Trust is able to claim the tariff for the procedures, but the Trust then pays the external providers. The finances should be cost neutral in regards to clinical income and expenditure.
- With the agreement of the control total, the Trust will have access to the Sustainability and Transformation funding. This additional funding requires achievement of a number of targets throughout the financial year. In month 4, the Trust failed to achieve some of the operational targets; this resulted in the Trust not receiving the STF funding.
- It was noted that agency costs are reducing, with bank costs increasing in line with the additional promotion of sign up and usage. Paul Mears explained that a number of key medical vacancies have now been fulfilled which has reduced agency costs.
- Cost Improvement Plans are on target with a number of workforce savings planned for later this year.
- Sheena Morrow provided an overview of the current cash position. The Trust currently has a temporary loan; however, a loan will not be required in September due to the backdated STF monies.

ESTATES MASTERPLAN

Jonathan Higman presented the Estates Masterplan presentation, which highlighted the key elements of the Trust's plans, an update on the car park and set out the key priorities for the Trust site. The masterplan is a high level vision up to 2031.

The vision is the old car park site is to be used as additional clinical space, with a portion of this site set aside for the development of the new day case unit. There are discussions taking place for the expansion of health education space on the site where the current Convamore building is situated. A case and plan has been submitted to the local education partnership (a government backed scheme) for additional funding.

Other priorities include residential accommodation and long term office space solutions.

There is a smaller masterplan for the vacant space on level three after the development of the day case unit is completed, plans for which are under development.

Paul Mears spoke about the recent legacies which have been left to the Trust. Some of these legacies will be used to make improvements to the ED department, but there is also a need to improve some of the ward environments.

David Recardo raised the issue of the recent road improvements within the town and access to the hospital. He noted that in peak times, ambulances struggled to get access to the hospital site. Paul Mears confirmed that the Highways Agency would be involved in all developments on site.

John Park asked how Interserve Prime, the Trust's strategic estates partner, are involved within the building works. Jonathan Higman outlined the joint venture and explained they provide advice and development support. Actual building works will be developed and completed on a project by project basis and contractors secured for each on a contract basis.

Jane Lock noted that the County Council had aspirations of a University within Somerset, with Yeovil being a prime location. Paul Mears explained that Bournemouth already has their campus on Preston Road and there may be an opportunity to work together to build the new Health College on the YDH site, although discussions would also take place with other universities.

Mary Belcher questioned whether the accommodation for relatives of inpatients would still be provided. Jonathan Higman confirmed that this was under review within the masterplan as to its new proposed location.

John Tricker asked whether the maternity unit would continue at YDH due to its small size. It was noted from an invited inspection from the Royal College of Midwives previously, there was a need for a consultant led unit at Yeovil due to its geographical location, despite the small number of births.

REPORTS FROM ASSURANCE COMMITTEES AND GOVERNOR GROUPS

Governance Committee:

Sue Bulley provided a verbal update of the latest Governance meeting advising in particular the following topics that were discussed and presented: the patient safety quality experience report which included sections on pressure ulcers and patient falls, clinical governance arrangements between YDH and DayCase UK and an update on the CQC Looked after Children review.

Audit Committee:

John Park provided a verbal update of the last Audit Committee meeting where the following discussions took place: a close down of last year's account and an internal review on integrated learning – learning on the topic of complaints; the auditors had limited assurance on effectiveness, however lots of progress has since been made.

Julian Grazebrook noted that the committee also went into depth regarding the risk register which is continuously evolving, especially since the go live of TrakCare. Risks are being identified and monitored.

Workforce Committee:

Sue Bulley provided a verbal update of the Workforce Committee in July where the following topics were presented and discussed:

An overview of the Symphony Healthcare Services organisational development plan, national drives to streamline workforce and make savings and the outsourcing of payroll and pension services to Torbay.

The August committee meeting included discussions of the following: leadership development programmes, ongoing difficulties in nursing recruitment, especially in emergency medicine and theatres.

Mark Saxton also noted that the committee discussed the need to improve the usage of bank and reduce agency costs.

Finance Committee:

John Park noted that the committee meets on a monthly basis and reviews the current financial position, which has been provided to the Council by Sheena Morrow [item 34/16 refers].

Quality Committee:

John Webster and Sue Bulley provided verbal updates of the last Quality Committee meeting where the following topics were discussed: management of health records, presentation on equality and diversity, safeguarding – updates on policies, particularly on Deprivation of Liberties.

Paul Mears noted that the introduction of TrakCare will result in medical records becoming more secure as they are stored electronically rather than paper records which can be misplaced. The Trust is currently in a transition period between the two. TrakCare provides a new audit trail with the ability to observe who has accessed and changed records.

Patient Experience Group:

Paul von der Heyde provided an overview of the current developments of the Patient Experience Group noting that it was developing steadily although more work is required. He anticipated that a public governor would be able to join the group within the next year, also asking whether Yvonne Thorne and Judith Lindsay-Clark felt constrained being staff governors. Neither governor felt constrained, although Yvonne Thorne did state that she felt that a public governor should be a member.

Membership and Communications Group:

In Hala Hall's absence, Jade Renville provided an update on the topics discussed at the last Membership and Communications Group which centred around social media. It was noted that Tony Robinson, Ben Edgar-Attwell and Amy Helliard, Communications Officer had since met to discuss the current media platforms, which would be fed back at the next meeting.

Sue Brown raised the idea of governors being available within the outpatient and emergency departments on certain days in order for members of the public to raise any issues. Ben Edgar-Attwell/Jade Renville agreed to follow this up.

Sue Brown raised the issue of the lack of Friends and Family boxes around the hospital and within various departments. Jade Renville agreed to follow this up.

Tony Robinson noted whilst at the Yeovil Show, many members of the public were not aware of what a NHS Foundation Trust was, nor the existence of hospital governors. He raised concerns over the Trust's website, with the lack of this information. Ben Edgar-Attwell/Jade Renville agreed to review these sections of the website.

David Recardo spoke of the need for governors to interact more with members of their constituency and the public, noting that the Super Saturday event is a prime event.

Strategy and Performance Working Group:

Alison Whitman noted that the governor indicator was reviewed and confirmed at the previous meeting, and there already appears to be improvement in this area. The minutes of the previous meeting were noted by the Council.

ANY OTHER BUSINESS

Jade Renville explained that the Trust has a responsibility for young and vulnerable people and would be undertaking DBS checks of all governors in line with the practice for members of staff and volunteers. Ben Edgar-Attwell would send out invitation letters and instructions on how the governors are to complete this process following the meeting.

The governors asked whether in future they could be provided with a link to the agenda and papers for upcoming meetings of the Trust Board. Jade Renville explained that a link is always provided in CONECTweekly, which is sent to governors. She added that governors are always welcome to contact her in order to attend the public section of any meeting of the Trust Board. This is in addition to the meeting each governor is allocated to attend and for which papers are sent to them in advance (for the public and confidential sections).

Mary Belcher asked about the security on the wards, expressing concern about open door access. Paul Mears responded that some doors have restricted access, such as theatres and the children's ward, but that the Trust is not a secure unit whereby patients are locked into wards. He acknowledged that the safety and security of wards must be a priority, but that the staff, as well as the volunteers, have a role to play in overseeing the visitors to their wards.

Paul Mears advised that as part of winter planning, YDH is reviewing whether to continue commissioning beds at Cookson's Court nursing home, the pilot of which had so far received positive feedback from patients and improves patient flow within the hospital. However, he acknowledged that it would also be important to look at alternative options, taking into account the financial pressures, such as improving access to domiciliary care to support patients at home. Sue Brown added that it would be important for the Trust to maintain and enhance its relationship with the Red Cross, who would be able to provide additional support over the winter period.

DATE OF NEXT MEETING

The next meeting will be held on Tuesday 6 December 2016.
