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BOARD COMMITTEE SUMMARY REPORT

| | |
|--|--|
| Name of Committee | Finance and Business Performance Committee |
| Committee Chair | Mr Rajiv Jaitly |
| Meeting date: | 23 rd August 2018 |
| Was the meeting quorate? | Yes |
| Any specific conflicts of interest? | None |
| Any apologies | Ms Natalie Fox, Mrs Rachel Devonshire |

KEY AREAS OF DISCUSSION:

Month 4 finance report and Financial Recovery Plan

Concern on the continuing trend of adverse financial results and that there needed to be a much greater sense of urgency in addressing the deteriorating position by identifying the key actions together with timescales and financial impact that needed to be taken month on month in order to address the financial position. The Trust has moved to a £7.5m deficit, which is £7.4m versus plan with a £1.6m deficit in month.

Key challenges were set out including agency spend with the best, likely and worst case scenario discussed.

Cash

The current cash position was discussed with approval sought to recommend to the Board a drawn down in September. Concern over the increasing cash pressures and the need to understand the drivers. Summary of the overall borrowing requirement for the financial year to be confirmed in September meeting. Requirement for analysis to be brought back to the committee with a plan as to how these drawdowns would be repaid over the medium term.

MRI Scanner Investment Proposal

The committee were advised that the business case was in the final stages with discussions with Scannappel around funding on-going.

Electronic Prescribing

The committee were assured of the high engagement between clinical teams and IT and advised to recommend option 1 to be presented to the Board for approval.

Equiniti update

Recommendation agreed to extend the current contract with the committee approving the two year extension.

Performance Floodlight Integrated Performance Report

Discussion focused on waiting lists, no recorded 52 week breaches for endoscopy, agency costs and cancer breaches.

AREAS OF RISK REVIEWED IN THE MEETING

- Cash requirements
- Deterioration in I&E M4 and mitigations
- Time lag on QIA associated with CIP
- Continuing contract with Equiniti in terms of quality
- Integrated med performance – A&E four hour
- HTN compliance in estates
- Cleaning audits
- Community hubs and sustainability

Agenda item: 15

Enclosure no: TB2018/102

- Agency spend and breaches
- Increase in size of waiting list
- Brexit in terms of contingency planning

ANY EXAMPLES OF OUTSTANDING PRACTICE OR INNOVATION:

AUTHOR OF PAPER: James Drury, Director of Finance

BOARD COMMITTEE SUMMARY REPORT

| | |
|--|--|
| Name of Committee | Finance and Business Performance Committee |
| Committee Chair | Mr Rajiv Jaitly |
| Meeting date: | 20 th July 2018 |
| Was the meeting quorate? | Yes |
| Any specific conflicts of interest? | None |
| Any apologies | Graham Johnston |

KEY AREAS OF DISCUSSION:

Allocate implementation

Update provided on the implementation and challenge set to maintain the pace of the programme to prevent further slippage.

MRI scanner

Update provided on business case and scheduled to come back to September meeting.

Amersham Fire Curtains

Update provided to the Committee that UHSB / Vinci had submitted a proposal. The Trust to engage an independent expert to review proposed solution and whether this will address the identified risk. Assurance was given that all current fire prevention measures including fire extinguishers are up to date and in place by the Director of Property Services.

Transfer of Care

Report presented and concluded that this programme be monitored going forward through the Quality Committee.

Month 3 financial position

The Director of Finance set out the month 3 financial position being a deficit of £5.8m, which represents a £4.4m adverse variance to the plan. Process for Financial Recovery Plan set out and to be presented to August meeting. The requirement to drawdown loan in September was confirmed to the Committee and would be subject to normal governance processes.

Capital allocation made for first stage of A&E Phase 2 project and that reserve of £500k was allocated to items prioritised by CMG (primarily medical equipment).

Grip and control

Update provided to the Committee on actions against the Grip and Control checklist. Request for progress on actions to be presented at October meeting.

Payroll contract management

Equiniti contract management process discussed. Update on options for payroll going forward to be presented at the next meeting.

E- prescribing business case

Draft business case presented to inform the Committee of the bid that the Trust is expecting to submit later in the summer. Further comments from members of Committee requested prior to Board meeting.

Estates Compliance issues

The Director of Property Services confirmed that a deep dive into the compliance against HTMs and the level of assurance had commenced. This had raised some significant potential risks in relation to water safety, asbestos, air handling, emergency lighting and medical gases. Further work being undertaken to assess risks around compliance. It was concluded that the issue of estates compliance to be treated as a serious incident with assurance provided to the Committee and Board.

The Chair of Trust proposed that a Board seminar on Health and Safety be timetabled.

Other estates issues

ERIC submission of data noted.

Update on timing of electrical resilience project provided. Redesign work to be completed within four weeks, which will allow confirmation of timescale to complete.

PFI contract management process reviewed.

Floodlight Integrated Performance Report

Improving trend on NHS Constitutional Standards noted. Positive feedback on NHSI visit provided and in particular on Rapid Assessment Model. Nursing vacancy, temporary staffing and breaches of the agency cap have increased and exception report set out actions in place

Paper on capacity in Ophthalmology and how driving RTT issues set out and actions being taken. Endoscopy update setting actions in place to address growth in demand.

Commercial

Commercial (Private Patient and NHS income) presented. Request for further analysis in August meeting.

AREAS OF RISK REVIEWED IN THE MEETING

- Estates compliance - assurance around water safety including legionella, asbestos, air handling, fire curtains at Amersham
- Optimising the PFI contract
- Risk of slippage against Allocate project plan
- MRI scanner at Wycombe
- Delivery of financial plan and Transformation programme continued deterioration in financial position
- Payroll provision and procurement
- NHS constitutional standards
- Endoscopy capacity
- Agency cap compliance
- Vacancy rate and reliance on temporary staffing
- Ophthalmology capacity
- Risk to delivery of commercial income

ANY EXAMPLES OF OUTSTANDING PRACTICE OR INNOVATION:

AUTHOR OF PAPER: James Drury, Director of Finance

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**BOARD COMMITTEE ASSURANCE REPORT FOR PUBLIC BOARD
26 September 2018**

Details of the Committee

| | |
|--|---|
| Name of Committee | Quality and Clinical Governance Committee |
| Committee Chair | Professor Mary Lovegrove |
| Meeting date: | 4 th September 2018 |
| Was the meeting quorate? | Yes |
| Any specific conflicts of interest? | No |
| Any apologies | Ms Beddall, Mrs SobeyHudson, Mr Williams, Miss Tasker, Mrs Ricketts, Mrs Tebbutt, Ms Jackson, Dr Kenny, Mr Tabay, Mrs Atkins. |

KEY AREAS OF DISCUSSION:

- Improvements for Fractured Neck of Femur report: out of hours workforce and access to diagnostics added to the meeting Action Matrix
- Corporate Risk Register
- Quality Improvement Plan Q1 presentation
- Medicines management: analysis of medication errors; future reports to include a regional and national picture for benchmarking
- Line infection report to be discussed at the Quality and Patient Safety Group meeting in September 2018

AREAS OF RISK TO BRING TO THE ATTENTION OF THE BOARD:

- Increase in trauma demand and management of this including impact on Fractured Neck of Femur
- A&E 4 hour target
- Medical and nursing staffing
- Cancer performance
- Referral to Treatment – size of waiting list
- Line infections

ANY EXAMPLES OF OUTSTANDING PRACTICE OR INNOVATION:

Human Resource teams: development of a two-day induction programme for junior doctors resulting in a huge improvement with mandatory training requirements

| | |
|-------------------------|--|
| AUTHOR OF PAPER: | Geraldine Corbould, Business Support Officer to the Chief Nurse (on behalf of the Chief Nurse) |
|-------------------------|--|

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BOARD COMMITTEE ASSURANCE REPORT FOR PUBLIC BOARD
25 July 2018

Details of the Committee

| | |
|--|-------------------------------|
| Name of Committee | Strategic Workforce Committee |
| Committee Chair | David Sines |
| Meeting dates: | 4 September 18 |
| Were the meetings quorate? | Yes |
| Any specific conflicts of interest? | No |
| Author of the paper | Bridget O'Kelly |

4 September 2018

Apologies: Dr Tina Kenny, Ms Hattie Llewelyn-Davies, Mrs Vicky Adams

KEY AREAS OF DISCUSSION:

The key areas of discussion were:

- Pay day delay: impact and actions taken
- Health and safety update
- Integrated performance report, in particular workforce metrics
- Quarter 1 report from the Trust Freedom to Speak Up Guardian
- Challenges with regards to the nursing and midwifery workforce

AREAS OF RISK TO BRING TO THE ATTENTION OF THE BOARD:

Risks

- Nursing workforce
- Health and safety

ANY EXAMPLES OF OUTSTANDING PRACTICE OR INNOVATION:

None

BOARD COMMITTEE SUMMARY REPORT FOR AUDIT COMMITTEE

| | |
|---|--|
| Name of Committee | Audit Committee |
| Committee Chair | Mr Graeme Johnston |
| Meeting date: | 5 th September 2019 |
| Was the meeting quorate? | Yes |
| Any specific conflicts of interest? | None |
| Any apologies | Ms Erin Sims; Mr. N Atkinson |
| KEY AREAS OF DISCUSSION: | |
| <p>The Committee considered the following:</p> <ul style="list-style-type: none"> • Internal audit report – actions not being closed off in a timely manner • Key areas for Executive's action – rostering and SWC • Single tender waivers concern • External audit – using information available • New product launches • Benchmarking on ICFS • Actions on BAF and full support for review of a system to manage this <p>The Committee wanted to escalate the following issues to the Board:</p> <ul style="list-style-type: none"> • Greater assurance needed on accountability to close actions from audit in a timely manner | |
| AUTHOR OF PAPER: | Sue Manthorpe, Director for Governance |

BOARD MEETING IN PUBLIC

26 SEPTEMBER 2018

Details of the Paper

| | | | | | |
|---|--|--------------------------------------|---------------------------------|------------------------------|---|
| Title | Private Board Summary 25 July 2018 | | | | |
| Responsible Director | Trust Chair | | | | |
| Purpose of the paper | <p>The purpose of this report is to provide a summary of matters discussed at the Board in private on the 28 March 2018. The matters considered at this session of the Board were as follows:</p> <ul style="list-style-type: none"> • Serious Incident Report • Excluded Practitioners • Well-led framework draft self-review • Purchase of blood products from NHS blood transfusion service | | | | |
| Action / decision required | The Board is asked to note the contents of this report. | | | | |
| IMPLICATIONS AND ISSUES TO WHICH THE PAPER RELATES (PLEASE MARK IN BOLD) | | | | | |
| <i>Patient Quality</i> | <i>Financial Performance</i> | <i>Operational Performance</i> | Strategy | <i>Workforce performance</i> | <i>New or elevated risk</i> |
| <i>Legal</i> | Regulatory/ Compliance | <i>Public Engagement /Reputation</i> | <i>Equality & Diversity</i> | Partnership Working | <i>Information Technology / Property Services</i> |
| ANNUAL OBJECTIVE | | | | | |
| <i>Which Strategic Objective/s does this paper link to?</i> Relates to all objectives | | | | | |
| <i>Please summarise the potential benefit or value arising from this paper:</i> | | | | | |
| RISK | | | | | |
| Are there any specific risks associated with this paper? If so, please summarise here. | <i>Non-Financial Risk:</i> | | | | |
| | <i>Financial Risk:</i> | | | | |
| LINK TO CARE QUALITY COMMISSION ESSENTIAL STANDARDS OF SAFETY AND QUALITY | | | | | |
| Which CQC standard/s does this paper relate to? | Relates to outcome 4, Care and Welfare of Persons using our service | | | | |
| Author of paper: Elisabeth Ryder | | | | | |
| Presenter of Paper: Elizabeth Hollman | | | | | |
| Other committees / groups where this paper / item has been considered: No other committee | | | | | |
| Date of Paper: 12 September 2018 | | | | | |

PUBLIC BOARD MEETING 26 SEPTEMBER 2018

Details of the Paper

| | |
|---|---|
| Title | Board Attendance Record |
| Responsible Director | Director for Governance |
| Purpose of the paper | To keep the Board informed of the attendance of Board members at Board meetings and Board committees. |
| Action / decision required (e.g., approve, support, endorse) | None |

IMPLICATIONS AND ISSUES TO WHICH THE PAPER RELATES (PLEASE MARK IN BOLD)

| <i>Patient Quality</i> | <i>Financial Performance</i> | <i>Operational Performance</i> | <i>Strategy</i> | <i>Workforce performance</i> | <i>New or elevated risk</i> |
|------------------------|-------------------------------|--------------------------------------|---------------------------------|------------------------------|---|
| <i>Legal</i> | Regulatory/ Compliance | Public Engagement /Reputation | <i>Equality & Diversity</i> | <i>Partnership Working</i> | <i>Information Technology / Property Services</i> |

ANNUAL OBJECTIVE

Which Strategic Objective/s does this paper link to?
Relates to all objectives

Please summarise the potential benefit or value arising from this paper:

RISK

| | |
|--|----------------------------|
| Are there any specific risks associated with this paper? If so, please summarise here. | <i>Non-Financial Risk:</i> |
| | <i>Financial Risk:</i> |

LINK TO CARE QUALITY COMMISSION ESSENTIAL STANDARDS OF SAFETY AND QUALITY

| | |
|---|--|
| Which CQC standard/s does this paper relate to? | Well led Domain <i>(if you need advice on completing this box please contact the Director for Governance)</i> |
|---|--|

Author of paper: Elisabeth Ryder

Presenter of Paper: Elizabeth Hollman

Other committees / groups where this paper / item has been considered:
No other committee

Date of Paper: 12 September 2018

Board Attendance Record: July to September 2018

| | Strategic Workforce Committee | | | Finance and Business Performance Committee | | Quality & Clinical Governance Committee | | | Trust Board Seminars | Commercial Development Committee | Charitable Funds Committee | Audit Committee | Trust Board |
|--|-------------------------------|------------|--------|--|--------|---|--------|--------|----------------------|----------------------------------|----------------------------|-----------------|-------------|
| | 03 Jul | No Aug mtg | 04 Sep | 19 Jul | 23 Aug | 03 Jul | 07 Aug | 04 Sep | 29 Aug | 19 July | 9 Aug | 5 July | 25 July |
| Hattie Llewelyn-Davies Trust Chair * | ✓ | | x | ✓ | ✓ | | | | ✓ | | | | ✓ |
| Neil Macdonald, Chief Executive Officer * | X | | ✓ | ✓ | ✓ | X | ✓ | ✓ | ✓ | | | | ✓ |
| Dipti Amin NED* | | | | | | X | x | ✓ | ✓ | | | ✓ | x |
| Rachel Devonshire NED* | | | | ✓ | x | | | | x | ✓ | x | | x |
| James Drury Director of Finance * | ✓ | | | ✓ | ✓ | ✓ | | | ✓ | | ✓ | ✓ | ✓ |
| Natalie Fox Chief Operating Officer* | | | | ✓ | x | X | x | ✓ | x | | | | ✓ |
| Rajiv Jaitly NED * | | | | ✓ | ✓ | | | | ✓ | | ✓ | ✓ | ✓ |
| Graeme Johnston NED * (SID) | | | | x | ✓ | | | | ✓ | | | ✓ | ✓ |

| | Strategic Workforce Committee | | | Finance and Business Performance Committee | | Quality & Clinical Governance Committee | | | Trust Board Seminars | Commercial Development Committee | Charitable Funds Committee | Audit Committee | Trust Board |
|--|-------------------------------|------------|--------|--|--------|---|--------|--------|----------------------|----------------------------------|----------------------------|-----------------|-------------|
| | 03 Jul | No Aug mtg | 04 Sep | 19 Jul | 23 Aug | 03 Jul | 07 Aug | 04 Sep | 29 Aug | 19 July | 9 Aug | 5 July | 25 July |
| Tina Kenny Medical Director * | | | | | | X | ✓ | x | ✓ | | | | ✓ |
| Mary Lovegrove NED * | ✓ | | ✓ | | | ✓ | ✓ | ✓ | ✓ | | | | ✓ |
| Carolyn Morrice Chief Nurse * | ✓ | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | ✓ |
| Bridget O'Kelly Director of Workforce & Organisational Development | ✓ | | ✓ | ✓ | ✓ | | | | ✓ | | | | ✓ |
| Tom Roche Associate NED | ✓ | | ✓ | ✓ | ✓ | | | | ✓ | ✓ | | ✓ | ✓ |
| David Sines Associate NED | ✓ | | ✓ | | | ✓ | ✓ | ✓ | ✓ | | | | ✓ |
| David Williams Director of Strategy & Business Development | X | | ✓ | ✓ | ✓ | | | | ✓ | ✓ | | | ✓ |

NB: greyed out fields indicate committees the individual would not be expected to attend. NED = Non-Executive Director. A * indicates a voting member of the Board