

UNCONFIRMED

MINUTES

**Council of Governors' Meeting
Held on 21 September 2017
Transformation Zone**

Present Governors:

Professor John Wallwork	Chairman		
Barry Crabtree-Taylor (BCT)	Public Governor	Keith Jackson (KJ)	Public Governor
Julia Dunncliffe (JD)	Public Governor	Graham Jagger (GJ)	Lead and Public Governor
Glenn Edge (GE)	Public Governor	John Lodge (JL)	Public Governor
Caroline Edmonds (CE)	Appointed Governor	Helen Munday (HM)	Staff Governor
John Fiddy (JF)	Public Governor	Peter Munday (PM)	Public Governor
Julia Fleming (JFI)	Public Governor	Katrina Oates (KO)	Staff Governor
Gill Francis (GF)	Public Governor	Cheryl Riotto (CR)	Staff Governor
Rob Graham (RG)	Public Governor	Helen Rodriguez (HR)	Staff Governor
Richard Hodder (Rho)	Public Governor	Tony Williams (TW)	Staff Governor
		Nick Wright	Public Governor

Present Governors Elect:

Janet Atkins (JA)	Public Governor	Tony Moodey (TM)	Public Governor
Stephen Brown (SB)	Public Governor	Alessandro Ruggiero	Staff Governor
Simon Marner (SM)	Public Governor	(AR)	

Apologies Governors Elect:

Penny Martin (PM)	Public Governor
Trevor McCleese (TMcC)	Public Governor

In Attendance

Stephen Posey (SP)	Chief Executive
Roy Clarke (RC)	Director of Finance
Roger Hall (RMOH)	Medical Director
Ruth McAll (RM)	Interim Director of Workforce and OD
Mary MacDonald (MMac)	Trust Secretary
Eilish Midlane (EM)	Chief Operating Officer
Josie Rudman (JRu)	Director of Nursing
Julie Wall (JPW)	PA - Minute Taking

Apologies Governors

Ann-Marie Ingle (AMI)	Appointed Governor
Harvey Perkins (HP)	Public Governor
Bob Spinks (RS)	Public Governor
Peter Topping (PT)	Appointed Governor
Nick Wright (NW)	Appointed Governor
Frank Butcher (FB)	Public Governor

Apologies - Other

Karen Caddick	Non-Executive Director
Dave Hughes	Non-Executive Director
Susan Lintott	Non-Executive Director
Mark Millar	Non-Executive Director
Nick Morrell	Non-Executive Director
Ron Zimmern	Non-Executive Director

**Agenda
Item**

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1 Welcome, apologies and opening remarks

The Chairman welcomed everyone to the meeting and apologies were noted.

The Chairman welcomed the new Governors elect and introduced each one, asking them to give the existing Governors some information on their background.

The Chairman thanked retiring Governors who were attending their last meeting as Governors. He thanked Julia Fleming for her 9 years' service as a Governor and John Lodge for the many years that he has committed to the Hospital as a Non-executive Director and Governor. Other Governors who had recently stepped down or who were about to step down were thanked for their support for Papworth.

2 Declarations of Interest

There were no new Declarations of Interest. New Governors were asked to complete the forms which had been provided.

Announcement of Royal Title

The Chairman made an announcement that Papworth Hospital had received a Royal title from Her Majesty The Queen re-naming the Hospital to Royal Papworth Hospital. Formalities were in process for the name change, with the Council of Governors and Board of Directors being asked to approve changes to the Constitution in November/December 2017. The Chairman said that this had been announced to staff earlier in the morning by Stephen Posey, the Chief Executive. The Palace had awarded the title with immediate effect due to the pioneering history and quality of service at Papworth. This was a very high accolade for Papworth to receive.

3 Minutes of Previous Meeting and Matters Arising

Minutes of the meeting held on 21 June 2017

The Minutes, Part I and Part 2 from the meeting held on 21 June 2017 were approved and authorised for signature by the Chairman as a true record.

Chairman

21.9.17

Matters Arising

There were no matters arising not on the agenda.

4 Annual Report and Accounts 2016/17

(a) Annual Report and Accounts (including Quality Report)

All attendees and Governors had been provided with links to the full Annual Report and Accounts for 2016/17. Hard copies were available at the meeting. Roy Clarke (RC), Director of Finance, presented this item to the meeting and advised that there would be a further report at the Annual Members' Meeting later in the day.

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(b) KPMG Audit Findings

This document gave a summary of the findings from work done during the year. The document reported a clean/unqualified audit opinion on the Annual Report and Accounts and Quality Accounts.

Noted: The Council of Governors noted the Annual Report and Accounts 2016/17 (Including Quality Report)

5 Papworth Integrated Performance Report (PIPR)
(Full report and summary)

The Council of Governors received the Papworth Integrated Performance Report (PIPR) report for July 2017 from the Executive Directors.

The PIPR covered performance summaries on – Safe, Effective, Caring, Responsive, People Management & Culture, Transformation and Finance.

Overall the Trust performance remained at Red, for the 4th month, with four domain ratings remaining as Red for performance (Responsive, People Management & Culture, Effective and Finance), two domains remaining rated as Amber (Caring and Transformation) and one domain continuing to show Green performance (Safe).

Favourable performance:

- Caring – Safe was the only green domain in July and patient falls remained below the PIPR target again this month.
- Effective – Length of stay remained below target for both CABG and valves – the first time this has been achieved in 2017/18.
- Caring – Friends and Family scores for July remained good.

Adverse performance

- Responsive – 18 week Referral to Treatment (RTT) dropped to 85.45% in July. This was due mainly to theatre cancellations due to critical care staffing, critical care beds and transplants impacting on theatre time. IHU performance had also dropped to 28%.
- Caring – Number of formal complaints increased to 11 in July with the main areas of concern related to communication to patients around cancellations.
- Safe – Moderate Harm – an increase in the number of incidents reported (6), although this was still below the PIPR target and the Trust does maintain a strong reporting culture. Registered nurse vacancies had increased to 19.9% and the Trust had not been a net recruiter since May 2016, however the increased focus on nurse recruitment should start to show improvements in future months. However this continued to present a risk in terms of meeting capacity needs and the delivery of quality care.
- Effective – Admitted care remained below planned levels (281 below the plan of 2198). Same Day Admission (SDA) rates reduced in July although plans were underway to increase eligible case throughput by earlier opening of Cardiac Day Ward with increased pre-admission clinic capacity.
- Finance – The Trust was adverse to plan by £2,077k for July with a reported deficit of £2,794K against a planned deficit of £717k. The Trust was not delivering the required recovery throughput which would

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achieve the Operational Plan trajectory

The report contained a spotlight on Lessons Learnt, Operations Centre, National Cancer Patient Experience Survey, Cancer Waits, Staff Retention, New Papworth ORAC progress report and Cost Improvement Programme.

During discussion the following were noted or considered:

- Overall staff turnover in July reached 30% which was a concern to the Board. Nurse shortages, both contracted and agency, were also a national concern.
- Staff Health and Wellbeing was being monitored in house as staff are working extra to keep capacity up.
- Actions to improve recruitment were being put in place including overseas recruitment. September, October and November would see some new nurses being appointed.
- There was a recruitment event in Cambridge arranged on Tuesday 26 September at the Qube which overlooks the new hospital. The team is hopeful that this will create interest in recruitment to Papworth.
- HR/Recruitment/Nursing teams are meeting together 3 times each week to monitor the recruitment pipeline for nurses.
- Number of days to get through the recruitment process had been reduced from 73 to 54.
- It was also raised in discussion that vacancies were high in Administration and Clerical roles as well as clinical roles.
- The spotlight was also on staff retention with our Recruitment and Retention Strategy currently being updated. The strategy was in the process of being reviewed by the Executive Team and would be rolled out across the Trust after being considered at Performance Committee/Q&R and then Board.
- Exit interviews were in place for leavers.
- It was noted that quality appraisals were a key factor in staff retention.
- The rise in infections was mentioned. RH replied that a root cause analysis (RCA) was carried out on all infections and no common theme had emerged. Actions had been put in place including extra cleaning resources, cleaning kits for IT cleaning as more staff are using PCs in between patient care. Air sampling was also being carried out.
- JW mentioned the need for stringent hand washing and reinforcement of the “uniform” and “bare below elbow” policy.
- RH reported that the Never Event investigation was finalised.
- EM reported that bed usage is assessed on a daily basis. Some beds were not being used due to staff shortages and safety. The capacity on CCU was challenging on a daily basis but some key staff were due to start over the next month.
- Concern was expressed about on the day cancellations and the psychological impact this had on the patient. Some patients were waiting on the wards for surgery prepped and starved all day, before their operation was cancelled. It was felt greater support and clarity was needed for patients in this situation, with greater communication around the fact that the Hospital was waiting as long as possible before feeding patients in the hope their operation could go ahead. The more patients could understand the reason for a late cancellation the better both for the patient and the Hospital.
- The meeting was also informed that operations were being cancelled

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via the booking office not just on the day when patients had been admitted.

- JR reported that there had been 11 complaints in July all based around communication and cancellations, this had reduced to 8 complaints in August. The exceptionally low numbers involved were noted. The Patient Advice and Liaison (PALS) report is reviewed to see what complaints are coming through and the PALS team is resolving issues before they become a complaint in many cases. Complaints are also reviewed at the Governor’s Patient and Public Involvement Committee.
- The Trust was supporting staff with ensuring ways of working with the Lorenzo EPR system that do not detract from having good communication with patients and carers.
- Improved capacity initiatives included looking into a mobile Cath lab which would be brought in fully staffed.
- The backlog of patients on the waiting list was being reviewed particularly those who were over 18 weeks. 700 of these patients were on complex pathways.
- There was a sustained increase in performance in cardiology following the introduction of evening Cath lab lists.
- Did not attend (DNA’s) are 1:10 and this peaked in June and July. Text message reminders are now being sent to respiratory patients as these had the highest rate of DNA patients.
- The process had been agreed and implemented for re-setting the Master Commissioning Programme by September 2017. The terms were signed off by the Department of Health and the Regulators.
- Papworth at Justinian House would be available from June 2018 for staff to start moving into, this move would be phased.
- The move to New Papworth Hospital would take place the last two weeks in September 2018.
- Occupational Health (OH) staff had been consulted with and would move over to a CUH service on 1 October but there would be no change to the service on this site which they would continue to deliver.
- Work on car parking was still in progress.

The Council of Governors was informed that Papworth’s results in the 2016 National Cancer Patient Experience Survey was exceptional with Papworth results being higher than the National average across all areas surveyed. This was a credit to the hard work and dedication of the multidisciplinary team caring for these patients

Noted: The Council of Governors noted the contents of the Papworth Integrated Performance Report (PIPR).

6 Governor Matters

The Council of Governors received a paper from the Trust Secretary that updated it on general Governor matters.

Governor Committee membership

Governors were asked to discuss any requests for changes to Committee membership with the Trust Secretary.

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Governor Committee Minutes

Noted: The Council of Governors noted the minutes from the Appointments Committee 21 June 2017.

Noted: The Council of Governors noted the minutes from the Forward Planning Committee 12 July 2017.

Noted: The Council of Governors noted the minutes from the Patient and Public Involvement Committee 1 August 2017.

Public Board of Director meetings

Governors were reminded that they were invited to attend the Board of Directors meetings. This was another useful training/awareness raising opportunity for Governors. The next meeting was on the 5 October 2017.

Noted: The Council of Governors noted the update on general Governor matters.

7 Questions from Governors: Questions from Governors and the Public – notified to the Trust Secretary in advance of the meeting

Following a question received from Governors in advance of the meeting on Chaplaincy Services at NPH, JR reported that both Chaplains would not be going to the new hospital but had agreed to stay until the move in September 2018. A plan for NPH Chaplaincy provision was not yet finalised but reassurance was given that it would mirror the service as it is now. A sustainable and robust service would be put into place, including, on call service with CUH cover.

The Council of Governors was informed that discussions regarding the national funding of Donors after Circulatory Determined Death Programme (DCD) are ongoing.

Date of Next Meeting: Wednesday 15 November 2017

The meeting closed at 11.40 am on Thursday 21 September 2017

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Signed

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Date

**Papworth Hospital NHS Foundation Trust
Council of Governors**
Meeting held on 21 September 2017