

**MINUTES OF A MEETING OF THE BOARD OF DIRECTORS
 HELD VIRTUALLY IN PUBLIC ON 4 MARCH 2021 AT 9.30 AM,
 BY MS TEAMS**

Present:

Voting Directors

Liam Coleman (LC) (Chair)	Chair
Lizzie Abderrahim (EKA)	Non-Executive Director
Nick Bishop (NB)	Non-Executive Director
Andrew Copestake (AC)	Non-Executive Director
Tracey Cotterill (TC)	Interim Director of Improvement & Partnership
Charlotte Forsyth (CF)	Medical Director
Jude Gray (JG)	Director of HR
Peter Hill (PH)	Non-Executive Director
Paul Lewis (PL)	Non-Executive Director
Julie Marshman (JMa)	Chief Nurse
Kevin McNamara (KM)	Chief Executive
Jemima Milton (JM)	Non-Executive Director
Julie Soutter (JS)	Non-Executive Director
Simon Wade (SW)	Director of Finance & Strategy

In attendance

Helen Brown	Lead Palliative Care & End of Life Nurse (agenda item 392/20 only)
Caroline Coles	Company Secretary
Tim Edmonds	Head of Communications and Engagement
Amanda Fox	Deputy Chief Operating Officer
Louise Simmons	Junior Sister, Beech Ward (agenda item 392/20 only)
Helen Winter	Head of Quality (agenda item 392/20 only)

Apologies for Absence

Jim O'Connell (JO)	Chief Operating Officer
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Number of members of the Public: 7 members of public (including 6 Governors; Arthur Beltrami, Chris Shepherd, Roger Stroud, Maggie Jordan, Janet Jarmin and Ashish Channawar)

Matters Open to the Public and Press

Minute	Description	Action
385/20	<p>Apologies for Absence and Chairman's Welcome The Chair welcomed all to the virtual Great Western Hospitals NHS Foundation Trust Board meeting held in public.</p> <p>Apologies were received as above.</p>	
386/20	<p>Declarations of Interest There were no declarations of interest.</p>	
387/20	<p>Minutes The minutes of the meeting of the Board held on 4 February 2021 were adopted and signed as a correct record with the following amendments:-</p>	

Minute	Description	Action
	<p><u>357/20 : Chair's Report / Governor Development</u> - Change work 'interrupting' to 'interpreting'.</p> <p><u>358/20 / Chief Executive's Report</u> - Add to the last paragraph "<i>In relation to the item concerning staff support Lizzie Abderrahim, Non-Executive Director advised that she had attended the NHSE/I launch event for the Wellbeing Guardian role at which Boards were urged to take a more preventative approach to the matter of staff wellbeing. There followed a discussion.....</i>".</p> <p>360/20 / Use of Resources – Change 10th paragraph 1st bullet point to "The <i>year-to-date</i> position was £130k <i>better than</i> plan", and the 2nd bullet point "The Trust's in month position was £71k <i>better than</i> plan".</p>	
388/20	<p>Outstanding actions of the Board (public) The Board received and considered the outstanding action list and noted that:-</p> <p><u>359/20 / Board Well-being Guardian</u> - This action would be discussed at the next Non-Executive Director (NED) meeting on 17 March 2021.</p>	
389/20	<p>Questions from the public to the Board relating to the work of the Trust There were no questions from the public to the Board.</p>	
390/20	<p>Chair's Report, Feedback from the Council of Governors The Board received a verbal update which included:-</p> <p><u>Public Health Talks</u> - A successful virtual public health talk was held in February 2021 on the Menopause with well over 100 attendees. Dr Griffiths was thanked for presenting at this event.</p> <p><u>Council of Governors</u> - A meeting of the Council of Governors was held on 18 February 2021 which included a presentation on Equality, Diversity and Inclusion together with approval of the recruitment and re-appointment of Non-Executive Director roles.</p> <p>The Chair added that it was with great sadness to advise the untimely death of one of our governors, Enam Chowdhury who had been enormously supportive over a number of years both to the Trust and to the wider community. He was particularly a strong supporter during the Pandemic in supplying meals from his restaurant to staff and on behalf of the Board and Governors wished to record our condolences and recognition of his contribution to his family.</p> <p>The Board noted the report.</p>	
391/20	<p>Chief Executive's Report The Board received and considered the Chief Executive's Report and the following was highlighted:-</p> <ul style="list-style-type: none"> • The updated position with regard to Covid, which indicated a significant reduction in bed occupancy due to Covid since the last Board meeting. The focus would now shift to recovery. • Thanks and praise was given to the small Infection, Protection and Control team 	

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	<p>who had been incredible over a long period of time in managing any outbreaks as well as supporting flow through the hospital.</p> <ul style="list-style-type: none"> • On 11 March 2021 was the 1 year anniversary of the first covid patient and the Trust would mark this by a number of events in particular a memorial service to remember those lost. • CQC had carried out a full inspection of our Primary Care services. Although no formal feedback had been received as yet the Trust were hopeful that the CQC would recognise the significant improvements made since the Trust agreed to take on these services in November 2019. • The vaccination programme was still on-going and the Trust's great achievement in reaching 27,000 jabs. • The progress in terms of the Way Forward Programme with regard to the approval of the land purchase which would accommodate new services. It was recognised that despite the restrictions caused by the pandemic over the last year staff, construction teams and partners continued to work across this challenging period to allow service development projects to continue and progress which was a positive step for Swindon and the surrounding area. <p>The Board noted the report.</p>	
392/20	<p>Patient Story <i>Helen Brown, Lead Palliative Care & End of Life Nurse, Louise Simmons, Junior Sister, Beech Ward and Helen Winter Head of Quality joined the meeting for this item.</i></p> <p>The Board received a presentation which centred on end of life and a patient's wishes to be at home with their family. The story highlighted the commitment from staff in order to make this happen, the processes involved which were turned around at a fast pace, within 4 hours, and multidisciplinary team working across the health community</p> <p>The Board reflected on the story and recognised the importance not only to the patient but also to family members and this was a fantastic testament to the compassion and empathy of the staff involved.</p> <p>There followed a discussion on how any learning could be applied and what additional support the Board could give so that more patients experienced this choice. It was recognised that training was key for all staff together with and support for end of life care in the community.</p> <p>The Board thanked Helen and the team for such an inspiring and powerful story.</p> <p>The Board noted the patient story.</p>	
393/20	<p>Integrated Performance Report The Board received and considered the Integrated Performance Report (IPR) which provided commentary and progress on activity associated with key safety and quality indicators in December 2020/January 2021.</p> <p>Part 1 : Our Performance</p> <p>Performance, People and Place Committee Chair Overview The Board received an overview of the detailed discussions held at the Performance, People and Place Committee around the IPR at its meeting on 24 February 2021 and</p>	

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highlighted the following:-

Emergency Access – Assurance rating green. It was recognised that performance was not achieving the national standard, in line with other trusts, however the Trust now ranked 14th in terms of performance in the country despite the challenges being faced.

Cancer - Assurance rating amber. This was mainly due to the challenges within the breast service due to increased demand, COVID restrictions, consultant sickness together with some challenges with the Tertiary centre. It was recognised that improvement would be seen over the next 2-3 months.

Vaccination Programme - Assurance rating green. The Trust was leading and delivering an excellent and highly regarded programme.

Equality, Diversity and Inclusion (EDI) Priorities - Assurance rating green. The Committee were suitably assured from a presentation from the new EDI Lead on the priorities for 2021/22.

IT - Assurance rating green. There were a number of key developments presented to the Committee which were positively received.

The Board received and considered the Operational Performance element of the report with the following highlighted:-

Emergency Department/ 4 Hour Access - Performance against the 4 Hour Access standard had improved from 81.5% to 86.14%, however continued to be below the 95% standard. Daily 'Criteria to Reside' calls continued to focus on unblocking any delays to discharges and provided support to wards to identify earlier 'Golden Patients'. Covid-19 admissions to the Trust increased significantly in January 2021 and on 13 January 2021, the Trust declared a critical incident.

Cancer Performance - Plans were in place to address the challenges experienced within the breast service due to increased demand, COVID restrictions, and consultant sickness, together with some challenges with the Tertiary centre.

Referral to Treatment Time (RTT) - Overall, the Trust's RTT Incomplete Performance for December 2020 was 67.04%, which was an improvement of 0.34% in month. December saw referrals at 92% of the prior year. For the first time in 3 months, the Patient Treatment List (PTL) had increased in size (196).

Diagnostics - The diagnostic waiting times, DM01 performance, saw a slight decline to 61.5% in December compared to 62.5% in November 2020.

Stroke - The Trust continued to maintain SSNAP Level B performance. Q2 improved further on Q1 performance (73.1% v 77.9%) and Q3 was predicted to continue within Level B performance despite increasing pressure on stroke beds in December 2020.

The Chair asked how confident was the operational team in being able to take back control of the elements of the hospital which had seen a number of changes to the way the Trust normally operated during the pandemic, in order to cope with conditions other than covid. Amanda Fox, Deputy Chief Operating Officer replied that the team were very aware of what actions were required and robust and clear plans were in place for

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recovery, including different ways of working and learning from the pandemic.

Paul Lewis, Non-Executive Director wished to thank the team for adding the data quality rating to all the matrix within the Board pack and also acknowledged the work that was being undertaken behind the scenes to progress the data quality agenda.

Peter Hill, Non-Executive Director added that the Trust was well placed for recovery and lessons learnt however a word of caution to manage expectations of both the Board and Council of Governors in that there was a long road to recovery from this Pandemic and to be patient.

A discussion followed on embedding the new ways of working to improve patient discharges which were key to elective recovery not only within the hospital but with external partners for out of hospital issues.

Part 2 : Our Care

Quality & Governance Committee Chair Overview

The Board received an overview of the detailed discussions held at the Quality & Governance Committee around the quality element of the IPR at the meeting held on 18 February 2021 and the following highlighted:-

Patient Advice & Liaison Service (PALS) - Assurance rating green. Response times to complaints had improved. The Friends & Family Test (FFT) had seen significant progress in responses in those areas where texting has been implemented.

Sharps Injuries - Assurance rating amber. The total number of reported sharps injuries had remained static since 2017. This disproportionately involved medical staff with commonest reasons related to syringe/needle combination and IV cannulae. A ten-point action plan was being implemented, targeting those most at risk.

Andy Copestake, Non-Executive Director asked if there was a real concern with regard to sharp injuries. It was noted that sharps were used safely however the real concern was that the expectation was for continual improvement and this had plateaued over the past 3 years. Further data was also required in the differences between 'dirty' sharp injuries and 'clean' ones

Infection Prevention & Control Board Assurance Framework (BAF) - Assurance rating green. The Committee were assured by the Trust's performance and the assessments against standards. These were almost all green with some amber and no red. It was noted that the amber ratings did not imply non-compliance.

Ockenden Review - Assurance rating green. In the main the report showed RAG ratings as green or amber with good compliance. Some red ratings were the result of requirements that would need substantial funding and resources to be complaint. Notable was the need to recruit more midwives and obstetricians, which was a national issue due to insufficient numbers of trained staff available to recruit.

Julie Soutter, Non-Executive Director asked if there was any update in terms of a system wide approach to address the 7-day working and staff shortages as referred to in the Ockenden report. Julie Marshman, Chief Nurse replied that these challenges were being looked at by the Local Maternity System (LMS) who were pulling together a

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regional response to go to the national chief midwife.

The Board received and considered the Quality element of the report with the following highlighted:-

Pressure Ulcers - A Pressure Ulcer Improvement Programme launch day was held on 4 March 2021, with all divisions and professions represented. This was in response to the deteriorating position in the number of reported pressure ulcers.

Falls - The Quality Improvement Programme to improve falls was progressing well with the anticipation of moving from an amber assurance rating to green in the near future.

Ockenden Report - A new slide had been inserted to meet the requirements for Board reporting in response to the Ockenden Report. This new quality surveillance model sought to provide consistent oversight of maternity and neonatal services. The on-going learning and insight would help to inform improvements in the provision of perinatal services.

Julie Soutter, Non-Executive expressed concern in the reporting of 12 incidents due to the failure to follow procedure especially given some discussions in the past around this failure, and asked what was planned to address this. Julie Marshman, Chief Nurse replied that lots of work was being undertaken by the Deputy Chief Nurse and a full report would be presented at the next meeting of Quality & Governance Committee

Action : Chief Nurse

JMa

Part 3 : Our People

The Board received and considered the workforce performance element of the report with the following highlighted:-

- The report was similar to previous months except for the backdrop of a critical incident pressure which put significant pressure on the workforce.
- The vacancy rate was stable however agency spend, back fill rates and sickness created significant pressures in certain areas.
- In April 2021 the Nurse Agency contractual arrangement would move from a Master Vend to a Preferred Supplier List increasing opportunities to fill nurse agency at a lower rate.
- Divisions continued to review and monitor their Mandatory Training compliance monthly and highlight any areas of concern regarding reporting to the Academy. The Academy continued to work on the project to move Mandatory Training modules from training tracker to ESR to improve accuracy of compliance.
- The indicator score continued to be 1 for January 2021, driven by the appraisal rates for the Trust of 70.43% against a KPI of 85%. A paper proposing a simplified appraisal process was considered by Performance, People and Place Committee in January 2021 and would be rolled out in the coming months.
- The Leadership Development Programme (cohort 1) would restart on the 24 February 2021 after a short pause, with cohort 2 commencing in April 2021.

Charlotte Forsyth, Medical Director highlighted an error in the chart representing the medical appraisal compliance which looked worse than it should as medical appraisals were now up and running and were closely monitored.

Part 4 - Use of Resources

Finance & Investment Committee Overview

The Board received an overview of the detailed discussions held at the Finance & Investment Committee around the financial element of the IPR at the meeting held on 22 February 2021 and the following highlighted:-

Impact of Bank Incentive Scheme - Assurance rating green. A very good paper was received on the impact of the incentive scheme introduced to raise bank fill rates and therefore reduce reliance on Agency nurses. The Committee agreed with the recommendations, including the proposal to end the scheme from the end of February 2021 and to introduce a more targeted scheme in the future.

Forecast Capital Expenditure position - Assurance rating amber. There was still a significant challenge to increase the rate of Capital expenditure and meet the forecast, however the Committee was assured that every effort was being made to do this or to retain funding into 2021/22 where it is not possible to spend the money this financial year.

Exit run rates and business planning - Assurance rating red. There was still no central guidance on the finance regime that would be in place after Q1 2021/22. Work had been on-going to understand pay and non-pay run rates as the Trust exits 2020/21. These, combined with non-achievement of CIP this year, had resulted in a significant increase in the Trust's underlying deficit. In addition, there would be a significant challenge to reduce the cost base associated with Covid in 2022. The Executive team was on top of the issues but the lack of central guidance for the remainder of 2021/22 represented a significant problem.

Procurement update – Assurance rating amber. The Committee noted the quarterly report on procurement. Whilst the performance of the procurement team remain strong, the amber rating related to the Committee's request for a review of the procurement process to learn lessons from recent procurements, to differentiate between strategic procurements and others, and to see whether local procurement could be reflected in the criteria for future procurements.

The Board received and considered the Financial Performance element of the report with the following highlighted:-

- Cash support for Q1 had been confirmed from NHSE/I.
- In terms of business planning national guidance would be published mid-March 2021 however it had been indicated that the financial framework would see a block contract extension to that currently in place for the 1st half of the year 2021/22.
- The Trust in month position was £508k deficit against a plan of £882k deficit which was £374k favourable variance.
- The year-to-date (YTD) position was £1,812k deficit against a plan of £2,316k which was £504k favourable variance.
- Income variance was £1,183k above plan in month and £2,411k above plan YTD. The majority of this was NHS Clinical income matched by costs and related to in month income for Hospital Discharge Programme, Lateral Flow Testing and specialist high cost drug adjustments.
- The Elective Incentive Scheme had been suspended and would only apply to the last 5 months of the year.

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	<ul style="list-style-type: none"> • Increase in pay was due to the vaccination programme incurred staffing costs which were not budgeted however the costs would be recovered through central funding. • Non pay was overspent in-month due to additional charges from the PFI provider. • It is anticipated that the Trust would achieve the year end forecast. • A significant amount of work was being undertaken in February/March 2021 to achieve the capital plan; however there would be some retained funding into 2021/22 where it was not possible to spend the money this financial year which mainly related to the Way Forward Programme. <p>Nick Bishop, Non-Executive Director asked if any extra charges were being applied at delivery as a result of Brexit. Simon Wade, Director of Finance confirmed that the Trust had not seen any additional charges as a result of Brexit.</p> <p>Kevin McNamara, Chief Executive highlighted the progress the Trust had made over the past year in respect to Public View data. Overall the Trust's performance had been very strong as in March 2020 the Trust were ranked 87th out of 123 trusts, and in March 2021 had moved to 48th out of 123 trusts. This was the first time the Trust had moved into the top 50. We were also one of the 8 most improved trusts. Paul Lewis, Non-Executive Director added that a one-page summary would be useful to compare, track and learn progress.</p>	
	<p>Action : Chief Operating Officer</p> <p>RESOLVED</p> <p><i>to review and support the continued development of the IPR and the on-going plans to maintain and improve performance.</i></p>	JO
394/20	<p>Chair of Charitable Funds Committee Overview</p> <p>The Board received an overview of the discussions held at the Charitable Funds Committee at the meeting held on 10 February 2021 and the following highlighted:-</p> <ul style="list-style-type: none"> • Covid had impacted on the ability to hold physical events and therefore difficult to promote Brighter Futures. • Income was similar to last year however this was due to monies from "NHS Charities Together". • There was one concern raised around Brighter Futures paying the whole salary of the Director of Fundraising & Voluntary Services. The restructure had been agreed by both Performance, People and Place Committee and Charitable Funds Committee in November 2020, but not the division of costs. 	
	<p>Action : Director of HR</p> <p>The Board noted the report.</p>	JG
395/20	<p>Chair of Mental Health Governance Committee Overview</p> <p>The Board received an overview of the discussions held at the Mental Health Governance Committee at the meeting held on 22 January 2021.</p> <p>There followed a discussion with regard to the concern over the chronic lack of specialist Children and Adolescent Mental Health Services (CAMHS) beds which hindered the ability of the Trust to provide effective care to children in their care and was a gap in assurance and one out of their control. It was also recognised this was</p>	

Minute	Description	Action
	<p>not an isolated Swindon issue and was part of a wider concern around children's mental health and should be addressed through the BSW system. In light of this, it was agreed that the Chief Executive and Chair would raise this through the relevant BSW committees to ensure a system wide approach.</p> <p>Action : Chair & Chief Executive"</p> <p>The Board noted the report.</p>	
396/20	<p>Armed Services Community Covenant Agreement</p> <p>The Board received and considered a paper that outlined the refreshed approach to support veteran and reservist Armed Forces communities with a recommendation to commit to a refreshed agreement with regard to the Armed Services Community Covenant Agreement and further exploration of becoming a member of the Veteran Covenant Health Care Alliance.</p> <p>The Board were fully supportive of the refreshed approach with the following agreed:-</p> <ul style="list-style-type: none"> • Feedback to Swindon Borough Council around the signatory page. • Monitoring and oversight to be undertaken through the Performance, People and Place Committee. • Guidance to be produced for users. • Indicate support across a wider patch to incorporate Wiltshire. <p>RESOLVED</p> <p><i>to support the recommendation to sign the Swindon Armed Forces Community Covenant agreement and the associated actions as recommended.</i></p>	
397/20	<p>Ratification of Decisions made via Board Circular/Board Workshop</p> <p>The Board was asked to ratify two Board Circulars which had been approved since the last Board meeting:-</p> <ul style="list-style-type: none"> • The contract for the provision of Linen & Laundry Services • PDC Drawdown – Expansion Land Purchase. <p>The Board was also asked to approve one Board Circular which had been circulated prior to the Board meeting:-</p> <ul style="list-style-type: none"> • Contract for the Capital Purchase of Radiology equipment - Single-Photon Emission Computed Tomography / Computed Tomography. <p>RESOLVED</p> <p><i>(a) to ratify the contract for the provision of the linen and laundry services;</i></p> <p><i>(b) to ratify the PDC drawdown for the expansion land purchase; and,</i></p> <p><i>(c) to approve the contract for the purchase of Single-Photon Emission Computed Tomography / Computed Tomography.</i></p>	

Minute	Description	Action
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398/20 **Urgent Public Business (if any)**

Chief Nurse

The Chair wished to formally thank, on behalf of the Board and Governors, Julie Marshman, Chief Nurse for her incredible support, commitment and dedication over the past 38 years of service to the NHS. Julie was retiring at the end of the month.

399/20 **Date and Time of next meeting**

It was noted that the next virtual meeting of the Board would be held on 1 April 2021 at 9:30am via MS Teams.

400/20 **Exclusion of the Public and Press**

RESOLVED

that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity of which would be prejudicial to the public interest.

The meeting ended at 1643 hrs.

Chair

Date.....