

MINUTES

Council of Governors' Meeting Part I

Held on Wednesday 19 June 2019 at 10.30am
Level 1 Seminar Room
Royal Papworth Hospital

Present:			
Michael Blastland (NED)	Chair		
Janet Atkins (JA) Stephen Brown (SB) Glenn Edge (GE) John Fiddy (JF)	Public Governor Public Governor Public Governor Public Governor	Trevor McLeese (TMcL) Peter Munday (PM) Katrina Oates Harvey Perkins (HP)	Public Governor Staff Governor Staff Governor Public Governor
Gill Francis (GF) Robert Graham (RG) Richard Hodder (RHo) Keith Jackson (KJ)	Public Governor Public Governor Lead and Public Governor Public Governor	Helen Rodriguez (HR) Bob Spinks (BS) Lorraine Szeremeta	Staff Governor Public Governor Appointed Governor
Graham Jagger (GJ) Cllr Linda Jones (LJ) Cllr Alex Malyon (AM) Simon Marner (SM)	Public Governor Appointed Governor Appointed Governor Public Governor		
In Attendance			
Roy Clarke (RC) Cynthia Conquest (CC) Roger Hall (RH) Anna Jarvis (AJ) Eilish Midlane (EM)	Chief Finance Officer NED Medical Director Trust Secretary Chief Operating Officer		
Oonagh Monkhouse (OM) Stephen Posey (SP) Josie Rudman (JR) Julie Wall	Director of Workforce Chief Executive Chief Nurse PA (Taking Minutes)		

Apologies – Governors Barry Crabtree-Taylor (BCT) Penny Martin (PM) Tony Moodey (TM) Cheryl Riotto (CR) Alessandro Rugeiro (AR) Tony Williams (TW)	Public Governor Staff Governor Public Governor Staff Governor Staff Governor Staff Governor	Apologies - Others	Professor John Wallwork Chairman (JW) Caroline Edmonds (CE)
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**Agenda
Item**

Please note the Minutes reflect the order of the Agenda not the order of discussion

Action by whom	Date by when
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1 Welcome, apologies and opening remarks

Michael Blastland chaired the meeting in the absence of the Chairman. He opened the meeting and apologies were noted.

Richard Hodder Lead Governor welcomed Lorraine Szeremeta, Cllr Alex Malyon and Cllr Linda Jones.

2 Declarations of Interest

No new declarations of Interest to report

3 Minutes of Previous Meeting and Matters Arising

Minutes of the meeting held 20 March 2019

The Minutes from the meeting held on 20 March 2019 were approved and authorised for signature by the Chairman as a true record.

Matters Arising

- The new postcode had been approved
- The signs for the old hospital had been taken down
- Governors welcome to attend Board Meetings
- Agenda to be circulated for Board Meetings to Governors
- Official opening will be 9th July and SP will confirm the VIP who will be attending next week to the Governors

4 Royal Papworth Integrated Performance Report (PIPR)

The Council of Governors received the Royal Papworth Integrated Performance Report (PIPR) which reported performance as at **Overall performance rating of Amber.**

Favourable performance

Safe: Safer Staffing-The overall safe staffing fill rate for registered nurses was green. In some wards, days and nights fall short of the desired 90% fill rate that we aim for however Care Hours Per Patient Day (CHPPD) levels remain healthy.

Caring: Friends and Family Test (FFT) –remains green for inpatients (96.7%) and outpatients (97.9%).

Responsive: 1) Cardiology RTT: Cardiology has continued to reduce the total number of patients waiting for treatment and reduce the breaches of the 18 week standard. Performance was delivered at 94.72%, the third successive month of delivering the target and 2.29% ahead of trajectory. 2) Theatre cancellations: There was a significant reduction in theatre cancellation in month 1 but this is primarily linked to the activity ramp down plan.

Finance: The Trust's year to date (YTD) position is a deficit of £0.8m both on a Control Total basis excl. land sale and a net basis. This is favourable

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to plan by £0.5m.

Adverse performance

Caring: The percentage of complaints responded to within agreed timescales is reported retrospectively in month, with April data reflecting March compliance. Two of the six complaints received in March missed the deadline for response during April. This was a reflection of the operational and clinical challenges brought by the hospital move at the end of the month.

Effective:

- 1) Bed occupancy dropped in month 1, to the lowest level since December 2018. This was as a result of the planned ramp down in activity following the Easter bank holiday in preparation for the move. In line with the ramp down plan, elective activity was constrained for a period of 10 days prior to the move and treatment of emergency cases became the focus.
- 2) Same Day Admissions – Thoracic SDA dip below target can be attributed to a number of ad hoc short notice lists to accommodate the increased number of cancer patients converting to surgery and the movement of patients to avoid breaches.

Responsive:

- 1) Surgery RTT: Whilst Surgery there was a reduction in RTT performance in April, the service still remains ahead of trajectory by 2.49%. The reduction was a direct result of the restriction of capacity as part of the ramp down plans and ongoing demands for the prioritisation of IHU patients.
- 2) IHU Surgery –Performance remains far below acceptable levels again the national standard of surgery performed within 7 days of acceptance for treatment but few patients fit for treatment wait beyond 10 days.

People, Management & Culture: Staff Turnover –

- 1) Total turnover increased to 24.43%. Nursing turnover was static from March with 7.9 wte leavers.
- 2) Vacancy rate – We were a net loser of staff by 16.1 wte in April. The administrative and clerical staff group had the largest number of leavers and there were also 4 wte portering staff whose contract ended as part of the relocation. There were low numbers of starters across all staff groups. This is linked to the move date in April as new appointees have been reluctant to start this close to the move. The number of starters returns to normal levels in May.
- 3) Mandatory training - Mandatory training compliance decreased to 74.4%. This reduction is due to a low level of compliance in four competencies where the requirements have changed since March. More detail is provided in Key Risks and Challenges.

Looking ahead

Operational readiness – Following the Go decision the hospital move has taken place successfully, in accordance with the daily schedule. The first patient day went ahead as planned on 1st May 2019 followed by a shorter than anticipated double running period. This was due to all inpatients being transferred from the old hospital in one day on Saturday 4th May 2019. Outpatients opened to patients on 7th May 2019.

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NPH Design, Construction & Enabling Works:

Design and construction activities were completed, with the building handed over and commissioned for use. Occupation commenced in late April and completed early May, in accordance with the previously agreed move programme. Any remaining construction activity related to Small Works Requests or programmed or reactive maintenance tasks. FM Services have mobilised; some issues being experienced during the remaining bedding in period, which have been escalated to the PFI Project Company and a Services Remedial Action Plan requested. Additional resources are being applied to ensure performance improvement. Decommissioning of the former site commenced alongside the move process, with site security increased in line with reduction of onsite activity

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

5 Governor Matters – Richard Hodder, Lead Governor

General including:

a) Governor Committee membership

Anna Jarvis reported that there was full complement of all committee's Also, Elections were coming up: There were elections in seats in all areas, Norfolk, Cambs and Suffolk. The nominations process for all was due to start soon.

b) Minutes of Governor meetings

Noted: The Council of Governors noted the minutes of the following meetings:

- Access & Facilities Group:
- Governor Assurance Committee:
- Forward Planning Committee: 17 April 2019
- Fundraising Group: 11 March 2019
- PPI:

6 Clinical Presentation: Healthcare Science at RPH – Karl Sylvester

Karl explained that there are four domains within the service. The four being Physiology, Life Sciences, Cardiology and Physical Sciences. He explained that although there was 5% Workforce they diagnosed 80% of patients. Karl showed his presentation about the services and of staff explaining their roles.

Noted: The Council of Governors noted the Presentation

7 CQC Inspection Update

SP reported the registration visit went very well with no hitches. The CQC were very pleased with that visit.

The Inspectors are on site today for the core inspection and SP was due to get the feedback at 4.30 this afternoon. No concerns had been raised at this stage.

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RH was interviewed by the CQC and three Governors.

The CQC are due back for Well Led inspection on 25th and 26th July 2019.

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Strategy Update

Reported by SP: That during 2019 we have been developing our new five-year Strategy for 2020 – 2025. Now that we have moved into our new home on the Cambridge Biomedical Campus, we are looking to set the direction of travel for our services and our organisation into the future. We want to explore how Royal Papworth Hospital can best play a role which is valuable, and valued, in all the systems we work in. We want to position ourselves in a way which is supportive and complementary to the work of others to establish effective, efficient patient pathways and services.

We want to fully unlock the potential of our special expertise and skills, harnessed to the capabilities of our new facilities and digital infrastructure, for the benefit of the entire health system and the patients we care for. We want to do all this while continuing to offer excellent quality of outcomes and care, be a great place to work, and remain financially robust.

The foundations of our strategy were laid in 2018 and early 2019, with a series of Clinical Vision workshops involving all our Directorates. We are now following a structured strategy development process in four phases. In the first phase we reviewed the environment within which we are working, and at a workshop in March we identified five “Big Questions” to address. They are:

1. Role in Pathways: What part can and should we play in the overall clinical pathways; and how can we do it?
2. Service / Education / Research: How do we ensure that service, education and research are (a) balanced; (b) embedded; (c) synergised?
3. Focus and Priority: If “we can’t be world leaders in everything”, then what areas should we focus our attention on?
4. Reputation Potential: How can we (and should we) maximise our brand and reputation nationally and internationally?
5. Campus and Digital: How do we get most benefit from our new facilities, campus and digital capability?

Since then, five working groups drawn from across the organisation have been giving thought to those five questions, and their initial conclusions will be discussed with the Board and clinical leaders at a second workshop on Thursday 6 June. After that, we hope that every Directorate will get involved in developing its strategy for the future – we will be talking in the June workshop about how that can happen most effectively and what support will be needed.

Noted: The Governors noted the update on the Strategy development for 2020-2025.

9

Questions from Governors and the Public sent to the Trust Secretary in advance of the meeting

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What is happening with the old site?

SP – This is still embargoed. This will be shared as soon as the contracts are exchanged. The site is still being used by police and fire service for training purposes.

10 Royal Papworth Garden Party

SP would like to remind everyone about the garden party being held at RPH on the 27th June 2019 to thank all staff for their help with the move.

11 Date of Next Meeting: 18 September 2019

The meeting closed at 12:00

SIGNED: 

DATE: 18 September 2019

**Royal Papworth Hospital NHS Foundation Trust
Council of Governors Meeting
Wednesday 19 June 2019**