

DRAFT MINUTES**SOUTHAMPTON & WEST HAMPSHIRE ISD BOARD****MONDAY 21ST JULY 2014**

**Please note: these minutes must be read in conjunction with the
ISD Board Report referred to in Item 3**

Present:

Chris Ash (Chair), (CA)	ISD Director, Southampton & West Hants
Laura Rothery, (LR)	Deputy ISD Director, Southampton & West Hants
Paula Hull (PH)	Head of Professions
Liz Skeats, (LS)	Strategic Business Partner - Workforce
Rob De'Ath (RD)	Head of Business Management
Jane Williams, (JW)	Clinical Programme Director
Susanna Preedy (SP)	Deputy Head of Professions
Julia Lake (JL)	Deputy Head of Professions
Dr Gill Turner (GT)	Clinical Advisor
Dr Juanita Pascual (JP)	Clinical Service Director
Tom Westbury (TW)	Comms Manager

Jane Emmison (JE)

Notetaker

Item	Subject	
1	Administration	
	The chairman welcomed everyone to the meeting. He welcomed Dr Juanita Pascual as the new Clinical Services Director	
	Apologies were received from Dan Pearce, Faye Prestleton, Charles Penfold	
	Minutes of previous meeting were accepted and the action tracker updated.	
2	Patients Story	
	Barry Edwards, Senior Practitioner and Alison Charnock, CM, attended the meeting and discussed the journey of a 87 year old patient at Romsey and how, by working together and involving other people the gentleman was assessed and had his needs met in an integrated way.	
	A synopsis of the story and actions arising from the discussion to be included in the next Quality, Governance & Professional Standards Report.	

3	Performance	
	<p>CA presented his report to the ISD Board.</p> <p>CA informed the ISD Board that he had spent a day at Lymington and found it very interesting and informative. He stayed for the twilight shift and observed the staff were spending an excessive amount of time travelling between visits. A formal review of the situation was agreed which will lead to formal discussions with Commissioners</p> <p>CA confirmed the appointment of Dr Juanita Pascual and Dr Peter Hockey as Clinical Services Directors. Dr Pascual will be working three sessions on a strategy focus on a community services and long term conditions covering the Southampton Mid West geography. Dr Hockey will work two sessions with a focus on in-patient and planned care covering the West New Forest. Associate CSD's will be appointed by Juanita and Peter to cover the remaining sessions. Both will be working alongside the heads of service and Head of Nursing and Allied Nursing professionals</p> <p>CA confirmed the winter pressure bid had been submitted and he expressed the Boards thanks to the team for all the extra work they had undertaken. LR agreed to circulate details of the bid to relevant members of the ISD Board together with a schematic of all system projects.</p> <p>PH confirmed the tracker was being monitored by the Learning First Group with exceptions to be reported to the ISD Board in future months</p> <p>The adequacy of current reporting was debated and it was felt that the exceptions report needed to be set up against a numerical context for certain issues. The DPR reporting will therefore be updated to include relevant stats.</p> <p>Current performance against access standard was discussed with acknowledgement that issues varied for specific specialties. The most significant issues are process efficiency, (notably admin and booking), excess demand and workforce supply (eg Southampton inter-trust and out patient therapists). CA requested that a report with detailed profiles of RTT waits be prepared for the next ISD meeting</p> <p>Current underperformance against the CIP trajectory was discussed and it was agreed that the least understood components sat within the ways of working and procurement workstream. CP asked to produce an evaluation against both of these areas for the next ISD Board meeting.</p> <p>The locality reports were discussed. It was agreed that the reports were improving but that to provide assurance they needed to become more succinct and analytical detailing the cause and proposed remedy of items of exception.</p> <p>CA confirmed to the ISD Board that the North Hants Division had been handed over to the ISD East and going forward information pertaining to performance in this area would be handled by the Governance process in the East.</p>	<p>LR</p> <p>LR</p> <p>LR</p> <p>PH</p> <p>RD</p> <p>FP</p> <p>CP</p>

4	Reporting	
	<p>Quality, Governance & Professional Standards Report (QGPSR)</p> <p>PH presented the report, she confirmed that the TOR and membership were being agreed for the Learning First Group that would support the function in the Divisional Quality Safety Meeting.</p> <p>Clinical quality in integrated teams was discussed. PH explained that two Putting First Accreditation meetings had now been held for the New Milton teams and despite progress, she could not provide assurance that improvements were taking place quickly enough, SP/JL are working on an action plan and a development day for staff was also being talked about. Progress against this will be reported to the ISD Board by PH in the QGPSR.</p> <p>The sufficiency of business intelligence to support business in the quality team was debated by the ISD Board. GT asked if it was possible to develop improved dashboards and CA confirmed that this was within the scope of the Corporate Business intelligence project and associated procurement that is currently taking place. It was agreed that Simon Beaumont or a member of his team be invited to the senior staff network meeting to present all of the information.</p> <p>PH alerted to the ISD Board to a recent increase in falls with community hospitals, notably Lymington and confirmed that a structured investigation was taking place. This issue will be reported back to the ISD Board through the QGPSR.</p> <p>Further to discussion at the June ISD Board SP confirmed that the therapy referral deep dive was underway, with a meeting arranged for the end of the month to analysis the findings and plan the necessary actions. Findings will be presented in the next QGPSR.</p>	<p>PH</p> <p>CA</p> <p>PH</p> <p>PH</p>
	<p>Workforce Planning Report</p> <p>LS presented the report. The issue of vacancies was discussed and it was confirmed there was a rolling open advert for Lymington. She confirmed the division was 86.9% compliant for appraisals</p> <p>CA asked that the heads of professions work with the service managers to validate budgeted and actual ESR positions.</p>	
	<p>Strategic Finance & Infrastructure Report</p> <p>It was agreed that CA would approach the CCG to institute regular meetings to discuss open book accounting and problem solving for issues relating to transformation and sustainability. This will require the initial process established around the transformation committee to be fully serviced by those with accountability for schemes.</p> <p>Service managers and scheme leads to ensure that completed PIDs are in place for transformation schemes with up to date checkpoint reports.</p>	<p>CA</p>

	RD and CP to provide a one page note describing progress and risk across the entire CIP plan.	RD/CP
Reporting		
	<p>Quality Improvement Plan – Julia Lake</p> <p>JL presented this initial assessment and quality improvement plan for Lymington Hospital. This section of the minutes should be read in conjunction with the study presented at the meeting.</p> <p>JL outlined a number of areas for high priority quality improvement actions and the Board noted that most were underpinned by cultural change. GT requested that medical staff be fully involved in the workup and delivery of the improvement plans.</p> <p>Reference was made to during the presentation to a recent whistleblowing case from Lymington Hospital and JW agreed to present an overview at the next Patient Story slot.</p> <p>Delayed transfers of care report - Sarah Olley</p> <p>A paper brought by SO outlined the recent improvements to the management of patient flow and inpatient delays was presented and the ISD Board commented on both action to date and planned developments.</p> <p>GT felt that a more robust approach to TQ at Home could be beneficial.</p> <p>FP was asked to explore the TQ at Home utilization with the West New Forest Team.</p> <p>Sub letting Proposal of UHS – Lymington – Sarah Olley</p> <p>A paper was presented setting out the option for the ISD to sublet capacity at Lymington hospital to UHS for the delivery of two week wait cancer activity. PH felt that given the recent SRI investigation outcomes (not least the ophthalmology SRI) there was insufficient details to clarify ownership liability and mitigation of risk. The decision on progression of this opportunity was delegated to the West New Forest Leadership team and FP asked to bring an outline recommendation back to the ISD Board in August for ratification.</p> <p>It was also noted that engaging NHS PropCo in formally varying the lease to allow sublet were also impacting progression of this scheme. CA agreed to write to PropCo to escalate these issues.</p> <p>Briefing paper regarding vision for MSK services - Joanna Spencer</p> <p>A paper outlining the plan for collaboration remodeling of MSK services with the CCG and associated risks was presented. The ISD Board welcomed the opportunity to undertake this work jointly with clinical commissioners and noted the benefits of not facing any competitive tendering at this point in time. It was noted from the paper however that there are significant potential risks to both the provider and commissioners that emanate from the implication of a radically different model.</p>	<p>JW</p> <p>FP</p> <p>FP</p>

	<p>PH expressed the view that current governance arrangements around this programme were insufficient to provide assurance that such risks are being adequately mitigated or that sufficient escalation is in place to ensure the new service will be an improvement for patients. CA to work with FR/LR to agree with the CCG in house governance and oversight arrangements.</p>	CA/FR/LR
5	Risk, Assurance & Governance	
	<p>PH confirmed that she, JL/SP were attending a risk workshop this week. It was agreed that the Board needed to consider the content of those risks that will be amended on the divisional register as a result of this work.</p> <p>In terms of risk reporting at ISD Board level the board welcomed the proposed format. PH asked to present the risk register in the new format for the August board.</p>	PH
6	AOB	
	<p><u>On call information</u> – it was agreed that the division on call manager pack needed an overhaul and as part of this work consideration should be given to key items of the Trust Director On Call pack.</p> <p><u>Quality viral</u> – PH explained that 7 teams would be prioritised for the first wave on this team based quality improvement approach.</p> <p><u>Liverpool Care Pathway</u> – PH informed the ISD Board that use of the Liverpool Care Pathway was now illegal and that the ISD board should ensure this has been appropriately actioned by teams on the ground.</p> <p><u>Accelerator Fund</u> – GT mentioned the accelerator fund bid and explained that the division could apply for funding for a skills facilitator to spend time explaining about mental capacity assessments and dementia assessments. GT and RD to pursue this.</p> <p><u>The Gosport Investigation</u> – TW alerted the ISD Board to the public enquiry for the Gosport War Memorial Hospital. It was noted that this may generate stakeholder interest and that there may be members of staff in the ISD that were connected to the Gosport War Memorial Hospital at that time.</p> <p><u>EPR</u> – it was noted that there were a number of risks related to the RIO system and it was felt that the ISD Board needed to consider a more detailed paper on these risks. A report has been written by Andrew Betteridge and he will be asked to share this with the Board.</p>	<p>LP/FP</p> <p>ALL</p> <p>GT/RD</p>
	Date of next meeting: Monday 18 th August, 9.00 – 12.00 Tatchbury Mount meeting room 2.	