

NLG(18)080

DATE OF MEETING	27 February 2018
REPORT FOR	Trust Board of Directors – Public
REPORT FROM	Dr Peter Reading, Chief Executive
CONTACT OFFICER	Wendy Booth, Director of Governance & Assurance and Trust Secretary
SUBJECT	Minutes of the System Improvement Board (SIB) held on Tuesday, 6 February 2018
BACKGROUND DOCUMENT (IF ANY)	N/A
PURPOSE OF THE PAPER:	For Information
EXECUTIVE SUMMARY (PLEASE INCLUDE A BRIEF SUMMARY OF THE PAPER, KEY POINTS & ANY RISK ISSUES AND MITIGATING ACTIONS WHERE APPROPRIATE)	The report provides the minutes of the SIB held on Tuesday, 6 February 2018. It is proposed that these minutes are shared monthly to ensure the Trust Board is sighted on the external discussions, challenge and expectations in respect of quality and financial special measures
HAVE STAFF SIDE BEEN CONSULTED ON THE PROPOSALS?	N/A
HAVE THE RELEVANT SERVICE USERS/CARERS BEEN CONSULTED ON THE PROPOSALS?	N/A
ARE THERE ANY FINANCIAL CONSEQUENCES ARISING FROM THE RECOMMENDATIONS?	NO
IF YES, HAVE THESE BEEN AGREED WITH THE RELEVANT BUDGET HOLDER AND DIRECTOR OF FINANCE, AND HAVE ANY FUNDING ISSUES BEEN RESOLVED?	N/A
ARE THERE ANY LEGAL IMPLICATIONS ARISING FROM THIS PAPER THAT THE BOARD NEED TO BE MADE AWARE OF?	NO
WHERE RELEVANT, HAS PROPER CONSIDERATION BEEN GIVEN TO THE NHS CONSTITUTION IN ANY DECISIONS OR ACTIONS PROPOSED?	N/A
WHERE RELEVANT, HAS PROPER CONSIDERATION BEEN GIVEN TO SUSTAINABILITY IMPLICATIONS (QUALITY & FINANCIAL) & CLIMATE CHANGE?	N/A
THE PROPOSALS OR ARRANGEMENTS OUTLINED IN THIS PAPER SUPPORT THE ACHIEVEMENT OF THE TRUST OBJECTIVE(S)	YES
THE PROPOSAL OR ARRANGEMENTS OUTLINED IN THIS PAPER ENSURE COMPLIANCE WITH THE REGULATORY OR GOVERNANCE REQUIREMENTS LISTED	Ensures the Trust Board is sighted on the expectations of NHSI and other stakeholders in respect of the quality and financial special measures regulatory regime
THE PROPOSALS OR ARRANGEMENTS OUTLINED IN THIS PAPER TAKE ACCOUNT OF REQUIREMENTS IN RESPECT OF EQUALITY & DIVERSITY	YES

ACTION REQUIRED BY THE BOARD

The Board is asked to note the report

Northern Lincolnshire & Goole NHS Foundation Trust

System Improvement Board Meeting

6 February 2018

1. Welcome and Introductions

Warren Brown opened the meeting and welcomed all attendees. The attendance list is attached as an appendix to these minutes.

2. Minutes and action log review from previous meeting

The minutes of the previous meeting were reviewed and agreed. An update was provided regarding the Thames Ambulance Service Limited (TASL) and patient safety risks noted on page 3. The issue of business continuity planning and risk had been raised outside of the last meeting and contact had been made with NHS England's Midlands and East Region who were leading on the issue. Both Owen Southgate and Julie Warren are working with Midlands and East Region and a number of quality summits have taken place. It was noted that the commitment to support the quality agenda is positive assurance and a follow-up call is scheduled. Contingency plans were in place for services in Midlands and East and Julie Warren confirmed that similar arrangements needed to be established for services supporting NLAG.

Action log

Action 22 is now complete. All actions will be updated for the next meeting.

3. Trust update

Progress against Key Performance Indicators (KPIs)

Four KPIs were highlighted from the Trust's Improving Together Programme Summary:

3.1 Progress on reducing the outpatients backlog

The timescale for the demand and capacity planning with IST was due for completion later today. It was confirmed that the outcomes from these meetings would be raised with CCGs.

Due to its high waiting lists and potential harm reviews, Ophthalmology was a key risk speciality. Costs have been identified for support and Owen Southgate confirmed that he is investigating whether any national funding is available, although even if it is, it would not be significant.

The trust is working closely with CCGs to reduce all outpatient follow-up work and to identify those who can be safely removed from waiting lists.

3.2 Fragile services review

The fragile services review work is ongoing with sufficient progress being made within three key services - Urology, ENT and Haematology. The following updates were provided:

- Urology continues to be problematic however capacity is expected to improve with an additional consultant soon joining the service. It was recognised that demand remains high within the NLAG area for urology.
- The trust is hoping to persuade locums working in ENT to move to NLAG on a more permanent basis, which will improve capacity. A plan is currently being developed with ENT surgeons and it is hoped that this will be completed by the end of March.
- NHS England's Specialised Commissioning team have been leading on improving Haematology services. In the first phase Grimsby patients have been moved to Hull and East Yorkshire (HEY). The second phase will look at in-patients and whether HEY may have capacity to also take these patients. To address these issues further, another collaboration meeting with HEY is scheduled to take place on 12 February.
- The trust expects to have draft strategic plans for all of three of these fragile services by end-march.

3.3

Maternity

The CQC visits had raised safety issues around maternity. In December a cluster of Serious Incidents (SIs) were reported which required some urgent actions. The SIs are currently being externally reviewed and an internal lead from Obstetrics & Gynaecology at the trust will be providing robust oversight. A RCOG and RCM review of the service has been requested and both NHS England and NHS Improvement are providing support to the trust, which includes midwifery support and an obstetrician advisor. The importance of triangulating all additional support was agreed and the trust was reminded to focus on internal governance and long term strategies.

The neonatal concerns raised at the PSG have been addressed and assurance was given, with work still ongoing.

Vincent Connolly reported that a review of all maternity services within the North region was a key focus. The trust were reminded to focus on ensuring that incident reports are completed and signed off, and to share learnings to inform improvement work.

3.4

Progress on 104 day cancer waits

The Cancer Performance and Backlog Presentation was circulated with the SIB papers. In addition, the following key updates were provided:

- The trust has a commitment to meet the cancer 62 day wait target by the end of June 2018. Progress has been slow due to difficulties

with engagement however over 90% of 2 week waits are first being seen within 7-days.

- Endoscopy at the DPoW site has improved and a business case is being worked on for the SGH site.
- The trust now has a system in place to prioritise the volume of patients in the backlog and report that both 62 day waits and 52 week waits are reducing.

3.5 Referral to Treatment

It was reported that 52+ week waits are reducing. However it was worth noting that the recent elective cancellations do not yet feature in the current statistics.

4.0 Updates from sub-groups

4.1 Patient Safety Group (PSG)

The PSG update circulated with the SIB papers was noted. Addressing the key messages for SIB the following updates were provided:

- The PSG was sighted on the NHS England (specialised commissioning) led peer review of haemato-oncology services that took place in December 2017.
- A Maternity and Paediatric quality risk profile was completed following a reported cluster of serious incidents.
- The public communication strategy regarding the clinical harm review process and patient backlog has now been addressed, as it will be discussed at the next Public Patient Board.
- The Deanery had expressed concern regarding the lack of substantive consultants in post, posing a significant risk to the acute medial intake at the Grimsby site. The trust reported that they now have substantive consultants at Grimsby and this item was deescalated, with conversations ongoing to ensure the future management of this risk.

The SIB confirmed that they are comfortable with all the progresses being made and how the issues raised at PSG are being governed.

4.2 Finance

The finance update circulated with the SIB papers was noted. In addition, the following key updates for SIB were provided:

- It was reported that discussions are still ongoing between NLAG and the CCGs to resolve a residual gap in 2017/18. Commitment to reach an agreement by this week was agreed at the meeting from all three parties involved. All were reminded of the 2 March 2018

deadline in which to reach a view on 2018/19 contract values and any need for mediation.

- Cathy asked for confirmation that Associate commissioner CCGs have withdrawn their intention to invoke contract penalties following confirmation that NL&G FT had accepted the 2017/18 control total. Helen Kenyon agreed to confirm whether that is the case.
- A correction was noted to the Finance Sub-group highlight report – the second item noted in the table on page 2 under 3. Key Messages for the System Improvement Board which currently stated that the outstanding 2017/18 issue was between NLAG and NL CCG. Additional wording is to be added to clarify that resolution of the financial gap is being taken forward on a system basis.

4.3 **Communications**

The action notes from the NLAG Communications Sub-Group circulated with the SIB papers were noted. In addition the following updates were provided:

- Regarding the acute services review, the first meeting of the ASR sub-group would be taking place in the following week, which will set up an information sharing platform. The SIB asked for insight into what services require support from a communications perspective.
- A new communications lead would soon be joining the trust. In the interim arrangements are in place and NHS Improvement will continue to provide communications support to the trust.
- The Communications Sub-Group recognises that staff engagement is an area that is currently much stretched at the trust.

The SIB committee confirmed that Communications issues are adequately being monitored, coordinated and supported.

5.0 **Work with existing groups**

5.1 **A&E Delivery Board**

On A&E performance the trust continues to perform well against the national average. However, the trust has cancelled a number of elective surgeries and will be extending the cancellation period. It was reported that 549 operations have been cancelled to date. Despite this the majority of elective work is continuing and the trust remains focussed on cancer and time critical patients.

Staff sickness and absences remains high, especially amongst nurses.

The impact of the elective cancellations was raised and the CCGs confirmed that they have asked for a clinical review of patients who have been removed from the waiting lists. The trust recognises that they are still

in a difficult position regarding RTT, however there is a process in place to help move the trust in the right direction.

5.2 **Planned Care Board**

A verbal update was provided. The key messages for SIB were:

- The Planned Care Board had discussed the potential implications of cancelling electives into February, and had agreed it was the right course of action at this time as long as the focus remains on cancer and time critical patients.
- Monitoring the robustness of the urgent room process is being followed up on via a call taking place later today.
- RTT performance remains as a key focus.
- Capacity and demand modelling will continue to be monitored, including haematology and dermatology.

6.0 **System update of transformation**

6.1 **Humber wide acute services review**

Whilst this review does fall under the auspices of the STP it was recognised that it was important for the SIB to retain oversight. An update was provided and it was noted that the review is now at the 'soft launch' stage. The next stage of the review will include addressing some of the more challenging services. It was also reported that NLAG had a number of key principles on the South Bank of the Humber, which included a maternity and emergency service at both sites, although the detail of the services was for the review to determine.

7.0 **Any Other Business**

The trust has received its PIR from CQC. According to the notice the inspection may take place anytime between April and July. It was confirmed that NHS Improvement is currently liaising with CQC regarding an inspection time for the trust that could reflect the embeddedness of quality improvements.

Date of next meeting: Tuesday 6 March 2018, 11.00 – 13.00, Board Room, Scunthorpe General Hospital

APPENDIX 1: Attendance list

NHSI:

Warren Brown (Chair)
Rhona Collins
Vincent Connolly
Michaela Graham (Minutes)
Cathy Kennedy
Helen Maskill
Lianne Potter
Owen Southgate
Deborah Turner

Trust:

Jayne Adamson
Wendy Booth
Tara Filby
Marcus Hassall
Peter Reading
Richard Sunley
Kate Wood

NHSE:

Julie Warren

CCGS:

East Riding of Yorkshire
Jane Hawkard

North East Lincolnshire
Helen Kenyon

North Lincolnshire
Richard Young

Healthwatch:

Paul Glazebrook

STP

Chris O'Neill