

**ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST  
MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS  
HELD IN PUBLIC ON WEDNESDAY, 3 NOVEMBER 2021  
VIA MICROSOFT TEAMS**

**Present:**

Voting Directors

Alison Ryan, Chair (*Chair*)  
Cara Charles Barks, Chief Executive  
Jeremy Boss, Non-Executive Director  
Sumita Hutchison, Non-Executive Director  
Anna Mealings, Non-Executive Director  
Ian Orpen, Non-Executive Director  
Nigel Stevens, Non-Executive Director  
Antonia Lynch, Chief Nurse  
Simon Sethi, Chief Operating Officer  
Bernie Marden, Medical Director  
Libby Walters, Director of Finance  
Jocelyn Foster, Director of Strategy  
Claire Radley, Director for People  
Brian Johnson, Director of Estates and Facilities

In attendance

Adewale Kadiri, Head of Corporate Governance  
Sharon Manhi, Lead for Patient and Carer Experience (*Item 6 only*)  
Rachael Whitely, Operations Lead, Vaccination Centre (*Item 6 only*)  
Anne Williams, Clinical Lead, Vaccinations Centre (*Item 6 only*)  
Susanne Haselgrove, Volunteer Lead, Vaccination Centre (*Item 6 only*)  
Peter McCowen, Public Governor  
Julie Stone, Staff Governor  
Dan Asamoah, Deputy Head of Corporate Governance

**BD/21/11/01            Chairs Welcome and Apologies**

The Chair welcomed the Governors as observers and noted that there were no apologies received.

**BD/21/11/02            Written Questions from the Public**

The Chair confirmed that no question had been received from members of the public.

**BD/21/11/03            Declarations of Interest**

Ian Orpen advised that he is part of the team at the Vaccination centre and agreed to be excluded from agenda item 6, Staff story. There were no other interests declared for items being considered.

**BD/21/11/04            Minutes of the Board of Directors Meeting held in Public on 1 September 2021**

The minutes of the meeting held on 1 September 2021 were approved as a true and accurate record of the meeting.

**BD/21/11/05            Action List and Matters Arising**

The Board noted updates on the action list and matters arising update.

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## **BD/21/11/06 Staff Story – Large Vaccination Centre, Bath Racecourse**

The Lead for Patient and Carer Experience welcomed Rachael Whiteley, Operations Manager, Anne Williams, Clinical Lead and Susanne Haselgrove, Volunteers Lead, all from the RUH Bath Racecourse Vaccination Centre.

Rachael Whitely explained that she joined as Lead of the Centre in October 2020 and so far had overseen 176,757 vaccinations as at 29 October 2021. Rachael identified the Vaccination programme as a good example of collaborative working which had brought together the BSW system's primary and social care players and some non-clinical staff to work towards a common goal. Rachael added that she was preparing a forward plan for retention programme and hoped to get some of the workers to consider working for the NHS.

Anne Williams, Clinical Lead, explained that she retired as a Visiting and Community Nurse last year and received a call to help at the Bath Racecourse Vaccination Centre. She stated that the team was incredible and she had met many wonderful people from all walks of life and different backgrounds which included doctors, dentists, graphic designers, cabin crew attenders.

Susanne Haselgrove, Volunteer Lead, explained that her work background was working with universities. Susanne commended her two other colleagues who were not present at the meeting, who helped to set up the volunteering team and continued to manage a large database of volunteers. It was noted that the Centre made use of twenty volunteers a day in three shifts pattern. Sarah chased up volunteers for their personal experiences and feedbacks to help to improve the service.

The Board also noted the following points from the team's discussions:

- The work environment was challenging coupled with frequent rain and IT issues, and staff try to adapt daily.
- It was difficult to manage bank staff, as some had the tendency to cancel their shifts with no and short notice. It would be good to consider to take on permanent staff to create a stable workforce.

The Chair thanked the Vaccination Centre staff for their hard work and their presentations. Sumita Hutchison thanked Susanne for her role in leading the volunteers and thanked all the Trust workers supporting the work at the Vaccination Centre and added that she was inspired to hear from the team and that it was a good example of autonomy and partnership working with a strong sense of purpose. Rachael Whiteley explained that the Vaccination Centre staff were self-motivated with a clear agenda and understood what they were there to do, as they believed it was the thing right thing to do as Covid-19 had been a worldwide pandemic.

Nigel Stevens complimented the team for the impressive use of volunteers at the Vaccination Centre and recommended the example to the Trust to maximise use of volunteers.

The Board noted the discussions on the Staff story and thanked Rachael, Anne and Susanne for their presentations and commitments to continue to support improvements at the Vaccination Centre and the Trust.

## **BD/21/11/07 CEO Report**

Cara Charles-Barks presented her report and highlighted the following points:

- The Trust had continued to deliver services despite effects of Covid-19 on the hospitals' ability;

- The Trust had a £1.6m deficit at the end of September, which had been caused by cost increases due to equitable care demand which included increase in Covid-19 which led to critical care beds been opened, staff in isolation and costs of temporary staffing;
- There were still a high number of patients in the RUH that should be treated in the community as a result of issues with patient flow exacerbated by the pandemic;
- The Trust continued to focus on infection, prevention and control and other measures that needed to be taken to support it to keep staff and patients safe;
- The Trust continued working hard to continue to deliver elective care;
- There was progress on winter planning despite the Trust being in a difficult position like many other Trusts going into winter.
- There was work being done to improve staffing to ensure we have adequate cover
- There was progress improving ambulance handovers;
- Good news – the Trust completed a makeover of the Children’s Ward garden which was made possible by Time is Precious charity. The Trust also was able to fly a flag in celebration of the Black History Month. The Trust also raised a flag for the Freedom to Speak up month in. RUH was awarded veterans aware accreditation by the Veterans Covenant Hospital Alliance as one of 75 hospitals in the country which provide veteran specific care needs. The Trust’s next goal would be to be recognised in the employers’ recognition scheme as it helped employ people from the Armed Forces.

The Chair asked about the operational status of the hospital and the CEO explained that the hospital was under significant pressure.

The Board of Directors noted the CEO update.

#### **BD/21/11/08 Chair’s Report**

The Chair provided her update and highlighted the following points:

- Consultant recruitment continued to take place across the Trust, in addition to taking part in interviewing for consultants she had been involved in interviewing for a new Trust Executive Director for Workforce and the Chief Executive of the new Integrated Care System;
- Alison reiterated the importance of system working to deal with extraordinary amount of pressure at the RUH, and reported that she was working with Chairs of the other BSW Trusts, Local Authorities, MPs and community partners to look at ways to improve the situation;
- She had been involved in the Veterans Awards and the Black History Month celebrations.
- She had the pleasure to meet with the Trust’s major donors to show them around the new Cancer Centre under construction.

The Board of Directors noted the Chair’s report.

#### **BD/21/11/09 Integrated Performance Report**

The Medical Director presented the report. He emphasized that the hospital was under significant pressure, with increased attendance, ambulance handover delays, increased in Covid-19 numbers, and delays in discharge timings. He added that Covid-19 continued to impact staffing and establishment, and had also affected delivery of the needed elective care to improve on the Trust financial situation.

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## Summaries of discussions on specific areas of the report

### Finance - the following points were noted:

- The Trust was in a deficit position of £1.6m at the end of September 2021, which was more than £100k off the forecast for the first half of the year.
- RUH accrued enough elective funds to cover the shortfall but overall there was deterioration due to increase in expenditure on Covid-19 related costs and pressures in the intensive care unit and increased in agency staff costs due to absenteeism due to staff in isolation.
- The BSW system as a whole was in a breakeven position at the end of the same period despite the RUH deficit.

### Operational –the following points were noted:

- Performance remained challenged, driven by increased attendance including paediatric in the last 6 months.
- There was a challenge to get flow through the hospital
- Emergency department's 4 hour performance during September was 71%, with the RUH footprint being 65%. This was a reduction since the previous month driven by increased bed pressures within the hospital. The Trust had appointed to a large number of ED vacancies to help improve ED flow in coming months.
- Ambulance handover times did not meet national standard, the Trust lost 775.2 hours during September, and this was a 28.6% growth compared to August. This was also driven by the bed pressures that exist within the Trust and the Trust was working with system partners to improve.
- The Trust delivered 67.1% Referral to Treatment RTT Performance which was a 1.5% reduction from August's position.
- Cancer 62 days performance in September improved to 64.6%, but was still short of the 85% target. Challenges remained with Urology, Skin and colorectal. The Trust continued to work on redeveloping clinical pathways to reduce delays.
- Diagnostics performance was 30.36% (> 6 weeks pathways). This represented an improvement when compared to August 2021. CT, MRI, Echocardiography and non-obstetric USS continued to be the challenged areas with increased waiting times. The Trust was trying to reshape services and see how to make best use of Sulis Hospital.
- The Trust missed the target to have no more than 50 patients not meeting criteria to reside. During September there was an average of 124 patients waiting to be discharged.
- The Trust missed the overall Elective Recovery target, although day cases and follow-ups delivered the required 95%. Standard for outpatients appointments was exceeded with 28% delivery.

Ian Orpen acknowledged that performance had been a challenge, he asked why cancer waiting times had been much lower in other BSW hospital. The Medical Director responded that the Trust was working with colleagues in Salisbury FT and Great Weston hospital to equally create increasing consultant opportunities. However most of the patients on the list preferred care close to home. This was supported by the Chief Operating Officer, he stated that cancer 62 day pathway was an area of concern due to challenges in radiography and diagnosis and that some services worked well and others had delays. It was noted that the Trust was working to redesign and condense the pathways for efficiency and improvements.

Quality - the following points were noted:

- Covid19 – continued to cause pressures and difficulties and the Flu could be another threat this winter.
- There were 3 falls resulting in moderate harms and 1 catastrophic harm
- There were 15 Hospital acquired Infections in August, it exceeded the target of no more than 11.

It was noted that the Infection control team's aseptic techniques and new audits had brought about some improvements. The Chief Nurse assured the Board that a Deputy Director of Infection Prevention and Control and Associate Chief Nurse had been appointed to help create necessary improvements.

Patient Experience - the following points were noted:

In August, 94.9% of patients rated their experiences of the RUH as positive, which was just below the target of 95% and an improvement on July.

- The Trust received 33 formal complaints in August 2021, against 15 complaints in August 2020. PALS had 355 contacts with patients in August. The main cause for complaints was communication issues and the Trust had appointed a Family Liaison Support worker to support in how to manage patient communication. The Trust had been working to review appointments letters and how it communicate with patients.

People and Staff - the following points were noted:

- Sickness absence, self-isolations due to Covid-19 were above norm for August, which was a lever for high nurse agency spend
- Information governance training continued with a downward trend at 84.5% and 83.1% which was due to recent high operational pressures in the Trust for staff to set time to take their training.
- Nurse agency spend continued to be high, as part of the measures to deal with the problem Trust's Executive Directors have decided to work towards reducing nursing vacancy to zero by January 2022.
- Staff engagement score was up.

The Board of Directors noted the updates on performance.

**BD/21/11/10 Quality Governance Committee Chair's Update Report**

Nigel Stevens presented the report. He reported that the Committee tried to focus on key issues which included the elective care profile. The Committee also had a full review of an SI report into death caused by nosocomial transmission of Covid-19 in the hospital between 4 November 2020 until 31 December 2020 and thanked the report author for the detailed report. The Board noted the following three points as causes and lessons learn:

- natural space and impact on beds in close proximity, - long term improvements needed on infrastructure.
- infection, prevention and control practices - infection prevention and control must be a priority in spite of conditions present
- Social care beds - about 26% of inpatient beds were occupied by patients who were medically fit and met the criteria for discharge but remained in hospital due to lack of social care which included lack of care home spaces and lack of community hospital beds. Staff were to follow procedures and guidelines for discharge of medically fit patient to care homes or places of residence in a case of Covid infection.



The Chief Nurse stated that lessons learned from the report had been taken seriously. The Trust had appointed a Deputy Director for Infections Prevention and Control and also working with the microbiology team to improve on audits, and added that there was more to be done.

The Director of Estates and Facilities assured the Board that the pandemic brought a sharp focus on issues of bed spaces and his team continue to have discussions on how to deliver right solutions in the short and long term to deal with the problem..

Nigel Stevens assured the Board that the QGC had received assurance on improvement work on the Emergency Department by engaging new teams and upgraded and improved process on work in ED. He added that as the huge improvement work was complete the challenges would be to ensure that the changes were embedded and progress monitored.

The Board noted the Quality Governance Committee Chair's report.

#### **BD/21/11/11 Finance and Performance Committee (FPC) Chair's Update Report**

Jeremy Boss presented the report and highlighted that several areas of the hospital had been challenged on performance for the first time. He added that the overall challenge was reflected on the Trust finances. He also expressed concerns about the uncertainty of the situation. The Board noted that the FPC received report from the Deputy Commander of SWAST Wiltshire on ambulance handover delays and its impact on the ambulance service.

The Board noted the Finance and Performance Committee Chair's update.

#### **BD/21/11/12 Non-Clinical Governance Committee Chair's Update**

Sumita Hutchison presented the report and highlighted that the NCGC received presentations on the draft digital strategy and would discuss it further the next meeting in January 2022. The Committee also had detailed discussions on the Environmental sustainability strategy and agreed that a lot of work was yet to be done and requested for it to be brought back with more details for further assurance on progress against the Sustainable Development Management Plan (SDMP). It was noted that the Committee also reviewed two non clinical litigation cases involving staff slips.

The Board noted the Non-Clinical Governance Committee Chair's report.

#### **BD/21/11/13 People Committee Chair's Update**

Anna Mealings presented the report. She highlighted that the Committee received good levels of assurance on the equality and diversity internal audit report for 2020-21 and actions to the diversity and inclusion wider work. The People Committee had reviewed and provided feedback on the draft people and culture strategy 2021-26. The Committee had also monitored progress of the Restorative Just Culture which exceeded the national mandate. The Committee also reviewed its effectiveness and agreed that it going in the right direction.

The Board noted the People Committee Chair's report.

#### **BD/21/11/14 Audit Committee Chair's Update**

Antony Durbacz presented the report. He highlighted that the Audit Committee had been keen to consider RUH plans to achieve gold standard in cyber security as cyber security had become a focus at the national level. He informed the Board that the Committee identified performance issues with Grant Thornton, the Trust internal auditors and came to a mutual

agreement to terminate the contract as the underperformance was affecting the Trust's position. The Board noted that KPMG had agreed to carry on the work till the Trust goes out for formal tender for internal audit service at the end of the year. Antony Durbacz assured the Board that even though there was a lot of work to do, the Committee was assured that KPMG would be able to complete the internal audit plan for the year as they were the Trust's previous internal auditors.

The Board noted the Audit Committee Chair's update report.

#### **BD/21/11/15 Charities Committee Chair's Update**

Jeremy Boss presented the report. He highlighted that the Committee reviewed and approved the charity's annual report including the financial statements. The Board noted that the pandemic continued to impact fundraising activities of the Charity. There was a donation which was becoming problematic and the Committee was looking into ways to act according to wishes of the donor. It was noted that the Committee reviewed the investment risk strategy and agreed to convert from shares to cash the amount expected to be needed in the next two years for the Cancer Centre equivalent to 50% of the fund to avoid any short term adverse movements in the stock markets when cash is needed to match spend and reduce risk.

The Board noted the Charities Committee Chair's Update

#### **BD/21/11/16 Freedom to Speak Up (FTSU) Annual Report**

Louisa Hopkins presented the report. She thanked the Chief Executive and the Director for Workforce for their consistent support for the service as the year had been increasingly busy and highlighted the following points:

- There were an increase in cases of teams raising concerns and staff seeking to improve their teams or support networks around their working environment and explore faster ways of working and driving improvements;
- Training of two additional guardians helped to support increase with the increasing cases and that brought the number of staff supporting the service to 22.
- October was the Freedom to Speak Up month and the Trust raised a flag to mark the importance of speaking up and its commitment to continue beyond FTSU month of October.
- There had been an increase in staff from black and minority background sharing concerns as it was target from last year.
- RUH FTSU index increased at an average of 1.5% above the national index and hoped to increase the index again next year.

The Chair commended the report and its delivery and stated that she was pleased to see an increase in diversity of people staff accessing the service. Antony Durbacz asked about the status of FTSU in Sulis. Louisa explained that she had reached out to her counterpart in Sulis. The FTSU lead at Sulis was yet to train with the national Guardian and organise a team. RUH FTSU team had been ready to provide the necessary support in training and guidance needed and report on it. Sumita Hutchison, NED and FTSU guardian for the Board requested for a more detailed information on section 6 (themes of speaking up) to be presented to the Board for further discussions.

The Board noted the presentation and discussions on the Freedom to Speak Up report.

#### **BD/21/11/17 DRAFT People and Culture Strategy and Milestones 2021-26**

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The Director for People presented the report. It was noted that the new strategy when approved will replace the existing RUH Workforce Strategy 2015-2020 in providing the strategic direction for the Trust. She stated that the purpose of her report was to reflect work being done which included the development of the people dashboard and to reflect learnings from Covid-19 pandemic and other issues like staffing shortages and also to receive more feedback.

The Board noted that the draft People and Culture strategy was driven by lots of strategic drivers which included the BSW ICS and ICB vision and the RUH vision and the four pillars in the NHS national people plan. There had also been significant improvement after feedbacks from staff networks, Governors, the Board and the People Committee. The Board noted that the strategy strived to strike a balance ensuring staff were happy to work for the RUH and focused on being an attractive employer to attract quality staff. Another aspect was to transform the way the People directorate worked. The Board noted that years three to five objectives were not well developed as it had been agreed at the People Committee to consider a yearly refresh of the strategy and more would be done close to those years. Other aspects yet to be considered included workforce planning and new ways of working.

The Director of Strategy commended the strategy for being helpful. Her observation was that the document did not quite demonstrate the collaboration with service users who were to drive the agenda on prevention of ill health which was part of working with partners in the system.

Nigel Stevens commented that the strategy might not come across as relevant to the people that it impacted, it was very high level and did not connect to the people at the bottom. He advised that some real objectives should be included to change the environment staff work in now to make it more people friendly.

The Chair thanked the Director for People for acknowledging and accounting for increased importance on staffing levels in the strategy. Sumita Hutchison suggested that the section on staff health and wellbeing should include:

- details about staff engagements for them to have a clear purpose and vision;
- team dynamics and management;
- leadership to address some of the impact of lack of staff health and wellbeing.

Sumita also suggested that the section on Working differently should address the issue of flexibility and flexible working which is of interest to women with families.

The Board noted discussions on the draft People and Culture strategy.

#### **BD/21/11/18          Infection Prevention and Control Annual Report**

The Board noted the report

#### **BD/21/11/19          Tissue Viability Annual Report**

The Chief Nurse thanked the Tissue Viability team for embracing and making good of the improving together methodologies.

The Board noted the report

#### **BD/21/11/20          Finance and Performance Committee Annual Report**

The Board noted the report

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**BD/21/11/21          People Committee Annual Report**

The Board noted the report

**BD/21/11/22          Resolution to Exclude the Press and Public**

The Chair proposed that representatives of the press and other members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, publicity of which would be prejudicial to the public interest. The Board of Directors approved the resolution.

*The meeting was closed by the Chair at 12:00 hours*