

Minutes

Solent NHS Trust In Public Board Meeting

Thursday 2nd April 2020, 08:45-10:50

Virtual Zoom Meeting

Chair: Catherine Mason, Trust Chair (CM)	
Members: Sue Harriman , Chief Executive (SH) Andrew Stevens , Chief Finance Officer and Deputy CEO (AS) Sarah Austin , Chief Operating Officer, Portsmouth and Commercial Director (SA) David Noyes , Chief Operating Officer Southampton and County Wide Services (DN) Jonathan Prosser , Interim Medical Director (JPr) Helen Ives , Chief People Officer (HI) Jackie Ardley , Chief Nurse (JA) Suzannah Rosenberg , Deputy COO Portsmouth (SR) Jon Pittam , Non-Executive Director (JPi) Mike Watts , Non-Executive Director (MW) Stephanie Elsy , Non-Executive Director (SE) Gaurav Kumar , Non-Executive Director (GK) Thoreya Swage , Non-Executive Director (TS)	Attendees: Rachel Cheal , Associate Director of Corporate Affairs and Company Secretary (RC) Sam Stirling , Corporate Affairs Administrator (SS) Jayne Jenney , Corporate Support Manager & Assistant Company Secretary (JJ)
Judgements and decisions have been made in the context of a Level 4 National Emergency	
1	Chairman’s Welcome & Update, Confirmation that meeting is Quorate, Register of Interests & Declarations of Interests
1.1	CM welcomed attendees and explained etiquette for the virtual meeting. RC emphasised the need for mindfulness that the meeting was held in public, despite no members of the public joining. CM noted that Executive Directors may need to leave for parts of the meeting for urgent Covid-19 calls/discussions.
1.2	The Board acknowledged SAs last Board meeting and wished her well in her new role. SA confirmed that her final day with Solent would be the 25 th April 2020. CM welcomed SR, who would be joining the Board as Interim Chief Operating Officer- Portsmouth.
1.3	The Board were asked to declare any new interests. There were no further updates to note. The meeting was confirmed as quorate.
2	*Minutes of the meeting held 3rd February 2020, matters arising and action tracker
2.1	The minutes of the last meeting were agreed as an accurate record.
2.2	The following actions were confirmed as complete: AC001641, AC001642, AC001643

3	Chief Executives Report
3.1	<p>SH commented on challenges of providing a contemporary report due to the current fast paced working environment.</p> <p>SH provided an overview of successful conferences held prior to Covid-19.</p>
3.2	<p><u>CQC inspection</u> The Board were informed of CQC attendance at the recent Workforce Subcommittee and discussed the full and engaged meeting held.</p> <p>It was confirmed that the CQC would still be completing the Mental Health service unannounced inspections. SH noted that all other CQC inspections had been suspended.</p>
3.3	<p><u>Executive Team changes</u> SH reported that this was SA's final Board meeting and reiterated that SR would be joining as Interim Chief Operating Officer for Portsmouth at the end of April.</p> <p>It was confirmed that finalisation of terms and conditions for the new Chief Medical Officer were on-going and that JPr had agreed to remain until the new Chief Medical Officer was in post.</p>

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3.4	<p><u>Covid-19 Update</u></p> <ul style="list-style-type: none"> • SH confirmed that a level 4 national emergency had been called and highlighted changes in legislation and guidance, including Personal Protective Equipment (PPE) and staff testing. • Interpretation of the guidance was discussed in relation to how rationalised for services and SH confirmed changes for creation of long term plans, contract negotiations and performance metrics. • An overview of the direct impact on workforce was provided and SH assured of daily monitoring of absences across the Trust. SH commented on innovative work taking place, supported nationally, to ensure availability of more staff. • The Board were informed of initial support provided in enabling staff to work from home where possible. • SH shared large amount of up-skilling and competency training taking place to ensure more front line staff were available. • SH emphasised adherence to national modelling and commented on constant adaptations/changes. • The Board noted considerations of a peak during the Easter week and confirmed review into increasing capacity for this period. SH informed of new modelling suggesting potential effectiveness of social distancing measures, which may have flattened the peak. SH highlighted the need to consider long-term solutions due to further spikes expected over a prolonged period. • SH also informed of preparation and planning for supporting increased capacity in acute care and confirmed that teams had been promptly responding to discharge requirements. • The Board discussed respiratory failure affecting acutely unwell patients and SH commented on the significant work to support provision of ventilators and hospital preparation to receive patients. • SH briefed the Board on activity across the STP, particularly considering increasing capacity, logistical supplies and mobilisation. It was confirmed that full discussion would be held in Confidential Board. • SH emphasised formal thanks to staff across the organisation. SH also commented on the exemplary work of the IT team. • The Board were informed of 'Zoom' session held, which was open to all staff across the organisation. SH highlighted commitment of staff and high morale.
3.5	<p><u>Southampton System update</u></p> <ul style="list-style-type: none"> • DN provided an overview of Trust mobilisation and commented on Business Continuity Plans which had assisted with the effective set up of the Gold Command Structure. • The Board were briefed on work across Southampton to generate more beds in community wards. DN informed of actions taken to allow more patients to be seen in the community setting, using community nursing support for admission avoidance. • DN noted partnership working with University Hospitals Southampton (UHS) and Southern Health to ensure a single control point. • It was confirmed that treatments within the Sexual Health and Dental service had been triaged out where appropriate, with emergencies still continuing where necessary. • Positive roll out of ICT was highlighted.

3.6	<p><u>Portsmouth Military Mental Health Alliance</u></p> <ul style="list-style-type: none"> SA explained that bidding for high intensity service development had continued and should expect a response regarding next steps on 14th April. The Board were informed that procurement for partner design and refurbishment of the trauma centre had commenced however suspended temporarily due to Covid-19. SA assured of virtual support being offered to veterans during this time. SA highlighted request to consider sufficient out of hospital capacity for Portsmouth and South East Hampshire. It was agreed to discuss further in Confidential Board.
3.7	<p><u>Portsmouth System update</u></p> <ul style="list-style-type: none"> SR informed of review into community capacity for those leaving acute care. It was confirmed that full details would be provided in Confidential Board. The Board were informed of a lack of demand on the mental health services and SR provided assurance regarding on going work with Occupation Health to ensure increased offers of support to staff. SR reported that a joint mental health assessment unit had been established within 2 weeks, with all partners across the system. SR also shared work to utilise vacant space at St James' Hospital, to relieve pressure on Queen Alexandra (QA) Hospital and ensure correct pathways were used. The Board were briefed on considerations being held regarding population needs and service requirements/design following Covid-19.
3.8	<p>CM provided feedback on the updates including positive IT Business Continuity Planning and achievement of the Mental Health Hub.</p> <p>CM also noted formal thanks to JPr for staying on as Interim Medical Director and requested that formal thanks were cascaded to all staff within the Trust for their hard work and dedication during this challenging time.</p>
3.9	<p>The Board noted the Chief Executives Report.</p>
4	<p>Performance Report</p>
4.1	<p><u>Operations</u></p> <ul style="list-style-type: none"> AS commented on changes and fast paced activity throughout the Trust due to Covid-19 and confirmed that items deferred would be thoroughly reviewed after the crisis. The Board were confirmed of continued mobilisation of the Sexual Health Services on the Isle of Wight, with staff becoming Solent employees from 1st April. AS highlighted virtual training sessions being held and the importance of ensuring that full support was provided. AS provided an update regarding actions taken in relation to the 0-19 service and confirmed that a full update would be provided in Confidential Board. The Single Oversight Framework was noted.

<p>4.2</p>	<p><u>Quality</u></p> <ul style="list-style-type: none"> • JA confirmed regular weekly contact with the CQC regarding reporting of Serious Incidents (SIs) and updates. • The Board were informed that registration had now been received for the Sexual Health Service. • Regarding additional capacity, JA commented that creating capacity on current sites was a simple process, which would require changes to the statements of purpose only, however becomes more complex if using additional sites. It was confirmed that on-going considerations were taking place. • JA provided an overview of legal guidance for mental health during Covid-19 and emphasised the importance of continuing to safeguard against restrictive practices. JA shared emergency processes for safety of patients deemed at considerable risk and clear guidance in relation to extended detentions. It was confirmed that the mental health teams were reviewing and working clearly on guidance provided. • JA explained that a large number of QIAs were taking place and commented on emphasis of quality and safety in clearly identifying changes to care required. • It was noted that all NHSE/I collaboratives had been put on hold. • JA informed the Board that Beth Carter had been appointed to the post of Head of Infection Prevention on a permanent basis and highlighted strong leadership provided. • The Board were briefed on changes to the complaints process, in line with national Covid-19 guidance. JA assured of appropriate review through the QIA process. • JA informed of extensive discussions/debates regarding management of risk appetite. The Board ratified changes that had been circulated outside of the meeting. • JPr provided an overview of the purpose of the newly established Ethics Panel and the importance of this forum in reviewing contentious issues/themes and duties of staff. JPr formally thanked TS for providing Non-Executive Director support to the panel. • TS queried whether a QIA had been held, similar to the complaints process, regarding changes to the management of SIs. JA confirmed review of national guidance and QIA being undertaken on either Friday 3rd April or Monday 6th April. • Regarding BAF number 51, SE queried review of other risks in light of Covid-19. It was agreed to discuss in Confidential Board.
<p>4.3</p>	<p><u>Financial</u></p> <ul style="list-style-type: none"> • The Board were informed that the Trust was ahead of plan for month 11. • It was confirmed that clarification had been sought in regards to NHSE Provider Support Funding. • AS explained fortunate financial position and commented on lack of challenges presented by the Covid-19 crisis thus far. • AS reported a 3 day extension for the Annual Accounts and confirmed 5th June 2020 submission date. • Pressures within the Estates service were highlighted and it was confirmed that further detail would be provided in Confidential Board. AS noted positive partnership working with contractors. • AS informed the Board that the lease signing for Rodney Road (adjacent to St Marys' Hospital) had been expedited. • AS explained that IT had previously been an outlier within the benchmarking reports for expenditure, however commented on effective implementation of Business Continuity Plans for Covid-19, with little effect to the organisation.

4.4	<p><u>Workforce</u></p> <ul style="list-style-type: none"> • HI noted formal thanks to the Communications Team for all of their hard work in responding to national Covid-19 guidance and providing effective communication to both patients and staff. • The Board were informed of reduction in timescales for the recruitment process and HI provided an overview of recruitment to the internal Bank Staffing Service. • HI briefed the Board on the redeployment of staff and large number of responses received for the voluntary redeployment database. • It was confirmed that challenges regarding national supply routes would be discussed further in Confidential Board. • HI shared on-going work to support services with completing the rosters and confirmed that members of the HR team had been redeployed to assist. • It was confirmed that the Occupational Health team were monitoring members of staff absent due to Covid-19 and HI commented on the current high demand of the team. • HI reported on-going work between the Training & Educator in Practice and the Quality team in relation to up skilling and redeployment. • CM acknowledged positive Flu Vaccination results detailed within the report.
4.5	<p><u>Research</u> The Board noted the Research update provided within the report.</p>
4.6	<p><u>Provider license Self-Declaration</u> The Board noted the Provider License Self-Declaration.</p>
4.7	<p>The Performance Report was noted.</p>
5	<p>Annual Staff Survey Feedback</p>
5.1	<ul style="list-style-type: none"> • HI briefed the Board on Annual Staff Survey feedback and commented on highly engaged workforce. HI informed of positive results when compared to Trusts across the country and commented on evidence of staff dedication and commitment in response to the Covid-19 crisis. • Risks in relation to staff 'burn out' were highlighted and HI provided an overview of on-going work with Occupational Health and Mental Health teams, as well as innovative solutions being implemented to ensure full consideration of mental and physical health/wellbeing during Covid-19. • HI shared work on leadership and confirmed that a new coaching offer was available to all staff. • The Board were informed of improvements that had been rapidly implemented, with an expected positive outcome for staff in the next Staff Survey results. • HI highlighted monitoring of the Estates team, due to consistent low survey scores. HI shared challenges for the team and review into hot spots to ensure implementation of targeted planning. <p>The Annual Staff Survey Feedback was noted.</p>
6	<p>WRES and D&I Strategy</p>

6.1	<ul style="list-style-type: none"> • MW queried inclusion of amendments requested at the Workforce and OD Committee. Action- JA to review outside of the meeting. • It was confirmed that oversight and monitoring of the strategy would be held by the Workforce and OD Committee and the Community Engagement Committee. • CM commented on the need for further work regarding the strategy objectives. SH agreed and highlighted the need for more in depth narrative. MW also queried full information from the Workforce and OD Committee included within the Roadmap. It was agreed that JA review and resubmit to a future Board meeting for approval. Action- JA. • It was agreed to submit a review of the strategy to the Workforce and OD Committee and In Public Board on a bi-annual basis. <p>The Board noted the WRES and D&I Strategy.</p>
Committee Exception Reports	
7	Workforce and OD Committee Exception Report
7.1	<ul style="list-style-type: none"> • MW provided a verbal update and explained that a full and comprehensive meeting had been held. • It was confirmed that challenges regarding the Adult Mental Health workforce were discussed and confirmed that these had been shared with the Quality Assurance Committee. It was also confirmed that discussions had been held in relation to the future sustainability of the service. • MW highlighted review of the Gender Pay Gap Report and confirmed that this would be noted by the Board and Remuneration Committee in due course. • The Committee acknowledged the rising demands on staff and the importance of monitoring both during and after the Covid-19 crisis, due to potential knock on consequences.
7.2	CM emphasised the need to review Committee agendas/frequency of meetings with meeting Chairs, as required, during this crisis. CM also commented on the need to be mindful of noting specific items for governance purposes.
7.3	SH reiterated useful, risk based discussions regarding future sustainability of Mental Health Services and commented on further discussions that could be held in Confidential Board. The Board noted the Workforce and OD Committee verbal update.
8	Community Engagement Committee
8.1	<i>There was no meeting held to report.</i>
9	Mental Health Act Scrutiny Committee Exception Report

9.1	<ul style="list-style-type: none"> • TS thanked JA for her help jointly chairing her first Committee. • The Board were informed that a Mental Health Act update had been received. • The Committee were briefed on the Ethics Panel being established. • TS confirmed that the Mental Health Act report was noted and points of clarity/amendment were requested. • TS reported that an increase in the number of Section 2 cases had been highlighted and confirmed that monitoring was taking place. • It was shared that updates to Terms of Reference were the being considered outside of the meeting against other Trusts, particularly in relation to utilisation of Associate Hospital Managers. • TS explained issue regarding the use of prone restraint and emphasised assurance provided regarding appropriate use. <p>The Board noted the Mental Health Act Scrutiny Committee Exception Report.</p>
10	Audit & Risk Committee Exception Report
10.1	<ul style="list-style-type: none"> • JPi reiterated changes to the approval timeline for Annual Accounts. • RC informed that availability had been requested for alternative Audit and Risk Committee and Extra Ordinary Board meeting dates, for signing off Annual Accounts based on the new timeline. <p>The Board noted the Audit and Risk Committee Exception Report.</p>
11	Charitable Funds Committee Report
11.1	<i>There was no meeting held to report.</i>
12	Quality Assurance Committee Exception Report
12.1	<ul style="list-style-type: none"> • It was confirmed that there was a large amount of discussion in relation to Covid-19. • TS informed of periodic, stand-alone and quarterly reports that were noted by the Committee. • Assurance regarding Adrenaline Auto Injectors was provided. • TS briefed the Board on usefulness of the Wheelchair Services report for providing oversight and the timeline of actions taken. • JA commented on the usefulness of TS attending the Quality Improvement and Risk (QIR) Group to provide a background prior to her first Committee. • JA confirmed that the Quality Account was ready for submission when required following Covid-19. <p>The Board noted the Quality Assurance Committee Exception Report.</p>
13	Governance and Nominations Committee Exception Report
13.1	The Board noted the Governance and Nominations Committee Exception Report.
14	Finance Committee – non-confidential update if required

14.1	<ul style="list-style-type: none"> SE commented on fast paced meeting held and thanked attendees for their understanding. Exemplary work of the Estates and IT teams were highlighted. SE also emphasised the hard work of the Procurement Team and acknowledged high demand on the team in providing necessary equipment. <p>The verbal non-confidential Finance Committee update was noted.</p>
Any other business	
15	Reflections
15.1	CM commented on effective use of the 'Zoom' system for holding this virtual meeting.
15.2	<p>The Board reflected on SA's time with the Trust and CM wished her the best in her new role with Guys and Thomas Trust.</p> <p>SH reiterated formal thanks to SA and commented on the impact she has had on the organisation.</p>
15.3	The Board noted thanks to CM for effective chairing of the first virtual Board meeting.
16	Any other business & future agenda items
16.1	SH informed of lateness in joining the Confidential Board due to Covid-19 CEO System call.
16.2	No other business was discussed and the meeting was closed.
17	Close and move to Confidential meeting

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