

**Executive Management Committee**  
**Minutes of the meeting held on 21 March 2019, 10am, Edith Cavell, Ipswich Hospital**

**PRESENT:**

Neill Moloney	Managing Director (Chair)
Catherine Morgan	Chief Nurse
Shane Gordon	Director of Strategy & Innovation
Angela Tillett	Medical Director
Leigh Howlett	Acting Director of HR
Ann Alderton	Company Secretary
Mike Meers	Director of ICT
Alison Power	Director of Operations
Karen Lough	Director of Operations
Rebecca Driver	Director of Communications
Nick Chatten	Acting Director of Estates & Facilities
Nicky Leach	Director of Logistics & Patient Services
Allan Harkness	Divisional Director
Debo Ademokun	Divisional Director
Julia Jenkins	Divisional Director
Chris Backhouse	Divisional Director
Julia Jenkins	Divisional Director

**IN ATTENDANCE:**

Andy Lehain	Deputy Director of Finance
John Wilding	Deputy Head of Business Informatics
Rebecca Pulford	Associate Director of Nursing
Kay Hamilton	Associate Director of Nursing
Emma Sweeney	Associate Director of Nursing
Bee Anthony	Associate Director of Operations
Sarah Smith	Matron
Tammy Diles	Deputy Company Secretary (Scribe)

***Items were not necessarily discussed in order of the agenda***

**APOLOGIES:**

Nick Hulme, Chief Executive Officer, Dawn Scrafield, Director of Finance, Crawford Jamieson, Site Medical Director and Denver Greenhalgh, Director of Governance

ITEM		RESPONSIBILITY
15/19	<p><b>APOLOGIES/INTRODUCTIONS</b></p> <p>Mr Moloney welcomed everyone to the meeting. He reported that Mrs Greenhalgh would be absent from the meeting as she was working on the CQC PIR that had to be submitted by Monday 25 March 2019.</p> <p>Mr Moloney expressed his concern in relation to the quality of some of the papers submitted to the Executive Management Committee. He also noted the absence of some of the papers or papers being requested to be added to the agenda at very late notice resulting in not allowing any of the members to read the papers, have sufficient conversations, let alone approve them. He</p>	

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	<p>stated that going forward, with the support of Ms Diles, the agenda and papers would be shared in sufficient time to allow plenty of time to write and submit the papers. Going forward, any late paper would be removed from the agenda.</p> <p>Mr Moloney concluded that he appreciated there was a lot going on at the moment but he wanted to remind members that Executive Management Committee was a subcommittee of the Board and was concerned that if the quality of the papers were observed by a Non-Executive Director that it would reflect poorly on the Committee.</p> <p>Apologies were noted and recorded as above.</p>	
16/19	<p><b>MINUTES OF THE LAST MEETING</b></p> <p>The draft minutes of the previous meeting were recorded as a true and accurate record subject to some minor changes.</p>	
17/19	<p><b>COMBINED ACTION LOG AND MATTERS ARISING</b></p> <p>The Committee reviewed and noted progress of actions received to date. The action chart would be updated and circulated with the minutes.</p>	
18/19	<p><b>OD TACTICAL PLAN UPDATE</b></p> <p>Mrs Lough apologised that the OD report was not sufficient for the meeting. She reported that the OD delivery group had been set up and had agreed the terms of reference.</p> <p>Dr Gordon stated that now the strategy was finalised, it should be incorporated into the OD plan as this was an important part of engaging with the leadership roles. It was agreed that the OD plan would be added to the EMC meeting and that the terms of reference and OD plan would be circulated to members following the meeting.</p>	KL
19/19	<p><b>COMPLAINTS. SI AND NE UPDATE</b></p> <p>Mrs Morgan presented a situational report highlighting that a more in depth informative paper would be presented at the April meeting.</p> <p>Mrs Morgan informed members that she had met with all the divisional leads to understand what the barriers were, what worked best for them, if they required any executive support, and if they were achieving their trajectories. She was pleased to report that a complaints manager had now been appointed.</p> <p>Mrs Morgan was pleased to report that the number of long overdue complaints had reduced significantly.</p> <p>Mrs Morgan reported that the SI was in a more challenging position and that the Duty of Candour was not being undertaken in a timely manner. She encouraged all members to complete their reports within the agreed timescale of 40 days, to allow time to answer any additional questions. Mrs Morgan reminded all members that this was part of the well-led framework.</p> <p>Dr Ademokun informed members that Ms Evans was undertaking a piece of work due to themes arising in diagnostics in relation to staff attitude.</p> <p>Mr Moloney informed members that training was being provided for all staff</p>	CM

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	<p>who were drafting responses. He gave an example of a complaint from November 2018 that had been extended five times and stated that this was not an isolated incident.</p> <p>Dr Tillett spoke of how important it was for the families to receive feedback and agreed with Mrs Hamilton and her divisions' mantra of keeping the family informed and involved throughout stating that by doing so, it supported with the final call and closing the complaint having built up rapport with them.</p>	
20/19	<p><b>MANDATORY TRAINING UPDATE</b></p> <p>Mrs Howlett gave a brief update in relation to mandatory training. It was agreed that a more comprehensive paper would be presented at the April meeting.</p> <p>Mrs Howlett reported that mandatory training compliance had increased. There had been an increased activity and she requested that all members be patient with the team uploading the data, as there had been examples of frustrated managers not behaving appropriately when requesting updates of their staff's training compliance.</p> <p>Mrs Howlett reported that all auto reminders had informed staff of their compliance and what was outstanding and in need of completion. The members asked if this was something that could be done by robotics instead of staff having to send this information out and it was agreed that Mr Meers would look into this matter.</p> <p>Mrs Howlett gave an update in relation to the previous action log, requesting Board approval to implement actions for staff not completing their mandatory training. She stated that due to agenda for change, there would not be a need for this action and gave an example that any band 8a or above could be taken down a grade or not go through the gateway if their staff compliance was not up to date.</p> <p>Mrs Howlett was provided with feedback in relation to the content of some of the courses. She informed members that the specialist area provided and reviewed the course content, but stated that If there was any further feedback she was happy for members to email her with the information.</p>	<p><b>LH</b></p> <p><b>MM</b></p>
21/19	<p><b>CANCER PERFORMANCE RECOVERY PLAN</b></p> <p>Mrs Anthony presented the cancer performance report highlighting that the organisation was moving forward with the plan and was still on track to deliver in May. She stated that she had hoped March would have been better than it was currently showing. She informed members that the organisation was not seeing as many treatments going through and that additional clinics were being implemented. Mrs Anthony stated that following the finance report presented at the meeting, she was concerned that there was a fine line with not overspending, yet having to put on additional clinics which would obviously have a detrimental impact on the budget.</p> <p>Ms Power confirmed that there was a concern as the treatments were unusually low and that she was supporting with what measures could practically be put into place.</p>	

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	<p>Mr Moloney reported that he was more assured and that the direction of travel was better.</p> <p>In response to a question from Ms Leach, Mrs Anthony confirmed that there was better buy in from clinicians', preparation was being undertaken in a more robust way and she described it as feeling better all round.</p> <p>Dr Tillett reminded members of the harm reviews, she stated that the new oversight tumour leads had been discussed and that the Cancer Board meeting had taken place the previous day.</p> <p>Discussions ensued in relation to cancellations. Mr Bowditch expressed his concern informing members that it also had an impact on his cases and gave examples of surgery being bumped due to ITU access. Mr Moloney supported Mr Bowditch's comments and requested that Mrs Lough support in understanding the underlying drivers and what the regular cancellations were.</p>	KL
22/19	<p><b>2019/2020 PLAN FINANCE CIP AND FINANCIAL RECOVERY PLAN UPDATE</b></p> <p>Mr Lehain presented the finance report, highlighting that month 11 had delivered surplus to plan for the first time, and with the additional income from the Clinical Commissioning Group, and as long as there were no financial shocks, he was optimistic the organisation would meet the control total.</p> <p>Mr Moloney spoke of the relationships that had been built with the CCG and requested that they were not to be underestimated.</p> <p>Members spoke of the additional transformation funds available which included A&amp;E, 18 weeks and cancer. All members agreed that when requesting additional money, it needed to consider transformation and not just consider it be used to increase additional head counts. All members agreed that CIP meetings needed to be different and to focus on being more challenging and not just trying to keep reducing money but how to use it differently.</p> <p>Mr Moloney expressed his concern as the paper provided was not what he had expected. He reminded members that the plan would be submitted to NHSI on 4 April following final approval at F&amp;P meeting, but that members present had not had sight or the opportunity to comment. Mr Moloney requested that the planning process for the next year be done differently. It was agreed that the plan would be shared with all members seeking comments back to Mrs Scrafield or Mr Kirk.</p> <p>Mr Wilding presented the AF position statement for 19/20 which included the proposals for the corporate areas. He stated that there were challenges for corporate but that they were still working progress and would be resolved over the next few weeks.</p>	DS / JK
23/19	<p><b>WORKFORCE RECRUITMENT UPDATE</b></p> <p>This item was deferred to April 2019 agenda.</p>	
24/19	<p><b>STRATEGY IMPLEMENTATION GOVERNANCE &amp; PLAN REPORT</b></p>	

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	<p>Dr Gordon presented the final version of the Strategy. He gave thanks to the Divisions for inviting him to attend their meetings and for sharing their views and input.</p> <p>Dr Gordon reported that there had been no material changes from the January 2019 approved version, and that it was merely commentary changes and how the Strategy would be implemented. Dr Gordon was delighted with the level of engagement and stated that the document was to be used as a stimulus to thinking and to be used by the whole organisation.</p> <p>Dr Gordon informed members that the first of the Advisory Group Meetings, chaired by Mr Ed Garrett and Mr Hulme had taken place and that the document should be used as a template for the healthcare system through alliances.</p> <p>All members supported the document for approval at the Board of Directors meeting in April.</p>	
25/19	<p><b>BUSINESS PLAN 2019/20</b> This item was discussed under Item 22/19.</p>	
26/19	<p><b>CORPORATE RISK REGISTER</b> Ms Davies presented the Corporate Risk Register in the absence of Mrs Greenhalgh. She stated that all risks had been reviewed in line with the policy.</p> <p>Mr Moloney asked what risk members would like to undertake a deep dive on, it was agreed that high mortality rates would be added to the April meeting and any further requests would be forwarded to Ms Diles.</p>	All
27/19	<p><b>POLICY REGISTER UPDATE</b> This item was deferred to April 2019 agenda.</p>	
28/19	<p><b>TIME MATTERS: BOARD PROGRAMMES OF WORK</b> Mr Moloney reported that the Time matters Board paper was there for information and any further comments to be sent to Mr Catling.</p>	
29/19	<p><b>ANY OTHER BUSINESS</b> Mr Robinson presented a paper in relation to contractual changes to section 75 stating that there would be greater improvements and be more cost effective. He requested that all members acknowledged the five points raised on page 2 and approve for submission to the Board of Directors.</p> <p>Mr Moloney reported that as far as he was concerned the contractual changes made complete sense.</p> <p>All members approved the document for submission to the Board of Directors.</p> <p>Mrs Lough spoke of the RTT and diagnostics standard which had not been met for the last six months. She stated that there had been a rise in the number of patients and that she was not assured. She informed members that she was setting up a half-day session for all Divisions to present their</p>	

ITEM		RESPONS- IBILITY
	trajectories, hear others and to understand what the needs were. She encouraged all members to attend.	
	<b>DATE OF NEXT MEETING</b> 18 April 2019, 9.30am-12.30pm, Classroom 7&8, Ipswich Hospital	