

**Executive Management Committee  
Minutes of the meeting held in Executive Offices Meeting  
Room, Colchester General Hospital  
On 15 May 2018, at 1:00pm**

**PRESENT:**

Dr Shane Gordon, Director of Integration (Chair)  
Dr Barbara Buckley, Medical Director  
Ms Alison Power, Director of Operations  
Mrs Leigh Howlett, Deputy Director of OD & HR  
Mr Mike Meers, Director of ICT  
Mrs Dawn Scrafield, Director of Finance  
Dr Angela Tillet, Medical Director  
Mr Paul Fenton, Director of Estates & Facilities  
Dr Ann Alderton, Company Secretary  
Dr Allan Harkness, Divisional Director  
Mr Chris Backhouse, Divisional Director  
Mr Arun Sebastian, Divisional Director  
Mr Rob Power, Head of Operations  
Ms Kay Hamilton, Interim Head of Nursing  
Ms Tammy Diles, Deputy Company Secretary (scribe)

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

**1.1 WELCOME AND APOLOGIES FOR ABSENCE**

Dr Gordon welcomed everyone to the meeting. Apologies for absence were received from Mr Nick Hulme, Chief Executive, Mr Neill Moloney, Managing Director, Mrs Catherine Morgan, Director of Nursing, Ms Alison Armstrong, Head of Operations, Ms Emma Sweeney, Head of Nursing and Ms Tracy Beason, Delivery Suite Matron.

**1.2 DECLARATIONS OF INTEREST**

Standing declarations were received from Mr Paul Fenton and Dr Ann Alderton, regarding their joint roles with Ipswich Hospital NHS Trust.

**1.3 DRAFT MINUTES OF MEETING HELD ON 17 APRIL 2018**

The draft minutes of the meeting held on 17 April 2018 were approved as a correct and accurate record.

**1.4 MATTERS ARISING FROM THE ACTION CHECKLIST**

All matters arising from the action checklist were recorded as being completed.

**2.1 ACCOUNTABILITY FRAMEWORK**

Mrs Scrafield presented the current accountability framework noting that there had been marginal movement in some of the arrangements within Medicine, and that other service areas had stayed the same. She informed members that a paper was being presented at each of the assurance committees in May to inform NEDs of where the Trust was currently reporting.

Mrs Scrafield informed the members of an excellent workshop that had recently taken place. She reported that there had been some great ideas that had come from this event and they were being incorporated into the plan. A further workshop in Ipswich was planned.

Members spoke of all the indicators being included within the plan, how they would be captured over a period of time and that they needed to be collected and recorded consistently.

Mrs Scrafield reported that data would be collected from day one and wouldn't be looking retrospectively. Members requested to be reminded of the core indicators and it was agreed that Mrs Scrafield would send out the information following the meeting.

**Action: DOF**

**Resolved: The Committee noted the update**

## **2.2 DAY 1 BUDGETS AND BUSINESS PLANNING**

Mrs Scrafield spoke of a helpful session the previous day where senior leaders had been talking through the plans for ESNEFT. This had included stitching together the budgets at service level doing a sense check on cip requirement assessing deliverables and finalising. This would allow the Board to approve the first week of July. Second part Sets out business plans.

**Resolved: The Committee noted the report**

## **3.1 STP UPDATE**

Dr Gordon reported that the decision on the pilot bid was expected imminently which would strengthen the STP.

Dr Gordon spoke of the event that had taken place recently at Trinity Park, Ipswich. He informed members that many senior representatives involved with the STP had attended and had discussed the very ambitious ambitions giving examples of eradicating child poverty, living alone and obesity.

**Resolved: That the committee noted the update**

## **3.2 SHORT UPDATE ON PARTNERSHIP WORKING**

Dr Gordon reported that the transaction was on track for 1<sup>st</sup> July 2018. Preparation sessions had taken place the previous week at a Board to Board Meeting ready for the NHSI in early June.

Dr Gordon was pleased to report that there had been good feedback on preparations.

Dr Gordon reported that the vision would be about leading and enabling strategies being clinically led and focussing on time matters. This needed to be done consistently with regular engagement, coordination and wider environment support to deliver patient benefits.

Members spoke of the issues within outpatients and getting the computers to work quicker, Mr Meers assured members that a business case was being presented to the investment group to support.

**Resolved: That the Committee noted the update on the partnership**

## **3.3 SUBMISSION FROM INVESTMENT GROUP**

Committee members received and noted the previous minutes from the Investment Group.

Mrs Scrafield discussed the challenge of supporting three investment groups and that it would be ideal to only support one the following month. The members discussed that this would ultimately be the Chief Executives decision and would be taken off line.

**Resolved: The Committee noted the update**

### **3.4 INTERNAL AUDIT GDPR**

Mr Meers presented the internal audit informing members of the limited assurance at CHUFT and that there was a number of actions taken to align as part of merger. He informed members of briefing sessions that had been taking place and encouraged managers to allow their staff to attend. He also stated that Sarah Preston would be happy to visit departments and present to teams.

Mr Meers spoke of the process with sharing information outside of the organisation, that you could no longer charge for requesting medical records which had previously been an income for the Trust and the process behind redacting information.

Members agreed that all staff should attend, especially focussing on administrative staff. Mr Meers confirmed that further dates would be circulated and both he and Mrs Scrafield stated that it was the responsibility of the managers for ensuring that all staff attend. They highlighted that if an individual could prove that their data had been breached and was taken through the courts the consequences were that the financial penalties could be catastrophic.

It was agreed by all members that the uptake for training would be presented at Division meetings. Mr Meers confirmed that there was a regular item on the Audit and Risk Assurance Committee.

**Resolved: The Committee noted the update**

### **3.5 ESNEFT TOR**

Dr Alderton presented the draft terms of reference highlighting that there had been two sets shared with the Chief Executive who had agreed the Ipswich version. She stated that she would be reviewing them with a critical eye.

The members discussed the terms of reference and Mrs Scrafield highlighted that these would have an impact on the scheme of delegation. Dr Alderton confirmed that Mr Hulme had requested no groups reported into this committee.

Dr Alderton requested that members reviewed the terms of reference further and submitted any comments to her. She also highlighted that she would attach the reporting chart to ensure relationships would work.

**Resolved: The Committee noted the update**

### **3.6 DAY 1 COMMUNICATIONS**

Members discussed the day one communications plan. The group were reminded that it was the NHS's 70<sup>th</sup> birthday and the plan was business as usual.

The committee discussed the work being undertaken on the intranet and internet. It was agreed that historical data should be stored appropriately and that the new website should be more user friendly.

**Resolved: The Committee noted the update**

### **4.1 INTERNAL AUDIT OF WARD VISITS**

The committee agreed that this papers would be presented and discussed at different forums for actions to be taken and that the Inpatient survey would be aligned alongside with plans to support both.

Mrs Scrafield highlighted her concern that this issue had been presented for the past three years. The committee discussed that it was the responsibility of the patient and the staff member to protect property and that an agreed approach was taking place throughout the organisation. Members agreed that the Trust needed to accept that patients would move

throughout the organisation and the Trust needed to ensure there were better processes in place to protect their property and promote the importance of caring for patient's property.

**Resolved: The Committee noted the update**

#### **4.2 EMERGENCY AND CONTINGENCY PLANNING**

Ms Power highlighted that although the report was dated May 2018 the investigation had taken place in July 2017 so was not reflective of the current position. She was pleased to report that although there were still issues and challenges following on from a visit from NHSE who had reported marked improvements.

The committee agreed that the wording needed to reflect that the practice had changed and that there was recognition moved into a better place, there was still work to do and lessons learnt need to improve especially where action plans were they needed to be followed up.

Mr Fenton reported on the training that was taking place across both sites and that Ivan Cottrell and Alex Scott had already undertaken a lot of work in making changes.

The group discussed the shortages in loggists for major incidents reporting that Ipswich had over 50 and Colchester had in the region of 5.

**Resolved: The Committee noted the update**

#### **5.1 SITE MATTERS UPDATE**

Mr Fenton reported that the new diagnostic building was now operational. The former building would be removed on 30 May at 5am.

Mr Fenton was pleased to report that the time garden cabin had been craned in and would be officially opened on 18 June.

Mr Fenton reminded members that the new car parking arrangements would be commencing 1 July. Conversations ensued regarding car parking and Mr Fenton stated that there would be an additional 60 spaces when the resurfacing concluded. He also reported that conversations regarding access from Northern Approach would be commencing.

**Resolved: The Committee noted the update**

#### **6.1 CANCER PERFORMANCE UPDATE**

Ms Power spoke of the March and the improvement on last year but recognised there were challenges in other areas. She reported that there had been issues in May due to breast.

Ms Power reported that Ipswich were having some issues at the moment and shared learning would take place to support them.

**Resolved: The Committee noted the update**

#### **8.1 ANY OTHER BUSINESS**

Mr Power presented a paper in relation to Urology recruitment incentives. The committee agreed the need to incentivise consultants to come to Colchester but discussed that it was not always about money.

Members agreed that this had been done at Ipswich Hospital and that their policy should be adapted to ensure consistency across both sites.

The members discussed how the money had been decided and the clauses needed to be investigated to protect the Trust.

Members agreed that they were supportive of the principle of paper, it needed to be consistent with Ipswich and asked what was timeline for advertising. Mr Power was to work with HR Business Partner.

Dr Alderton presented the corporate calendar, including Board, Council Days and EMC. She stated that invites would be circulated soon with venues to be looked into.

**9.1 DATE OF NEXT MEETING**

19 June 2018, Exec Offices Meeting Room 1pm-3pm

Meeting declared closed.

Blue	Completed and will be removed from chart for next iteration.
Green	Status updated and on track within the timescale.
Amber	Status not updated/completed and the deadline passed.
Red	Status not updated/completed and deadline passed by more than one month.

Minute Reference	Item	Agreed action	Responsibility	Deadline for completion of action	Item for future EMC meeting	Action status	RAG
<b>Minutes from 15 May 2018</b>							
2.1	Accountability Framework	Reminder of all core indicators to be circulated to members following the meeting	DOF	15 May 2018	N	Email sent to all members	<b>B</b>