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**MINUTES OF THE BLACK COUNTRY ALLIANCE PUBLIC BOARD MEETING
HELD AT 10:30AM ON WEDNESDAY 12TH OCTOBER 2016
IN MEETING ROOM 10, MLCC, WALSHALL HEALTHCARE**

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| Present: | Mr R Samuda (RS) | SWBH Chair |
| | Mr T Lewis (TL) | SWBH CEO |
| | Dr P Harrison (PH) | DGFT CEO (interim) |
| | Mrs J Ord (JO) | DGFT Chair |
| | Mr R Kirby (RK) | WHC CEO |
| | Mrs D Oum (DO) | WHC Chair |
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| In Attendance: | Mr T Whalley (TW) | Black Country Alliance Programme Director |
| | Mrs J McManus (McM) | Black Country Alliance Project Manager |
| | Mrs J Ilic (JI) | Comms Lead |
| | Mr D Fradgley (DF) | Executive Sponsor |
| | Miss S Astley (SA) | Minute Taker & EA to Mr T Whalley |
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| Apologies: | Mrs K Dhami (KD) | Governance Lead |

BCA/16/89 INTRODUCTIONS / CHECK IN

Mrs Ord welcomed all to today's meeting, and in particular, Mr Harrison who is attending for the first time in his capacity as interim Chief Executive at Dudley Group.

Mr Lewis asked that formal thanks be recorded to Ms Clark for all the work she had put into acute care collaboration within the Black Country Alliance and members of the Board agreed to do so.

There were no members of the public attending the meeting.

BCA/16/90 APOLOGIES

Apologies were noted from Mrs K Dhami.

BCA/16/91 MINUTES OF LAST MEETING – 31ST JULY 2016

The minutes of the public meeting held on the 31st July 2016 were recorded as being a true reflection of the meeting.

ACTION

BCA/16/92 REVIEW ACTIONS DUE

The Board noted the actions log as presented Mr Lewis confirmed that his colleagues would be in contact with Mr Stanton at DGFT and that this action (12) could be closed. Mr Whalley reported that action 26 was also completed and referenced within Programme Director's report elsewhere on the agenda.

BCA/16/93 CHAIR'S BUSINESS

There was no business from the Chair, other than a reminder to all those presenting papers that they could assume papers had been read and so proceed to only reiterate key points to enable maximum time for questions and debate from Board members.

BCA/16/94 BCA COMMS & ENGAGEMENT REPORT

Mrs Ilic presented the comms & engagement report. Board members were asked to note the progress and specifically consider if they wished the Stakeholder Group to go ahead as scheduled in November or postpone until a later date. The reason for considering postponement being the close proximity to a recent STP Stakeholder event.

Mr Kirby stated his view that it wouldn't make sense to double up the BCA Stakeholder Reference and STP Groups. Mr Lewis stated the STP brand and the BCA should be kept separate.

Members agreed to cancel the BCA Stakeholder Group in November and re-visit the decision in December 2016 if the proximity was likely to cause any confusion among those invited to attend.

ACTION:

- Consider Postponing Stakeholder Group.

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BCA/16/95 CLINICAL REFERENC GROUP CHAIR’S REPORT

Dr Harrison presented the Clinical Reference Group (CRG) Chair’s report

Dr Harrison confirmed that due to taking up the position of Interim Chief Executive Officer at Dudley he has now stood down from his position as chair of the CRG. A formal process is being undertaken to identify a new Chair for the CRG.

There is significant enthusiasm for a single larger scale clinical conference next year rather than a series of smaller, more localised ones. Medical Directors and Director of Nurses felt they, and others, may be required to attend many of the smaller ones and therefore they felt it would be more pragmatic to have one large conference similar to the one held in 2016.

Mr Whalley commented that where there was value, smaller, modest conferences could and should still take place, for example, Urologists are planning a conference in November to progress their thinking for Black Country Urology Network.

BCA Board agreed to go ahead with one large conference, with staff having further option to carry out modest mini conferences around particular services if useful and if local budget allowed.

The BCA bid for piloting the Associate Nurse role has been successful. Chief Nurses and HR Directors have discussed other areas of substantive nurse recruitment where collaboration across the BCA would be beneficial. Mrs Overfield, Chief Nurse at Walsall is leading on the Associate Nurse pilot and will provide an update for next BCA Board on this and other thoughts for work we might do better together. Mrs Ord requested an overview of the scope of work to be considered at the November or December Board.

ACTION:

- Mrs Overfield to provide update to November or December’s BCA Board regarding Associate Nurse pilot and regarding possible scope of work for substantive nurse recruitment.

MM with
RO

BCA/16/96 PROGRAMME DIRECTORS UPDATE

Mr Whalley provided an update on the Programme Directors report.

Mortality Review Network (MRN) – Mr Whalley confirmed that all Mortality leads from the 3 Trusts have met. Each Trust shared their current processes for identifying and undertaking Mortality Reviews, identifying and learning lessons and for providing assurances through to Trust Boards. The MRN identified a number of key themes where collaboration is highly desirable across the Black Country Alliance. Mr Whalley asked the Board to endorse the Terms of Reference that Members of the MRN had produced.

Resolution:

Members endorsed Terms of Reference

Procurement – Mr Whalley reported the Procurement Director (Mr Coley) has started in post and has begun to produce a set of proposals for work to be carried out. Mr Lewis requested assurance that this would enable benefits to be realised from April 2017, and that we would not just receive a plan or plan for a plan.

Mr Whalley confirmed that there are already specific projects delivering financial benefit in the current fiscal year, and an expectation that there would be further projects defined that would deliver benefit in 17/18. In parallel, Mr Coley will work on other initiatives such as eCatalog, eEnablement and Nurse Procurement model as a means to go further faster.

Mr Fradgley confirmed, as executive sponsor, that actions were being put in place to have a plan that will deliver benefits from April 2017.

ACTION:

Mr Coley to provide update to BCA Board in November.

DC

BCA/16/97 INTERVENTIONAL RADIOLOGY

Mr Whalley presented the paper on Interventional Radiology. Mr Whalley reminded board members that the pilot of 7 day nephrostomy service had been established as a means to close the gap on national 7 day requirements more sustainably together. The report clearly showed the pilot had been successful. In terms of patient outcome with more patients than expected benefiting from clinically necessary nephrostomies, staff benefiting from clearer pathways and less onerous rotas, and the Trusts benefitting from sharing the service rather than replicating the service in each Trust. The Steering Group had considered extending access to 8-8 or to 24/7, but felt that the increase in costs, the need to recruit additional staff and the stretch on those already providing the service wasn't the best way to proceed. Better for patients and for the Trusts to pilot extending 9-5 services in other urology and gastroenterology services so that additional patients may benefit from the service. The Steering Group therefore recommended continuing to provide 9-5 access to nephrostomies and to plan extending the range of services on a 6 month pilot basis starting probably in April 2017.

Mr Lewis thanked Dudley Group for their leadership and drive on this Interventional Radiology project and for providing such a comprehensive report on the pilot

Resolution:

BCA Board members accepted the five recommendations from the Interventional Radiology Steering Group listed on page 2 of the report.

BCA/16/98 BACK OFFICE PHASE 1

Mr Whalley presented the Back Office Report. And asked the BCA Board to note the progress made to date and endorse the specific proposals coming forward from the teams leading the Temp Staffing and Clinical Coding projects.

Board members noted the mixed progress from among this first wave of back office projects. Mrs Ord commented how important it was to proceed with work that would help tackle agency spend. Mr Lewis stated that all 3 Trusts have a challenge in that respect, and that the teams need to now accelerate the work based on the recommendations within the report. Mrs Ord stated that the recommendation in respect of e-rostering systems was straightforward to endorse, but wanted more information on the other 2 recommendations. Mr Whalley stated that this work would now be done if the Board were content with the direction of travel, and more specific proposals with detailed financial modelling would be brought back.

On that basis, BCA Members endorsed all 3 recommendations from the Temp Staffing Team. The progress on Clinical Coding and the recommendations made by that team were also endorsed.

Mr Lewis said it was important for the Communications Team to highlight within the Trusts and outside publicly that the BCA Board have agreed to collaborate on the creation of a Black Country Bank as part of a wide ranging focus on developing our people and tackling the challenges we face with agency spend.

ACTION:

- Mrs Ilic to discuss with Comms lead across the 3 Trusts best way to promote BCA Bank initiative
- Mrs McManus to ensure that the temp staffing and clinical coding back office projects are now accelerated, Plans to be included in November Board update

Jl

MM

Members were content with what has been identified within the report and appendices for Estates & Facilities, R&D Governance, Legal Services and Occupational Health.

BCA/16/99 REFLECTIONS ON THE MEETING

There were no reflections to note.

BCA/16/100 ANY OTHER BUSINESS

No other business was discussed.

BCA/16/101 **DATE AND TIME OF NEXT MEETING**

9th November @ 10:30am

Ground Floor Committee Room, Management Block, Sandwell Hospital

Chair: Mrs D Oum