



**TRUST BOARD MEETING  
MINUTES  
Open Session  
30 May 2019**

<b>PRESENT</b>	Andy Field	Chairman
	David Fluck	Medical Director
	Chris Ketley	Non-Executive Director
	Neil Hayward	Non-Executive Director
	Keith Malcouronne	Non-Executive Director
	Simon Marshall	Director of Finance & Information
	Hilary McCallion	Non-Executive Director
	Louise McKenzie	Director of Workforce Transformation & OD
	Suzanne Rankin	Chief Executive
	Tom Smerdon	Director of Strategy & Sustainability
	James A Thomas	Chief Operating Officer
	Sue Tranka	Chief Nurse
	Meyrick Vevers	Non-Executive Director
	Marcine Waterman	Deputy Chairman
<b>APOLOGIES</b>	Mike Baxter	Non-Executive Director
<b>SECRETARY</b>	Liz Davies	Company Secretary
<b>IN ATTENDANCE</b>	Sal Maughan	Associate Director of Corporate Affairs and Governance

Minute		Action
<b>O-66/2019</b>	<b>Staff Story</b>	
	<p>The Director of Workforce Transformation introduced the staff story and welcomed two members of the play team, Moira Irving-Thomas and Claire Power to the meeting.</p> <p>Moira and Claire gave an interesting insight into the work of the Health Play Specialist, and it was noted that the full Presentation would be added to the May Board papers on AdminControl and on the Trust's website.</p> <p>In summary, Health Play Specialists use their understanding of child development and therapeutic play activities to help children cope with any pain, anxiety or fear they might experience during their time in hospital. Play specialists work with children of all ages and conditions and use play to prepare children for hospital procedures such as injections or operations. They also help children regain skills lost through the effects of illness or hospitalisation and support families, including siblings. Their main challenges are distracting anxious children, including children with special needs and anxious parents. The Play team had recently won the Team of the Month Award and had a 99% success rates for accompanying children and young people to theatre and for procedures.</p> <p>It was noted that the team work as part of a multi-disciplinary team including physiotherapy, speech &amp; language therapy, oncology, children and adolescent mental health services, dietician, etc.</p> <p>The Chief Executive reflected on the possibility of liaison with our Senior Adult Medical Services (SAMS) wards in relation to the role of therapist and the older population and on the prospective strategic workforce implications. The Director of Workforce Transformation added that we might consider this concept as part of our strategic workforce transformation.</p> <p>The Medical Director referenced a paper on delirium and measurement and how this could change the outcome for patients.</p> <p><b>Actions</b> It was agreed to circulate the delirium paper to Board once published.</p>	<b>DF</b>
<b>O-67/2019</b>	<b>Declarations of Interest</b>	
	There were no additional declarations of interests.	
<b>O-68/2019</b>	<b>MINUTES</b>	
	The minutes of the meeting held on 25 April were AGREED as a correct record.	
<b>O-69/2019</b>	<b>MATTERS ARISING and ACTION LOG</b>	
	The Trust Board reviewed all of the actions contained within the minutes of the previous meeting. Nominated leads confirmed that all the respective actions had been completed, appeared as agenda items for the meeting or	

	<p>were on track within agreed timescales.</p> <p>It was AGREED to close action O-29/2019; and the Chairman noted that good progress had been made on action O-44/2019 which was now complete.</p>	
	<b>REPORTS</b>	
<b>O-70/2019</b>	<b>Chairman's Report</b>	
	<p>The report was taken as read and the Chairman highlighted the following items:</p> <ul style="list-style-type: none"> <li>• A morning spent with the Theatres team observing two operations, one complex and one more straightforward which had provided a real understanding of this vital part of our Trust's work.</li> <li>• Observed a return to work training procedure that utilised a highly sophisticated dummy/robot to provide highly realistic training, and demonstrated a great use of technology in support of modern training.</li> <li>• The Anniversary of 20 years of monthly Church Services at St Peter's; the Chairman expressed thanks to all the staff who had helped ensure that so many patients were able to get to the chapel from the wards and enjoy an input to their spiritual well-being.</li> <li>• Attendance at a Surrey Heartlands governance meeting with the Deputy Chairman, it was noted that Surrey Heartlands was making good progress on defining the role of Lay/NEDs in their Governance structure.</li> <li>• Being invited to update the Trust's Administration Forum on the latest developments in the Trust and given the opportunity to explain the Non-Executive Director role. A discussion had also taken place on the vital role that administrators play as the "glue" that joins together all hospital activities.</li> <li>• A busy month meeting with Governors providing the opportunity for excellent discussion on a wide variety of topics. The Chairman thanked the NEDs for all the thought and effort that went into the preparation for the NED/Governor meeting and to the Governors for their attention, their insightful questions and their evident commitment to the Trust.</li> </ul> <p>It was noted that the Constitution Group meets at least annually and any agreed changes would subsequently be submitted to the Council of Governors and Trust Board for ratification.</p> <p><b>Action</b> It was AGREED to submit the Constitution to the Board annually.</p> <p>The Chairman's Report was RECEIVED by Board.</p>	<b>LD</b>
<b>O-71/2019</b>	<b>Chief Executive's Report</b>	

	<p>The Chief Executive took the report as read and highlighted the following matters:</p> <ul style="list-style-type: none"> <li>• Pride in Nursing and Midwifery Day; an inspiring day of talks, poster competition and awards. The Trust had some great internal and guest speakers, all offered different experiences and insight around the theme of 'Health for All'. Attention was drawn to the short video of Research Nurse, Megan McGee, reading her 'Proud of my Profession' poem. The Chief Executive said it was powerful and moving and had already had 6,000 views - <a href="#">short video</a>.</li> <li>• Positive conversations had taken place with three local councils about key worker housing opportunities and working together to address some of the issues we jointly face in making Surrey an attractive and affordable place to live. We are currently looking at a Trust wide 'rent a room' scheme which should prove beneficial to both those with spare rooms and to those seeking accommodation.</li> <li>• The importance of Wi-Fi; the Trust had completely replaced its previous installation with a market leading solution to ensure reliable coverage across the estate; it was noted this would be a key enabler in advancing the digital hospital and for staff to run their lives effectively.</li> <li>• Attention was drawn to the retirement lunch for Valerie Bartlett, which was to follow the Board meeting. Valerie had been with the Trust for ten years, during which time she held a number of board level roles including Chief Operating Officer, Deputy Chief Executive and Director of Strategy and Transformation working across North-West Surrey.</li> </ul> <p>The Chief Executive added that she had been delighted to be part of the recruitment panel to select the new Director for the North West Surrey Integrated Care Partnership and recorded congratulations to Jack Wagstaff and looked forward to working with him.</p> <ul style="list-style-type: none"> <li>• It was noted that the Director of Strategy &amp; Sustainability would be leading on the relationship with Well North. The Trust had now formally entered into a contract with them to complete a piece of work on engagement with colleagues, local people and key organisations to understand how the Trust can become a 'public asset' for the whole community. The work would help us shape the vision for the proposed investment in buildings and facilities and to understand our future role as a positive 'anchor institution' within the local area.</li> </ul> <p>The Board RECEIVED the Chief Executive's Report.</p>	
	<b>QUALITY AND SAFETY</b>	
<b>O-72/2019</b>	<b>Quality Report</b>	
	<p>This was the first quality report for 2019/20 and included the Trust's new quality improvement priorities led at Executive Level by the Chief Nurse and Medical Director. The priorities are shown in <i>blue italics</i> in the report and the 5 KPIs specifically set to capture outcomes, are the Quality of Care indicators</p>	

for the Trust Balanced Scorecard.

The following matters were highlighted from the report:

- *Medication Safety:* Improvement in medication safety had been identified as an on-going priority and the strategy developed to achieve this included improving the safety culture and reducing medication related harm in line with the WHO five-year challenge.

The Chief Nurse stated that the Trust's reporting of medication safety incidents had become more streamlined and it had been estimated that the number of reported medication errors resulting in *no harm* would increase by 15% to 852 by March 2020.

- *Infection Prevention and Control:* One of the current priorities for strengthening infection prevention and control was to reduce surgical site infections (SSIs). The SSI reduction programme was being led by the Divisional Director for Trauma, Anaesthetics, Surgery and Critical Care (TASCC) who was also the GIRFT SSI Trust Champion. It was noted that reducing SSIs would benefit patients through faster recovery, and efficiency benefits would include shorter hospital stays and fewer readmissions.

*Sepsis:* It was noted this had been a particular priority of the Trust for the past four years and that our Emergency Department had a dedicated Sepsis Team and a Deteriorating Patient Group had been formed in 2018/2019. It was anticipated that by Q4 all patients with sepsis would be identified and treated with antibiotics within one hour of identification and it was planned for sepsis performance to be reported quarterly in arrears for ED and inpatients from July 2019.

*Learning from Deaths:* The Medical Director reported that the next Learning from Deaths Q4 2018/19 Report was due in June 2019 The Risk Adjusted Mortality Index (RAMI) had remained within common-cause variation and was reported one month in arrears.

*Stroke:* It was noted that access within 4 hours remained a challenge and the Service had a programme of improvement. The Trust's aim by the end of Q4 2018/19 was for the Sentinel Stroke National Audit Programme (SSNAP) overall rating to be an A or B; however, solving direct access within 4 hours was considered a key requirement in achieving a rise in the Trust's SSNAP rating.

*Experience:* The Chief Nurse reported that in May we had appointed Helen Collins as the Trust's Head of Patient Experience & Involvement and that recruitment of a Complaint Response Writer was in progress.

It was noted that the Trust's 'arts in therapy' initiative was being supported by Marcine Waterman, Deputy Chairman and Peter Wilkinson, Consultant Cardiologist.

The Chief Nurse stated that the Trust had commenced a four month pilot in April to centralise the Complaint Officers from each clinical division into one team. Early indications had demonstrated a significant improvement in our response to complaints within the Trust target of 25 working days; and we

had achieved a performance of 84% for April and had sustained a performance in the high 80's during May.

Attention was drawn to the second experience-based co-design event which was scheduled for July 2019 and would include feedback on our two agreed improvement bundles<sup>1</sup>; i.e. promoting resolution of concerns when they first arise on the frontline, and agreeing the approach to handling a concern or complaint at the outset and working with the complainant to ensure a clear handling plan. It was noted that the Point of Care Foundation would be helping with the event.

The Chief Nurse reported on the new patient experience feedback system which was being trialled in ED during June 2019. It was noted that the Viewpoint system used standalone devices situated in the waiting room and main department, as well as IPADs and hard copies for those patients who are less mobile. It was planned to expand the pilot to the whole of Maternity and Women's Health Services, Medicine and the ED in due course.

Attention was also drawn to a pilot project in Maternity that had been carried out during February to capture electronically real-time individual patient feedback, which had found that privacy for the patient/carer would be an important factor in increasing response rates.

The Director of Strategy & Sustainability asked about the timescale for reporting back on the pilot and it was noted that the improvement and rollout strategy was currently in the process of being drawn up and included setting a timeframe for the whole hospital.

The Chief Nurse referenced the 'Helpforce Campaign' which offered a unified and integrated approach to NHS volunteering and would help with how we use our volunteers to support the capture of data and improve response rates.

A short discussion ensued around the concept of being a 'learning organisation' and the Trust's consistent themes for improvement which were being addressed via the Outpatient Transformation Project. The Chief Executive said it might be useful to provide a more granular analysis of the data for assurance purposes.

The Medical Director added that 'how we learn' was important and it was the function of education in the organisation to provide the necessary skills, and it was expected that the forthcoming National Patient Safety Strategy would ensure that an effective safety culture was embedded at every level, from senior leadership to the frontline.

The Chairman reflected on his visit with the Chief Operating Officer to the Hyper-acute Stroke Unit (HASU) which had highlighted the difficulty of ring-fencing stroke beds due to practical estate issues. The Chief Operating Officer added that pressure on our bed stock was extreme and we continued to experience high levels of bed occupancy.

---

<sup>1</sup> A bundle is a structured way of improving the processes of care and patient outcomes; using small, a straightforward set of evidence-based practices – when performed collectively and reliably have proven to improve patient outcomes.)

	<p><b>Action</b>          Arrange for the Head of Patient Experience &amp; Involvement to be introduced to the Council of Governors.</p> <p>The Board NOTED and obtained ASSURANCE from the Report.</p>	<b>SMA</b>
<b>O-73/2019</b>	<b>Quality of Care Committee Minutes</b>	
	<p>Hilary McCallion, Non-Executive Director and Chair of the Committee reported that May's Committee had been well attended and it had been a very busy agenda. It was noted that a good discussion on the NHS Long Term Plan and Trust Strategy had taken place.</p> <p>The Board RECEIVED the Minutes.</p>	
<b>O-74/2019</b>	<b>Volunteers' Annual Report</b>	
	<p>The Report had been approved at the Quality of Care Committee.</p> <p>The Chief Nurse noted that the Annual Report provided a summary of the key developments and achievements in relation to the Volunteers' service, and the following matters were highlighted:</p> <ul style="list-style-type: none"> <li>• During 2018/19 the service had increased by 16 to 490 volunteers reflecting a growth of 3.3%; an average of just over one new joiner in an average month, and represents a diverse age range, with different interests.</li> <li>• The Trust continues to participate in partnership with the Royal Holloway University which gives students an opportunity to volunteer at the Trust and Voluntary Support North Surrey which supports the Trust with additional resource for maintaining our external grounds.</li> <li>• Recognition in two new areas; the Staff Achievement Awards and the Runnymede and Spelthorne Volunteer Awards.</li> <li>• The Adopt a Grandparent continues to be a success and three new members had joined the scheme.</li> <li>• Celebrating the Trust's volunteers' hard work and dedication during Volunteers' Celebration Week.</li> <li>• The Strategy and Annual Plan to be to be formulated to incorporate national guidance, including a gap analysis benchmarking exercise.</li> </ul> <p>Neil Hayward, Non-Executive Director welcomed the report and sought clarification on the statement, "Refreshing our pre-existing work in response to the <i>2015 Lampard Enquiry</i>". The Chief Nurse said this referred to the <i>Savill Response and findings</i> from the investigation; for example ensuring that Trusts had a robust volunteers' appointments process in place.</p> <p>The Chief Nurse added she was the executive accountable for the Volunteers' Service and provided assurance stated that a clear set of action</p>	

	<p>areas for 2019/20 to strengthen our work in this national priority area would be overseen by the Trust's Deputy Chief Nurse.</p> <p>The Report was RECEIVED by the Board.</p>	
<b>O-75/2019</b>	<b>National Patient Experience Surveys Annual Update</b>	
	<p>The Trust participates in all key national surveys in order to improve operational performance and use the results to drive service improvement and deliver an improved patient experience.</p> <p>The report provides a summary of key national external surveys in patient experience from 2018/19. The two national surveys reported on this year:</p> <ul style="list-style-type: none"> <li>• 2017 National Inpatients Survey</li> <li>• 2018 National Maternity Survey</li> </ul> <p>Hilary McCallion, Non-Executive Director and Chair of the Quality of Care Committee (QCC) reported that detailed discussion had taken place at QCC and the Committee had taken assurance from the Report.</p> <p>The Board RECEIVED the Report.</p>	
<b>O-76/2019</b>	<b>Patient Experience Annual Report</b>	
	<p>The Board considered the Report held no surprises and that consistent improvement and incremental change in practice(s) are a fundamental part of clinical care and would strengthen operational performance in the coming year.</p> <p>The Board RECEIVED the Report.</p>	
<b>O-77/2019</b>	<b>PERFORMANCE</b>	
	<p>The Chief Operating Officer took the report as read and highlighted the following matters:</p> <p><i>A&amp;E</i></p> <p>The Trust recorded A&amp;E NHSI performance at 80.3%, which was a 1.9% decline on last month (82.2%); however had remained fairly static. The Trust's bed occupancy was running at 109% with the resultant pressure on the Trust's bed base and increased length of stay, and it was noted that the Trust was working with system partners to improve hospital flow.</p> <p>Hilary McCallion, Chair of Quality of Care Committee (QCC) reported that the high activity levels and the significant reduction in elective capacity had been discussed in detail at QCC.</p> <p>The Chief Operating Officer added for assurance that we are investing in the Trust's Ashford site to provide extra theatre capacity and would in due course deliver a better quality of patient care.</p> <p>Marcine Waterman, Non-Executive Director asked about the impact of LIVI (a</p>	

	<p>GP service for patients to access advice via video); it was recorded that the GP Federation had provided 25,000 additional appointments however this had not attenuated demand.</p> <p>The Chief Executive reflected that the Trust required robust patient data at primary level to inform a better understanding and that the prospective digital patient record operating across the system would be of benefit.</p> <p>The Chief Executive added that the business case for a LIVI extension had been discussed at the Integrated Care Partnership Board (ICP) and that patient feedback for the LIVI service was good and that discussions around this mutual service would continue at the ICP.</p> <p><i>RTT Incomplete Pathways Performance</i>  The Trust recorded a return to a compliant 92.0% for RTT Incomplete Pathways, which was 3.3% above our agreed trajectory due to reduced impact over the Easter period and an increase in activity being achieved earlier than scheduled. It was noted that the Trust remained significantly above the 86.7% national average reported for March.</p> <p>The Chairman recorded a 'well done' on the elective progress; a tremendous amount of work had been achieved through the winter period and it was suggested that this positive message should be fed back to teams from the Board.</p> <p><b>Action</b>  Arrange for a positive message to be fed back to teams from the Board.</p> <p><i>62 Day GP Referral to Treatment Performance</i>  The Trust recorded a non-compliant performance for April at 73.0%; delays had been recorded due to complex patient pathways.</p> <p>The Urgent Care Improvement Programme had continued with initiatives to tackle the ongoing high occupancy of the hospital. For assurance it was noted that through April-May there had been significant work on this programme including a dedicated Trust Executive Committee on urgent care improvement, a half day workshop between NHS Improvement local support team and ED consultants, and Divisional Director focus groups on specific urgent care pathways.</p> <p>The Board NOTED and obtained ASSURANCE from the report.</p>	<b>JAT</b>
<b>O-78/2019</b>	<b>Balanced Scorecard</b>	
	<p><i>People</i>  The Director for Workforce Transformation reported a decrease in spend on agency staff this month. It was noted that the detailed Workforce Report had been scrutinised at the People Committee yesterday; and that the Trust had a number of recruitment campaigns underway.</p> <p>Appraisal Training had continued and workshops are being held to upskill managers and address training needs in this important area.</p> <p>The Director of Finance &amp; Information noted that the new Scorecard layout was still undergoing refinement to represent the agreed KPIs, and that the</p>	

	<p>new Balanced Scorecard detailing the set of strategic measures would be submitted to Board in September.</p> <p><i>Finance</i> The Director of Finance and Information highlighted the following matters:</p> <ul style="list-style-type: none"> <li>• Biggest pressure was the spend on agency staff</li> <li>• Challenge to achieve the Trust's control total</li> <li>• GIRFT initiatives are doing well</li> <li>• Cash balance is healthy</li> </ul> <p>The Board NOTED and obtained ASSURANCE from the Scorecard.</p>	
<b>O-79/2019</b>	<b>Modern Healthcare Committee Minutes</b>	
	The Board RECEIVED the Minutes.	
<b>O-80/2019</b>	<b>Progress against Corporate Objectives</b>	
	<p>The Director of Finance &amp; Information noted that the Report contained a lot of information and required some refinement going forward.</p> <p>The Chairman stated that there was a level of assurance demonstrated on partnership working and the Trust had made good progress in the development of key relationships within the health economy and wider tertiary providers.</p> <p>It was noted that partnership working would be discussed at the forthcoming Board Away Day.</p> <p><b>Action</b> Berkshire Surrey Pathology Service to provide a Divisional report.</p>	<b>SM</b>
<b>O-81/2019</b>	<b>Integrated Digital Committee Bi-annual Report</b>	
	<p>The report summarised the key areas of activities over the last year in discharging its responsibilities and was taken as read.</p> <p>Hilary McCallion, Non-Executive Director observed that it was a helpful report.</p> <p>The Chief Executive reflected that the Board was cognisant of the importance of clinical engagement to successfully implement the Electronic Patient Record, and this transformational programme would require changes to working practices and culture for its effective delivery.</p> <p>It was noted this was a joint venture with the Royal Surrey County Hospital and plans were in progress to discuss alignment of our shared vision and principles in delivering this system across our organisations.</p> <p>Neil Hayward, Non-Executive Director reflected on the challenges in relation to the skills of people and readjustment requirement to deliver change. It was noted that the new system will bring significant opportunities to improve the safety, quality and efficiency of our services both within our hospital and across our system. Chris Ketley, Non-Executive Director and Chair of the Integrated Digital Committee suggested it might be helpful to demystify issues</p>	

	and showcase user stories.  <b>Action</b> Add this transformation project to the Board Masterclass timetable.	<b>LD</b>
<b>O-82/2019</b>	<b>Integrated Digital Committee Minutes</b>	
	The Minutes were RECEIVED by Board.	
<b>O-83/2019</b>	<b>People Committee March Minutes</b>	
	The Minutes were RECEIVED by Board.	
	<b>REGULATORY</b>	
<b>O-84/2019</b>	<b>Audit &amp; Risk Annual Report</b>	
	<p>The attached report had been approved at the Audit &amp; Risk Committee meeting held in May and summarised the key areas of activities over the last year.</p> <p>Keith Malcouronne, Non-Executive Director and Chair of the Committee noted it was a positive report and drew attention to the following:</p> <ul style="list-style-type: none"> <li>• The successful appointment of external auditors</li> <li>• Drawn together the risk work of the other sub-board committees</li> <li>• Significant conversations had taken place around special payments made by the Trust.</li> </ul> <p>Meyrick Vevers, Non-Executive Director added that the Committee had made good progress on the backlog of actions and that Mazars had got up to speed quickly following their appointment.</p> <p>The Board RECEIVED the Annual Report.</p>	
<b>O-85/2019</b>	<b>Self-certifications</b>	
	<p>As part of the Annual Plan Review process 2018/19, the board must sign off on self-certification and publish on the Trust's website. We are required to submit two self-certification documents. This paper details the first of these certifications and the Corporate Governance Statement will be submitted to Board in June.</p> <p>It was noted that it was no longer a requirement to submit the templates; NHS Improvement will retain the option each year of contacting a select number of Foundation Trusts to ask for evidence of self-certification by providing the relevant Board minutes and papers recording sign-off.</p> <p>The Board APPROVED the self-certifications.</p>	
<b>O-86/2019</b>	<b>Standing Orders</b>	
	The Standing Orders form part of the Constitution and are reviewed annually and presented to the Board for approval. It was noted that there were no substantive changes to the Standing Orders.	

	<p>The Chairman drew attention to 2.6.1 of the Standing Orders wherein it stated: “The Board may appoint one of the independent Non-Executive Directors as the Senior Independent Director in consultation with the Governors and the other Non-Executive Directors. The Board shall normally, but not necessarily, appoint the Deputy Chairman to this position.</p> <p>It was AGREED to change the wording to read, “.....The Board <i>could</i> appoint the Deputy Chairman to this position.</p> <p>Marcine Waterman, Deputy Chairman requested that any changes to the Standing Orders were highlighted in future.</p> <p>The Standing Orders were APPROVED by the Board.</p>	
<b>O-87/2019</b>	<b>Use of the Trust Seal</b>	
	<p>Under the Standing Orders, the Board received a regular update on the use of the Seal. The seal was last used in March 2019.</p> <p>- Seal Number 091 dated 24 May 2019 – EE Limited &amp; Hutchinson 3G UK Ltd lease in respect of telecommunications equipment at Ashford Hospital.</p> <p>The Board NOTED use of the Trust Seal.</p>	
<b>O-88/2019</b>	<b>ANY OTHER BUSINESS</b>	
	<p>Attention was drawn to two forthcoming events in July:</p> <ul style="list-style-type: none"> <li>• The Tea Party on the <i>5 July</i> being held on both hospital sites, as part of the <b>NHS Big Tea</b> providing the chance for people up and down the country to come together over a cup of tea and celebrate their local NHS hospitals’ charity.</li> <li>• The Trust’s first Community Day on the <i>6 July</i>.</li> </ul> <p>It was noted that Hilary McCallion, Non-Executive Director had kindly volunteered to host the tea party at Ashford Hospital.</p> <p><b>Action</b> Inform the Trust’s Fundraising Manager that Hilary had volunteered to host the tea party at our Ashford Hospital site.</p>	<b>LD</b>
<b>O-89/2019</b>	<b>QUESTIONS FROM THE PUBLIC</b>	
	<p>A question was posed in relation to patient transport coordination and it was agreed that the member of public would submit a written question in accordance with our new arrangements stated on the Trust’s website: <a href="http://www.ashfordstpeters.nhs.uk/meetings">http://www.ashfordstpeters.nhs.uk/meetings</a></p> <p>In reference to Paper 16.2 a question was put about e-referrals Appointment Slot Issue (ASI) rates; it was agreed that the member of public would submit a written question for response by the Chief Operating Officer.</p> <p>Reference was made to Papers 15.1 and 15.4 and the description pertaining to Complaints and ‘common cause variation’ and ‘special cause variation’. The Chief Nurse explained that the data in the reports related to different time periods and that the wording would be revised to aid understanding.</p>	

<b>O-90/2019</b>	<b>REFLECTION</b>	
	The Chairman recorded a thank you to the Emergency Department and noted that the Board was mindful of the challenges faced by staff there and throughout the hospital.	
	<b>DATE OF NEXT MEETING</b>	
	The next meeting of the Trust Board will take place on 27 June at Ashford Hospital.	

**Signed:** .....  
Chairman

**Date:** 30 May 2019