

ITEM: 1

MEETING:

Trust Board
Wednesday 21 November 2007

TITLE:

Minutes of the Trust Board meeting of 19 September 2007

SUMMARY:

Attached are the minutes of the Trust Board meeting of 19 September 2007

ACTION: For information and agreement

REPORT FROM: Mary Field, PA to Directors

<p>Financial Validation Lead: Director of Finance</p>	<p>Not applicable</p>
<p>Compliance with statute, directions, policy, guidance Lead: All directors</p>	<p>Not applicable</p>
<p>Compliance with Healthcare Commission Core/Developmental Standards Lead: Director of Nursing and Clinical</p>	<p>Reference: Not applicable</p>
<p>Compliance with Auditor's Local Evaluation standards (ALE) Lead: Director of Finance</p>	<p>Reference: Not applicable</p>
<p>Compliance with requirements of FT application and monitoring regime Lead: Director of Strategy and Performance</p>	<p>Reference: Not applicable</p>

The minutes of the Whittington Hospital Trust Board meeting held on Wednesday 19th September 2007 at 10.00 in the Postgraduate Centre room 4.

Present	Narendra Makanji	Chair
	David Sloman	Chief Executive
	Susan Sorensen	Director of Strategy and Performance
	Margaret Boltwood	Director of Human Resources and Corporate Affairs
	Kate Slemeck	Director of Operations
	Deborah Wheeler	Director of Nursing and Clinical Development
	Richard Martin	Director of Finance
	Philip Ient	Director of Facilities
	Siobhan Harrington	Director of Primary Care
	Celia Ingham Clark	Medical Director
	Pat Gordon	Non Executive Director
	Anne Johnson	Non Executive Director
	Maria Duggan	Non Executive Director*
	Dee Henry	Non Executive Director

In attendance Faridoon Madon Member of the PPI Forum

Minute taker Leon Beckett Executive Secretary

**arrived at 10:15am*

07/078 Apologies for Absence ACTION

07/078.1 Peter Farmer – Non Executive Director/Vice Chair
Helena Kania - Chair, PPI Forum

07/079 Declaration of interests

07/079.1 None

07/080 Chairman's Communications

07/080.1 The Chairman introduced David Hooper, Chair of North Middlesex Hospital NHS Trust, who gave the Board a talk on his experiences of the process of becoming a Foundation Trust. The Chair thanked him on behalf of the Board for a very interesting and informative talk.

07/081 Minutes of the meeting of 18 July 2007

07/081.1 The minutes were agreed as an accurate record subject to the following amendment:

07/069.3 – Foundation Trust project report

This was agreed by a vote of four in favour, one against and **eight abstentions, four of which were voting directors and four non-voting directors**

07/081.2 **Matters arising**

07/025.3: Access Performance Report (January 2007) – Siobhan

Harrington informed the Board that the draft report of the evaluation of the 'Meet and Greet' pilot had been completed. **She agreed to bring the final evaluation to the November Board meeting.**

SH

07/082 Chief Executive's report

07/082.1 In addition to his report David Sloman circulated the outline programme for the Open Day on 26 September and informed the Board that extensive local media coverage was expected. He urged colleagues to attend the Open Day and the Annual General Meeting.

07/082.2 David Sloman informed the Board that the consultation on the closing of N19 staff restaurant at weekends had generated heated debate. The restaurant currently supplies around 20 breakfasts, lunches and evening meals for staff at weekends in addition to meals for a small cohort of local people. Official closing date for the consultation is 19 September but there will be a final open meeting on 27 September. Doreen Henry said the restaurant was not well signposted and commented that the hospital was well visited at weekends. She said that the restaurant at the Royal Free is well used but is easily accessible. Anne Johnson said it would be beneficial if N19 could be kept open as it is the right environment for patients and relatives.

07/082.3 The Board noted the Chief Executive's report.

07/083 Foundation Trust update and Integrated Business Plan

07/083.1 Susan Sorensen outlined the changes since the last report. She asked the Board to note the key milestone date of the 13 December Board to Board session with the Provider Agency. Because of a backlog, Monitor have inserted a desk-top exercise in early January 2008 to determine the order in which trusts should be allowed to proceed with their applications for Foundation Trust status.

07/083.2 The Staff Ambassador scheme has led to increased recruitment of members, who have also been recruited through local events such as the Celebrity cricket match, Finfest in Finsbury Park and the Muswell Hill festival, which yielded a total of 200 new members. The process of recruiting members has been useful in revealing a diversity of opinions on the Whittington from the general public. There is a general lack of understanding of the role of governors and the Members Council and the Trust needs to work hard to get the right message across.

07/083.3 Doreen Henry told the Board that she was pleased at the efforts being made to contact hard-to-reach groups such as attendance at Finfest in Finsbury Park. She asked about monitoring diversity of the membership and contacting people who were not so well informed about foundation trusts. The membership of the Whittington needs to reflect local people for a local hospital. Susan Sorensen replied that information about members included postcode, ethnic group and age. Margaret Boltwood said that **an Equality Impact Assessment had been completed on how membership was being recruited and would be presented to the Foundation Trust Project Board.** The Chairman told the Board that he had been doing door to door recruitment in Haringey.

MB

- 07/083.4 Pat Gordon suggested that it would be useful to inform people what the Whittington might have been able to do this year had it been a Foundation Trust. She asked when Monitor would be giving feedback on the desktop exercise as there was potential for delay and uncertainty.
Susan Sorensen agreed to check this with Monitor **SS**
- 07/083.5 **Comments on the proposed constitution should be given to Susan Sorensen by 1 October. The Board agreed that the proposed constitution should be discussed in detail at the Foundation Trust Project Board on 4 October, updated and brought to the Board Seminar in October for final approval of changes to the model core constitution** **All**
- 07/083.6 David Sloman highlighted the key risks in the Integrated Business Plan - the Cost Improvement Plan, the opening of the Day Treatment Centre and ensuring that a fully functional Board is in place by December. The letter from Monitor very clearly highlights the focus on governance, commercial acumen and the ability to handle financial risk.
- 07/083.7 **The Board agreed that the final draft of the Integrated Business Plan should be brought to the Board Seminar in October for approval before submission to the Secretary of State on 1 November.** **SS**
- 07/083.8 The Board noted the Foundation Trust update and the Constitution review
- 07/084 Financial report**
- 07/084.1 Richard Martin presented the month 5 financial position to the Board, reporting a surplus of £655k to date, an improvement of £155k on plan. The Trust remains on target for a year-end surplus of £1.4m.
- 07/084.2 Richard Martin informed the Board that the Cost Improvement Plan was behind target by £308k, which is a deterioration from the position last month. However, the recovery of drugs costs from commissioners should improve the situation. The Trust's cash position is healthy but the capital programme is not fully spent. The hospital will benefit from Foundation Trust status by not having to run down cash reserves at year end to meet NHS requirements.
- 07/084.3 Doreen Henry asked if the Trust was sure that it would receive the income from SLAs due to extra activity. Richard Martin said that the Trust would receive the income unless PCTs challenged the coding of data, which had to be done within a time limit.
- 07/084.4 Doreen Henry commented on the overspend on medical pay, which is £344k above budget on the year to date. Richard Martin responded that an increase in funding for junior doctors was anticipated. High level authorisation remains in place for agency use
- 07/084.5 The following correction was noted:
Appendix 4, page 4 – Date of Finance & Performance Committee date

07/084.6 The Board noted the report.

07/085 Access Performance Report – July 2007

07/085.1 Kate Slemeck reported that all targets were met with the exception of 1 breach of the 62 day cancer target and 15 Clostridium Difficile infections in over 65 year olds. There were no MRSA bacteraemias. There were 340 deliveries, the highest on record, a 9.4% increase on 2006/7 year to date. Emergency Bed Days have reduced significantly reflecting a better use of beds. The number of Delayed Transfers of Care was the lowest since reporting began in January 2005. GP referrals remain static.

07/085.2 Maria Duggan told the Board that she had evidence from local mothers that the impact of the increased birth rate was putting the system under strain. Kate Slemeck responded that the new NICU would help to free up capacity. Three more birthing rooms are to be created. The number of midwife posts has been increased by 24 over 3 years in response to the recommendations of the Birthrate+ study and 100 job applications have been received – an excellent response. The Trust is planning to increase capacity on the basis that both mothers and staff choose the Whittington.

07/085.3 Anne Johnson noted that Emergency Department (ED) attendances were not increasing and wondered if this was a consequence of The Meet & Greet scheme. Siobhan Harrington said that there may factors involved including the relocation of the front entrance away from ED, GPs being incentivised to ensure patients do not attend ED, the work of community matrons with regular attendees and the development of a large primary care centre in Hanley Road, one mile from the hospital.

07/085.4 The Board noted the report.

07/086 Service Development Update

07/086.1 Kate Slemeck told the Board that the 18 week Referral to Treatment project is entering the critical phase of aligning capacity with demand. The target is measured from the date of GP referral to the date when Outpatient treatment **starts** (90% of patients) or the date when the patient is admitted (85%) and includes diagnostic tests. October 26 is a critical date as this is 18 weeks from 1 March 2008 when the 18 week target takes effect.

07/086.2 The Whittington's current performance is 62% of Outpatients and 37% of admitted patients within the target. Work needs to be done to improve the processes and data collection. The Trust is reliant on clinicians collecting data in Outpatients. The Department of Health 18-week intensive support team has validated the Trust's processes, made recommendations and advised that the Trust is on track to hit the target.

07/086.3 Celia Ingham Clark told the Board that consultants in Surgery felt there was a lack of information about outcome slips. She suggested that

colleagues, particularly in medicine, who had extensive experience of pathway mapping should be identified to help in other areas. **Kate Slemeck agreed that work needed to be done to increase understanding amongst clinicians of the use of Outcome Slips**

KS

07/086.4 Kate Slemeck reported on the Making Best Use of Beds project. Beds have been reduced by changing 6-bed to 4-bed bays, which has also reduced Length of Stay and the spread of Hospital Acquired Infections. The Medical Admissions Unit has been increased to 15 beds with more single rooms and will be relocated on 24 September next to the Emergency Department, becoming the Acute Admissions Unit. Although Length of Stay has been reduced the Whittington does not compare well with national figures, indicating further scope for improvement. **Celia Ingham Clark suggested that charts by specialty should be displayed in theatres as an incentive to colleagues to improve performance.**

KS

07/086.5 Pat Gordon asked what the position was on the nurse led discharge project. Kate Slemeck said that a pilot scheme has started in Surgery.

07/086.6 The Board noted the report

07/087 Patient Feedback Report and DH complaints consultation

07/087.1 Deborah Wheeler told the Board that the rate of complaints has reduced from the peak coinciding with the opening of the new building. In April and May the response performance to complaints was 100% within target. Since the opening of the new building verbal complaints have increased as a percentage of the total which coincides with the accessibility of PALS at the front entrance

07/087.2 Pat Gordon commended the list of service improvements (item 2.6) made as a result of complaints and suggested it should be used as a promotional tool. Deborah Wheeler said that attending to low level complaints makes a difference in patients' perception. Doreen Henry said that from her experience the most frequent complaint is about how people are addressed. It is important to listen to and value patients.

07/087.3 A Complaints Process Mapping Day for managers is being held on 24 September with the aim of improving the process for responding to complaints. A new complaints manager, Tracey Beedell, has been appointed

07/087.4 Deborah Wheeler told the Board that there has been a significant reduction in Independent Reviews by the Healthcare Commission from 13 in 2006/07 to just one so far in 2007/08.

07/087.5 Faridoon Madon asked what was being done to find the patient's missing medical notes (complaint 659). Deborah Wheeler said the search was continuing. The imminent introduction of electronic tracking of medical records files should improve the situation.

07/087.6 The Board noted the Patient Feedback Report

07/087.7 The Board noted the Department of Health consultation on changes to complaints management processes, which will be discussed at the Patient Experience Review Group, the Clinical Governance Steering Committee and other meetings.

07/088 Visible Leadership Programme update

07/088.1 Deborah Wheeler told the Board that the results of the opportunistic on-the-spot infection control assessments on high risk wards had demonstrated improvement over the last three months. There has been an increase in compliance from junior doctors since the emphasis of infection control in Induction.

07/088.2 Pat Gordon commended the reports of observations in the Outpatient Department and of shadowing porters, which give instant feedback and showed changes being made. She commented that experience in Outpatients has a major influence on public opinion of the hospital.

07/088.3 The Board noted the report

07/089 Clinical Governance report

07/089/1 The Board noted the report, the Serious Hazards Of Transfusion (SHOT) action plan and the Transfusion Practitioner Annual Report.

07/090 Infection Control update

07/090.1 Deborah Wheeler informed the Board that there had been a reduction in hospital acquired infections. MRSA bacteraemias had reduced to one new incidence in August and one in September and the incidence of clostridium difficile was also down.

07/090.2 Deborah Wheeler informed the Board that a team from the Department of Health MRSA improvement programme was invited to visit the Whittington on 11 September. The team conducted interviews and visited high risk wards. Initial feedback was given to David Sloman and indicates that the Trust is doing well in identifying and understanding problems but less well in solving them. In response to the visit, the Visible Leadership Team has carried out a national cleaning audit. **A full report will be brought to the next meeting.**

DW

07/090.3 Anne Johnson reported that she had been interviewed in her capacity as chair of the Infection Control Committee. She thanked the Board for inviting the team to visit the hospital and was pleased that action on their recommendations was being taken so quickly

07/090.4 The Board noted the update and the Action Plan.

07/091 Risk Management and Assurance

07/091.1 Margaret Boltwood informed the Board that the Assurance Committee had carried out detailed scrutiny of the Assurance Framework and the Risk Register and identified the Highest Key Risks, which are brought to the Board for information. These risks are aligned with the Foundation

Trust requirements

07/091.2 The Board noted the report.

07/092 Annual Health Check for 2007/08

07/092.1 **The Board agreed that the Director of Nursing and Clinical Development should remain responsible for co-ordinating the Trust's assessment against the core standards, as outlined in the Trust's risk management strategy**

DW

07/092.2 **The Board agreed that the Assurance Committee should scrutinise the Trust's draft return before ratification by the Trust Board**

MB

07/092.3 The Board noted the report.

07/093 Trust Annual Report 2007/08

07/093.1 The Board noted the report.

07/094 Voluntary services annual report

07/094.1 Maria Duggan endorsed the improved support of the volunteers

07/094.2 The Board noted the report.

07/095 Any other urgent business

07/095.1 None

07/096 Opportunity for questions from the floor on matters considered by the Board

07/096.1 None

07/097 Date of next Trust Board meeting: 21 September 2007
10am, Postgraduate Centre room 4

SIGNED.....(Chairman)

DATE.....