

ITEM: 1

MEETING:

Trust Board, Tuesday 20 May 2008

TITLE:

Minutes of the Trust Board meeting of 16 April 2008

SUMMARY:

Attached are the minutes of the Trust Board meeting held on 16 April 2008

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>

Present	Joe Liddane	Chairman
	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
	Maria Duggan	Non Executive Director
	Anna Merrick	Non Executive Director
	Robert Aitken	Non Executive Director
	Edward Lord	Deputy Chairman
Anne Johnson	Non Executive Director	

Minute taker Mary Field PA to Directors

The Child Protection presentation was deferred

08/058 **Apologies for Absence** **Action**

08/058.1 None

08/059 **Declarations of Interests**

08/059.1 None

08/060 **Minutes of the meeting of 20 February 2008**

08/060.1 The minutes were agreed as an accurate record subject to the following amendment:

08/050.1 Annual review and Assurance Framework

Add to the first bullet point:

“as well as the adverse report from the Healthcare Commission.”

08/060.2 **Matters arising**

08/060.3 ***08/041.4***

Joe Liddane reported to the Board the following actions that were agreed at the meeting of the chairman and non executive directors held on 14 April, details of which were circulated by David Sloman to all directors by email:

1. As of 1 May 2008 the three formal sub-committees of the Board will be the Audit Committee, the Remuneration Committee and the Executive Team meeting.

- | | Action |
|---|------------------------|
| 2. The Audit Committee will broaden its remit and take on both financial and non-financial risk. Alongside the recognised core Audit Committee functions, the revised Audit Committee will oversee the management and development of the assurance framework, risk register and the associated risk management processes. The Clinical Governance Committee and the Health and Safety Committee will report into this new Audit Committee. | |
| 3. The membership of the Audit Committee will include all non executive directors. Executive attendance is yet to be finalised, and recommendations will be made to the May Trust Board meeting. The Audit Committee will meet bi-monthly. All non executive directors will be contacted shortly for dates and availability, building on the existing pre-scheduled Audit Committee dates. | DS
RM |
| 4. The Executive Team meeting will become a formal sub-committee of the Board. This may mean renaming it the Executive Committee. | |
| 5. The Assurance Committee and the Finance and Performance Committee will be disbanded with immediate effect. The Control of Infection Committee will continue to meet under the chairmanship of the CEO and will report into the Clinical Governance Committee. | |
| 6. The terms of reference, membership and reporting relationships of the new committee structure will be revised for approval at the May Trust Board meeting. This will include the mapping of workload and work streams from the existing to the revised committee structure. | DS |
| 7. Following and subject to approval at the May Board meeting, the executive leadership on assurance, risk and the compliance framework will be consolidated under the Director of Strategy and Performance. Under these proposals the Director of HR will no longer have a leadership role around the corporate governance and assurance agendas, allowing her to focus on the increasingly important staff and HR functions. | DS |
| 8. A job description for a Trust Secretary post (the revised title for the Company Secretary) will be developed for approval by the Chairman and non executive directors. The post will be accountable to the Chairman and will support the Chairman in managing the relationship with the Council of Governors. Once the job description is agreed a decision will be made as to whether to go to the open market or pursue an internal fixed-term secondment. | MB |

08/061 **Chief Executive Report**

08/061.1 David Sloman said that the “good news story” was a visit from the Nursing & Midwifery Council on 15 April 2008 for a formal quality assurance review of the Middlesex University training for nurses carried out at the Whittington. They visited placements and received positive feedback from student nurses to say that the Whittington was “a hospital of character” and “a lovely place to work with enthusiastic staff”.

08/061.2 The Board noted the report

08/062	<u>Estate Strategy</u>	Action
08/062.1	Philip Ient informed the Board that the priorities identified in the strategy were: <ul style="list-style-type: none"> - opening the Day Treatment Centre - redevelopment and expansion of maternity services - opening the new paediatric Emergency Department - improving the environment to help reduce Hospital Acquired Infections - reducing backlog of maintenance - improving health and safety compliance - improving utilisation of the estate 	
08/062.2	Edward Lord declared an interest in the Sussex Way accommodation and would not take part in any discussion on this issue	
08/062.3	The following issues and action points were raised by non executive directors:	
08/062.4	As the Strategy has been developed to be congruent with the Integrated Business Plan, it will need to be reviewed in line with the review of the IBP	PI
08/062.5	The Trust should consider in more detail exactly how much should be invested in maternity services.	PI
08/062.6	Environmental issues should be highlighted in the Strategy.	PI
08/062.7	An Equality Impact Assessment should be carried out on the Strategy, for example, to include disabled access	PI
08/062.8	The capital expenditure programme should draw on and be explicitly cross-referenced to the Risk Register	PI
08/062.9	David Sloman informed the Board that discussions had been taking place with the Director of Public Health at Islington PCT about the idea of the Whittington becoming a health promoting hospital. It was agreed that this and similar wider environmental issues should be taken into consideration on future iterations of the strategy.	PI
08/062.10	The Board noted the report	
08/062.11	The Board approved the strategy, acknowledging that it was a working document that would be subject to future iteration.	
08/063	<u>Approval to proceed with the appointment of a new Consultant Orthopaedic Surgeon</u>	
08/063.1	David Sloman informed the Board that historically new consultant posts were brought to Trust Board for formal approval because the appointment of a new consultant was a long-term significant investment. The Board agreed that this process should continue	
08/063.2	Kate Slomeck informed the Board that the requirement to deliver and sustain 18-week referral to treatment waiting times alongside a significant growth in referrals to the Trauma and Orthopaedics service at the	Action

Whittington had highlighted a consultant capacity shortfall in the department.

08/063.3 In response to a query about other options, Kate Slemeck said that the shortfall in service was currently being covered by an Associate Specialist. The appointment of one further orthopaedic consultant would enhance the orthopaedic service and contribute to the Trust's overall marketing plan.

08/063.4 **The Board approved the Business Case for a new orthopaedic consultant and supported appointment to this post**

08/064 Approval to proceed with the appointment of a new Nurse Consultant in Emergency Paediatrics

08/064.1 Deborah Wheeler informed the Board that this post was fully funded through a reorganisation of roles within the Emergency Department. The new post would help in the establishment of the new Paediatric Emergency Department by creating a senior nursing paediatric lead who would work to improve the interface between the Emergency Department and Paediatrics.

08/064.2 **The Board agreed the creation of this post, subject to approval by the Strategic Health Authority**

08/065 Dashboard Report

08/065.1 Susan Sorensen presented the dashboard, which has been populated with 100 component indicators within 6 domains.

08/065.2 Susan Sorensen explained that the data in the run charts is from December 2007 and should be treated with caution. The Board agreed that the run charts were to be interpreted with care and that commentary needs to be included to explain areas of risk and apparently conflicting information.

SS

08/065.3 Joe Liddane informed the Board that non-executive directors would work with executives on the 6 domains as follows:

- Clinical quality – Anna Merrick and Edward Lord
- Patient experience – Joe Liddane and Anna Merrick
- Access and targets – Maria Duggan and Joe Liddane
- Strategy – Robert Aitken and Anna Merrick
- Workforce & efficiency – Edward Lord and Robert Aitken
- Finance – Maria Duggan and Anna Merrick

Action

Executive directors will be allocated to work with non-executive directors

DS

08/065.4 The Board noted the report and supported the direction of travel

08/065.5 The Board noted the market share for both Day Case Surgery and Maternity deliveries appears to be decreasing (for Islington PCT but increasing for other PCTs) and that both are a key feature in the Trust's future development plans in the Integrated Business Plan. It was agreed that this would be an item for discussion at the Trust away day.

08/066 **Finance Report Month 12 – March 2008**

08/066.1 Richard Martin informed the Board that the financial performance would meet the year end targets including the achievement of a surplus of £1.4m.

08/066.2 Concern was expressed about the large variances in Month 12 in income and depreciation for which no advance warning had been given. Richard Martin explained that this situation was a consequence of the need to make year end adjustments to comply with current NHS accounting practices. This would no longer apply under Foundation Trust rules.

08/066.3 The Board asked for commentary on variances to be included in future reports

RM

08/066.4 The Board noted the report

08/066.5 The Board noted the draft minutes of the Audit Committee meetings in February and March 2008

08/067 **Performance Report**

08/067.1 Kate Slemeck informed the Board that the Trust had performed well to meet all performance indicators except the incidence of MRSA bacteraemias, which was 21 for the year against a trajectory of 12. The Trust is one of only a few in London to meet the Emergency Department 4 hour access target.

08/067.2 **The Board agreed that this excellent performance should be acknowledged to staff and communicated to the wider community but noted its concerns in relation to the incidence of MRSA. It was agreed that a full and substantive discussion would take place at the next Trust Board meeting.**

DS/JL

08/067.3 The Board noted the report

08/068 **NHS London Provider Agency risk ratings**

08/068.1 **The Board agreed that it was useful to receive these reports on a quarterly or annual basis. It would be useful to include risk ratings on the PCTs as well**

DS

08/068.2 The Board noted the report

08/069 **Principles of a Single Equality Scheme (SES)**

08/069.1 In paragraph 3, item 8, “Six Option” should be changed to “Six Strands”

**MB
Action**

08/069.2 **The Board agreed the core principles which underpin the Trust’s Single Equality Scheme.**

08/070 **2008/09 Service Level Agreement Key Performance Indicators**

08/070.1 Kate Slemeck informed the Board that the headline changes in the 2008/09 Service Level Agreement are:

- anti-coagulant clinic attendances to be discretely funded for the first time
- postnatal community midwifery and audiology will be funded on a cost per case basis
- £650k is included to cover additional activity required in 2008/09 to meet the 18-week target

08/070.2 Nationally mandated financial penalties are applied if the Trust fails to meet performance targets on *clostridium difficile* and 18 weeks. The Trust will also not be paid for follow-up outpatient activity over and above agreed thresholds.

08/070.3 The following amendment was noted in 4.1:
The rate of *clostridium difficile* infections will be reduced by 20% of the **2007/08** outturn

KS

08/070.4 The Board noted the report and mitigations against the identified risks were discussed and agreed.

08/071 Energy & Sustainability Fund – Stage 2 Bid

08/071.1 Philip Ient informed the Board that the Trust had been successful in securing £550,600 towards the cost of decentralising the main hospital boiler plant.

08/071.2 Richard Martin drew the attention of the Board to the letter which makes clear that the funding would only be available if the Trust had already utilised its internal sources of capital.

PI

08/071.3 **The Board agreed to support the scheme, subject to its impact on other key strategic investments within the organisation**

08/072 Action plan in response to Ernst & Young review of working capital and financial reporting procedures

08/072.1 David Sloman informed the Board that he and the chairman had met Monitor to discuss the Trust's application for Foundation Trust. The key issues to be addressed during the postponement period are to rebuild the Integrated Business Plan, which should be owned and understood by all Board members, to complete the technical issues highlighted in the Ernst & Young report and to assess the overall capacity and capability of the Finance department to operate as a Foundation Trust. David Sloman will chair a Programme Board, Richard Martin will lead on a project to rebuild the IBP and Susan Sorensen will lead on projects on governance and membership development.

08/072.2 The Board noted progress on the Action Plans

Action

08/073 Control of Infection Report

08/073.1 Non executive directors expressed concern at the continuing incidences of MRSA and at the outbreak of *clostridium difficile* in March 2008. There was discussion about why this was happening and it was felt that there needed to be more engagement from senior clinical staff. The Board asked for a report on the root cause analysis of each incidence of MRSA infection.

**CIC
DW**

08/073.2 The Board noted the report

08/074 Complaints and Patient Feedback Report

08/074.1 The Board noted the report

08/075 Register of hospitality

08/075.1 The Board noted that any hospitality with a value over £50 needs to be declared

08/075.2 The Board noted the Code of Conduct and Code of Accountability in the NHS

08/055 Any other urgent business

08/055.1 The Chairman asked for members of the Board to email him with comments about the quality and conduct of the meeting

08/056 Opportunity for questions from the floor on matters considered by the Board

08/056.1 None

08/057 Date of next Trust Board meeting:
20 May 2008 at 2.30 pm, venue to be advised

SIGNED.....(Chairman)

DATE.....