

ITEM: 08/097

DOC: 1

MEETING:

Trust Board, Wednesday 18 June 2008

TITLE:

Minutes of the Trust Board meeting of 20 May 2008

SUMMARY:

Attached are the minutes of the Trust Board meeting held on 20 May 2008

ACTION: For information and agreement

REPORT FROM: Fiona Elliott, Deputy Director, and Strategy & Performance

<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 Tuesday 20 May at 14.30hrs in the Guthrie Room, 76 Portland Place

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 Slameck	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 – arrived 16.35
	Edward Lord	Deputy Chairman
	Anne Johnson	Non Executive Director
In attendance	Helena Karnia	Acting Chair Haringey LINKS
Minute taker	Fiona Elliott	Deputy Director Strategy & Performance

08/079 Apologies for Absence **Action**

08/079.1 None

08/080 Declarations of Interests

08/080.1 None

08/081 Minutes of the meeting of 20 February 2008

08/081.1 The minutes were agreed as an accurate record subject to the following amendment:

08/065.3 Dashboard report

Correct the non-executive director allocated to work with executives in the domains as follows:

Clinical Quality – Anne Johnson and Edward Lord

Patient experience – Joe Liddane and Anne Johnson

08/081.2 **Matters arising**

08/081.3 ***08/041.4 Trust Secretary***

Joe Liddane advised the Board that he would be discussing the job description for the Trust Secretary post with the non executive directors and a decision will be made as to whether to go to the open market or pursue an internal fixed-term secondment before the next Board meeting.

JL

David Sloman advised the Board that the change in executive director structure had not yet been finalised and that this would be brought to a later Board meeting.

DS

08/082 Chief Executive Report

Action

- 08/082.1 David Sloman said that the “good news story” was that the Day Treatment Centre (DTC) had finally opened.
- 08/082.2 He advised the Board that the clinicians using the centre expressed high levels of satisfaction with the environment and that initial patient feedback was very positive.
- 08/082.3 He reported that there was both clinical and managerial commitment from staff to solve the initial teething problems.
- 08/082.4 In response to a query about the significance of these problems, David Sloman advised the Board that there were no clinical risks and that the main concern was the administrative management of the patients when they arrived at the DTC.
- 08/082.5 In response to a query about the patient’s view of their experience Siobhan Harrington advised the Board that a patient survey had been undertaken and that 80% of responders reported that they would recommend the centre to their friends. Reported dissatisfaction focussed on the reception process. Celia Ingham Clark advised the Board that work was underway to develop a system of staggered patient arrival times and this would help to resolve this problem.
- 08/082.6 In paragraph 3 of the report the spelling of the surgeons names should be corrected to:
Mr Dugal Heath
Mr Pratik Sufi
- 08/082.7 The Board noted the report

08/083 Dashboard report

- 08/083.1 Susan Sorensen presented the dashboard, explaining that the data had been refreshed and that the information related to performance in March 2008.
- 08/083.2 She explained that overall the trust had achieved a financial risk rating of 3 and a non-financial risk rating of amber for the month. She advised that the Hospital Acquired Infection indicator in the access and targets domain and cleanliness indicator in the patient experience domain were red rated.
- 08/083.3 She reminded the Board that the purpose of the report is to identify significant changes in performance month on month and to identify and agree appropriate remedial action.
- 08/083.4 The Board discussed the structure and content of the report; and in particular
- How useful each of the indicators was as a reflection of performance for each domain
 - How the threshold scores for each indicator were determined
 - How useful the scoring outcomes were in reflecting performance
 - How the information presented should be used to determine actions

	required	Action
08/083.5	The Board agreed that the basic structure of the report was clear but that some of the indicators may need adapting. The scoring methodology needs to be made more consistent to ensure the report is easy to interpret.	
08/083.6	The Board agreed that each of the executive/non executive teams working on each of the domains would consider the relevancy of the indicators in each domain, whether the correct data was being collected, whether the thresholds for moving from green to amber to red were appropriate and consistent between domains and how required actions would be highlighted from the report.	JL/AM/ EL/MD/ AJ/RA/ SS
08/084	<u>Financial performance</u>	
08/084.1	Richard Martin informed the Board that the trust had achieved all if its financial targets for 2007/08.	
08/084.2	For 2008/09 Richard Martin reported to the board that the trust had met its cost improvement target in month 1 and was on plan to achieve a surplus of £2m by year-end. The 2008/09 pay awards have been accrued for although not released into budgets until it is confirmed whether unions have accepted the pay deal. Income from activity has been accrued as projected for month 1.	
08/084.3	Richard Martin advised the board that cost pressures that impact in 2008/09 are currently being reviewed along with base line budgets and financial risks. In addition the risks and newly identified cost pressures are potentially significant and may have an impact on the planned £2m target surplus.	
08/084.4	Richard Martin reported that a review of accumulated provisions indicates the potential for a release of funds to support the current year financial plan.	
08/084.5	The Board noted the report	
08/085	<u>Control of infection report</u>	
08/085.1	Deborah Wheeler presented the paper, which outlined key aspects of infection control including risks to patients and the organisation.	
08/085.2	She reminded the board that infection control was the most important topic of interest for patients and that any adverse affect on the trust's reputation can affect patient choice.	
08/085.3	She advised the board of the financial penalties associated with failure to achieve the <i>C. Difficile</i> infection control targets and reported the trust's performance against targets and benchmark data available.	
08/085.4	She reported to the board the actions taken to reduce incidence of both MRSA and <i>C. Difficile</i> and advised on the next actions that are being taken to improve performance.	
08/085.5	Deborah Wheeler reported that a team of infection control nurses from the	

Department of Health has visited to assess standards of care against key aspects of infection control, including hand hygiene and peripheral line management. The feedback received was positive and a formal report will be presented to the board at a future meeting.

Action
DW

08/085.6 In a response to a query about what further actions could be taken other than those described in the action plan, Deborah Wheeler advised the board that the following actions were underway:

- Learning from examples of best practice in other trusts
- Visit to Luton & Dunstable Hospital which has zero cases of MRSA bacteraemia in the last three months
- Audit of all patients with any infection against allocation to side room to assess whether there is a better way of managing isolation

08/085.7 The board agreed the following actions:

- **Continue to implement and monitor progress against the action plan**
- **Focus on systems, processes and behaviours which are identified from root cause analysis as requiring improvement**
- **Consider the need for increased performance management of individuals who fail to achieve the required standards of practice**
- **Track performance through the dashboard report and bring progress report on action plan to the board every quarter.**

DW
DW/KS/
CIC
DW/KS
DW/SS

08/086 NHS London Quarterly Monitoring: self certification

08/086.1 Susan Sorensen advised the board about the NHS London monitoring regime and how this has now been adapted by NHS London to reflect the Monitor Compliance Framework.

08/086.2 She reported to the board that the timing for submission of the reports falls outside of the board meeting schedule and requested that the board agree to delegate authority to the Chairman and Chief Executive to sign the submissions.

08/086.3 The Board approved the recommendation for delegation and agreed that the monitoring report should subsequently be brought to the Audit Committee in future.

SS

08/087 Trust Board Committee Structure

08/087.1 David Sloman presented the revised board and committee structure and terms of reference (ToR) for the remuneration committee, which confirms and operationalises the previous board decisions.

08/087.2 He advised the board that the Audit Committee terms of reference would be reviewed at its next meeting in June and presented to the trust board for ratification thereafter.

AM

08/087.3 He advised the board that Deborah Wheeler and Celia Ingham Clark, which would include a review of the ToRs and membership of the subcommittees,

were revising the structure beneath the Clinical Governance committee.

08/087.4 In a response to a query about the reporting of the equality and diversity group David Sloman advised the board that this group reports to the Executive Committee **Action MB**

08/087.5 In a response to a query about the patient experience group David Sloman advised that the work of this group was being considered within the work on the development of the Customer Experience Strategy. **SH**

08/087.6 The board noted the report

08/088 Report from FT Programme Board

08/088.1 David Sloman presented the report and recommended to the board that the trust submit its FT application to Monitor on 1 October 2008 subject to the implementation of the FT Project plan. He advised the board that the Long Term Financial Model (LTFM) is currently being rebuilt and that the initial draft of this will be presented to the board in July. **RM**

08/088.2 The Board discussed the provisional timetable and whether this allowed the bedding in of the new board structures and the development of non-executives.

08/088.3 The Board noted the operational priorities during the autumn and winter months and how these may impact on Executive capacity should the timing of the application be delayed until later in the financial year.

08/088.4 The board noted that the trust's application must be submitted this financial year.

08/088.5 **The board agreed that the trust would continue to progress with the development of the LTFM and Integrated Business Plan with a view to an October submission. The board agreed that following a review of the LTFM in July a final decision would be made in relation to the application timescale.**

08/089 Annual staff survey and action plan

08/089.1 Margaret Boltwood presented the report and advised the board that three main actions have arisen from the review of the outcome from the staff survey:

- Achieving a higher rate of staff appraisal
- Increasing staff's response rate to the staff survey
- Focussing on minimising bullying and harassment

08/089.2 Non-executive directors expressed concern that the trust was below average in the number of staff who said they had been appraised in the previous 12 months.

08/089.3 Margaret Boltwood advised the board that this had dropped from 75% two years ago and that initial feedback suggested that the use of the electronic KSF tool had had a negative impact on completion of staff appraisals. Staff have now been advised that they do not need to use the KSF tool.

08/089.4 She advised the board that the staff survey would be repeated in October this year. The action plan attached to the papers outlined what actions will be taken to ensure improvements this year. **Action**

08/089.5 She advised the board that possible penalties for trusts with poor staff surveys are being discussed centrally at the moment and that the board would be kept informed of progress with this. **MB**

08/089.6 **The board noted the report and agreed its recommendations.** **MB**

08/090 Single Equality Scheme (SES)

08/090.1 Margaret Boltwood presented the draft SES and implementation action plan. The document will be consulted on and changes will reflect feedback from patients, members, governors and staff. In response to a query about how the Board will scrutinise progress with implementation and have oversight of the SES, Margaret Boltwood advised that the implementation of the scheme would be performance managed through the Executive Committee and the board will be presented with a regular progress report. **MB**

08/090.2 **The board agreed the SES which will be published on the trust's website.** **MB**

08/091 Register of Seals – annual notification to Board

08/091.1 The board noted the report

08/092 Any other urgent business

08/092.1 None

08/093 Opportunity for questions from the floor on matters considered by the Board

08/093.1 None

08/094 Date of next Trust Board meeting:

18 June, 2008 at 1300 Post Graduate Centre, Whittington Hospital
NHS Trust

SIGNED.....(Chairman)

DATE.....