

ITEM:11/038  
Doc: 03

**MEETING:** Trust Board  
**DATE:** 23<sup>rd</sup> March 2011

**TITLE:** Executive Committee Report to the Trust Board March 2011

**SUMMARY:**

The executive committee has met weekly since the last Trust Board meeting.

The report summarises the discussions and decisions from Executive Committee from 25<sup>th</sup> January to 16<sup>th</sup> March. It covers:-

- key issues arising from standing items
- other issues discussed
- news to which the Board's attention is drawn

**REPORT FROM:** Siobhan Harrington – Acting Chief Executive

**ACTION:** For information

The Executive Committee has met weekly since the last Board meeting. This paper updates the Board on the work of the Executive Committee since the January Board meeting.

Throughout February the Trust has continued to be busy in terms of both emergency attendances and emergency admissions, although there has been a reduction in critical care activity in the month. Despite the continued level of emergency admissions it has been possible, as part of the length of stay work to close down the additional 9 beds that were opened across Betty Mansell & Victoria Wards.

During February the Trust received the result of its Standardised Mortality Rate (SMR) data following an external audit of critical care units nationally. The Whittington critical care unit SMR was 0.65, demonstrating a significantly lower rate of hospital mortality and amongst the best nationally.

A urology consultant appointment panel and an obstetrics appointment panel have both taken place since the last Trust Board. Two new consultant urologists and two new obstetric consultants were appointed following these. The new posts will replace the current locums and the retiring Mr Ron Miller, Consultant Urologist, and Ms Gaye Henson, Consultant Obstetrician.

## **1. Key issues arising from standing items:-**

### **1.1 Finance**

The Trust is currently reporting a surplus of £236k for the first eleven months of the year and this is approximately £738k better than expected. Higher levels of patient activity combined with some one-off benefits have to date compensated for the shortfall on the cost improvement programme. The annual CIP target reduction for expenditure levels is £12.5 million of which the Trust is achieving 68 per cent of the target to date. This level of achievement needs to increase as there is now a cap around income levels this year and it is important to demonstrate a track record of delivery for a future FT application.

The target for the year remains, at this stage, to break even although there is the potential to do better through a focus on minimising costs wherever possible.

Looking forward to 2011/12, there will be further financial pressures and improvements in productivity across all departments will be required, as a way of absorbing as many cost pressures as possible which will help to ensure the viability of The Whittington.

### **1.2 Human Resources (HR)**

Over the past month EC has discussed a significant number of HR issues in relation to the transfer of community services from Haringey and Islington together with Haringey children's services. In addition the following items have been considered:

- Single equality scheme and the Equality Act
- Delivery of occupational health services within the ICO
- Staff Survey 2010 outcomes and action plan
- Following legal advice it was agreed to introduce a policy ensuring that Bank staff on long term assignments take a minimum two week break in service during each year of employment. The

Temporary Staffing department will work closely with managers to ensure this policy is implemented with minimal impact on service delivery.

- For the extra public holiday due to the royal wedding the Trust is proposing that staff required to work on that day will be paid at the normal Friday rate and be entitled to a day off in lieu. Other staff will be entitled to a day's paid leave. This proposal will be discussed with Staffside at the March partnership group meeting.

### **1.3 Infection control**

#### **C-Diff**

There have been an additional 5 cases of C-diff acquired in the hospital in January (3) and February (2) 2011. The year to date total stands at 36 against a target limit of 79 by the end of March 2011. Executive Committee continues to monitor the incidences of C Diff weekly on a ward by ward basis.

#### **Noro Virus**

In February 2011 there was a noro virus outbreak in Coyle ward. A number of beds were closed for a short period of time and the virus was managed and contained with no spread to other wards.

#### **MRSA Bacteraemia**

There has been an additional community acquired MRSA bacteraemia in February 2011. This bacteraemia was detected within 48 hours of the patient's admission to hospital from a nursing home. The patient has had multiple admissions to the Whittington over the past year. The Root Cause Analysis has been completed and forwarded to NHS Islington and NHS London.

### **1.4 Whittington Health development and path to Foundation Trust**

The development of Whittington Health has been discussed at every EC since the last Board with an emphasis on

- Communications
- The planned Whittington Health Events
- TUPE transfer
- Financial agreement
- the Business Transfer Agreement
- Interim management structure

### **1.5 Haringey Children's Community Services**

EC discussed the transfer of Haringey Children's Community Services from GOSH to the Whittington NHS Trust and, following risk assessment, agreed a delay of one month to complete the necessary work was prudent to ensure all aspects of the acute contract negotiation, the community services transfer and the children's services transfer could be given the correct degree of management focus to ensure a safe and successful process. The delay will enable due diligence work to be complete and final agreement on the transfer of children's services to be reached at the April Board. Both GOSH and NHS Haringey have been informed.

The Tripartite Formal Agreement was discussed in relation to the timeline to Foundation Trust. The trajectory remains authorisation by April 2013.

## **1.6 Capital Update**

The committee received a verbal report on progress with the capital investment plan. It was noted that the plan remained on target to reach the end of the financial year in balance and within the allocated CRL.

## **2. Other items**

Discussion and decisions have been made in the following areas:-

### **2.1 Strategy**

The following strategic items were discussed, taking into consideration the implications for the Trust:-

- UCLP back office programme. EC were updated on the programme and the decision was made to stay involved in the programme where it is relevant.
- The key messages for the integrated care organisation were agreed.
- The transformation programme has been discussed and plans for events agreed.
- Occupational health services at the Trust. It was agreed that the future model will be provided within the integrated care organisation.
- Single equality scheme and the Equality Act
- The procurement shared service with the Royal Free was discussed and governance arrangements agreed.
- The ward manager development programme was discussed and the programme commenced. There will be a brief verbal update at the Board.

### **2.2 Operational policies and performance**

#### **Operational decisions and approvals**

- An external report on Emergency Access was received from Alan Bedford and next steps agreed. The report raised a number of issues for improvement to patient pathways across the Trust. It has been discussed with the Hospital Management Board and a number of actions implemented including regular Board Reviews in ED and a review of our Bed Management Team arrangements. A report will come to next months Board.
- Whittington Hospital Radio. It was agreed that the service into the hospital was no longer viable and that we should agree with them a plan to cease operating from the trust .
- WFL Hard service provider. It was agreed that the Trust would give an additional extension.
- Agreement to integrated information system for Whittington Health.
- CQC In patient survey discussed and next steps agreed.
- Estates and facilities savings schemes agreed and communications plan discussed.

### **2.3 Business cases approved**

- General surgery bariatric business case
- PAS Hardware upgrade business case
- Paediatric allergy dietician business case

## **2.4 Key policies agreed**

- Alcohol, drug and substance misuse policy
- Retirement guidelines
- Trust Filming policy
- Rostering management guidance

## **2.5 Governance, risk management and assurance**

The following items were discussed:-

### **The Risk Register**

CNST in maternity. EC were updated on the assessment process and level 1 achieved through new assessment process.

A number of serious incidents were reported to NHSL through the STEIS reporting system in January and February 2011. The majority of these relate to maternity services. Investigation reports into incidents are reviewed weekly by Executive Committee and progress against action plans are monitored by the Patient Safety Committee and NHS London. A report on maternity serious incidents is being prepared for presentation to Trust Board.

The ED performance SUI terms of reference were agreed and EC were updated on the findings to date and impact on performance and patient experience.

Trust sickness absence target was agreed as 2.5% from 1 April 2011

Staff survey 2010 outcomes and action plan agreed

Patient safety walk about update

The Trust mass casualty assurance process submission was agreed and NHS London response discussed.

### **Risks identified in the last 4 week**

Since the last report there have been 2 new risks added to the Risk Register in February 2011:-

These relate to

- Incomplete implementation of consultant daily ward rounds
- Delay in discharge of patients owing to the lack of daily consultant ward rounds

### **Submissions agreed**

No new submissions have been agreed.

## **2.5 Information received**

- UCLP Executive group papers
- NHS London model of care for cancer services

## **3. News items to bring to the attention of the Trust Board**

- Dr Heather McKinnon Consultant Paediatrician resigned from her position as Named Doctor for Child Protection in February 2011. Dr McKinnon held this position for a period of 26 years and was greatly respected and acknowledged across London for her

commitment to ensuring the protection and safeguarding of Children. Dr Giles Armstrong Consultant Paediatrician has taken up the role of Named Doctor for Child Protection for the Whittington Hospital from 1<sup>st</sup> March 2011.

- The appointment of Dr Yi Mien Koh as chief executive of Whittington Health received widespread local media coverage.
- “The Nurses” (four Whittington nurses and midwives) launched their musical career with national interest. They are promoting their album to raise money for Macmillan Cancer Care. The CD came out week commencing 13 March 2011 with national and international media coverage.
- Professor Albert Singer had a letter published in The Times on 1 March 2011 about retired medical staff reforming care for the elderly
- Local and national media coverage was received on 10/11 March following an inquest held about a woman who died having had bariatric surgery at The Whittington in January 2010 and was under our care until March 2010 after which she attended UCLH where she died in December 2010.
- Joy Clarke, lead specialist midwife at The Whittington was widely quoted and on BBC news around the support to tackle female genital mutilation.
- There was a feature in Nursing Standard on 23 February 2011 about domestic violence and clinical nurse specialist Nigel Chappelle’s work at The Whittington’s.
- A successful quiz evening on 3 March 2011 organised by the fundraising department with the Rotary club welcomed over 200 local people and businesses into N19 and raised over £2,500.
- The Mayor of Haringey held a ball in aid of the cardiology department in Wood Green on 5 March 2011. The Mayor’s charity for the year is The Whittington Hospital.