

**ITEM: 1**

**MEETING:** Trust Board of 15 March 2006

**TITLE:** Minutes of the Trust Board meeting of 18 January 2006

**SUMMARY:**

The minutes of the Trust Board meeting of 18 January 2006

**ACTION:** For information and agreement

**REPORT FROM:** Jon Green, Assistant Chief Executive

The minutes of the Whittington Hospital Trust Board meeting held on Wednesday  
18 January 2006 at 10.00 in the Postgraduate Centre Room 4.

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<b>Present</b>	Narendra Makanji	Chair
	David Sloman	Chief Executive
	Susan Sorensen	Director of Finance.
	Margaret Boltwood	Director of Human Resources and Corporate Affairs
	Kate Slemeck	Deputy Director of Operations for Director
	Celia Ingham Clark	Medical Director
	Deborah Wheeler	Director of Nursing and Clinical Development
	Phillip Ient	Director of Facilities
	Mike Lloyd	Director of Site Commissioning
	Pat Gordon	Non Executive Director
	Peter Farmer	Non Executive Director
	Dee Henry	Non Executive Director**
	Anne Johnson	Non Executive Director*

<b>In Attendance</b>	Faridoon Madon	PPI Forum Representative
	Helena Kania	PPI Forum Representative
	Jon Green	Assistant Chief Executive
	John Evans	NHS Finance Trainee
	Tim Lowe	NHS Finance Trainee
	Tony Wordley	Health Diagnostic board Observer – SHA
	David McCartney	Health Diagnostic board Observer – MONITOR
	Damian Reed	Health Diagnostic board Observer – MONITOR

\*arrived at 11.00

\*\* arrived at 1015

**06/001 Apologies for Absence ACTION**  
Maria Duggan

**06/002 Declarations of interests**

06/002.1 None declared.

**06/003 Chairman's communications**

06/003.1 The chairman noted that Pat Gordon had been re-appointed to the board as a Non Executive Director. The Chair also welcomed Faridoon Madon and Helena Kania from the Patient Public Involvement Forum, as well as observers from the Whole Health Diagnostic team to the Board meeting.

**06/004 Minutes of the last meeting of 21 September 2005**

06/004.1 Amendment to 05/109.1 – This should read Cancer Access times.

06/004.2 The amendment was noted on the minutes of the last meeting and agreed as an accurate record and signed by the Chair.

**Matters Arising**

## **05/113 – Healthcare Commission Core Standards**

Deborah Wheeler updated the position with regard to the HCCS. It is due to be completed in April and until then will be available for external scrutiny. Haringey will be presenting the declaration on 1 Mar whilst Islington will be holding a review meeting on the 7 Mar and a public meeting on 8 Mar. Pat Gordon commented that as a member of the Islington Health Board she would like a copy of the declaration and Deborah agreed to forward it to her.

**DW**

## **06/005 Chief Executive Report**

06/005.1 The Board noted the CEO's report.

06/005.2 David Sloman highlighted that the Trust had achieved the key targets for the 31 December; namely the 98% 4 hour ED target, 13 week out patient and 6 month surgery waits.

06/005.3 Deborah Wheeler updated the position on the Clinical Negligence Scheme for Trusts assessment. She gave an overview on what the Trust had to achieve to be graded CNST level 2. We had achieved the 75% on all but one standard and in view of the closeness of the other standard, training, education and competence, had been given a 3 month improvement period until 11 April. Peter Farmer asked if the policy documentation had been agreed and Margaret Boltwood stated that the Alcohol and substance abuse and capability reviews had been produced but needed to be agreed by the JCC and approved by the HMB.

06/005.4 Helena Kania asked how the Highgate Hill treatment Centre had been funded and what would happen to the funds generated from the centre. She was informed that the money had come from charitable funds and the bequest had been very specific in improving the environment for this type of patient. All funds generated from the centre would go back into general Trust income. She also asked for more information on the redevelopment work in Thorogood and had this led to a reduction in beds. David Sloman reported that the number of beds had been maintained but the redevelopment had been to optimise best use of beds and produce an orthopaedic "clean" area.

06/005.5 Faridoon Madon asked about new electronic systems. David Sloman said that choose and book was going well and a report would be produced on the positives and negatives of the system, he also suggested that this, along with Payment by results, could be a board seminar topic in the future. Celia Ingham Clark said that the new theatre IT system would improve theatre utilization and would result in savings due to efficiencies, it is due to go live in September 06. Pat Gordon asked for a visit to this for the NEDs and also asked to be kept abreast of new developments more fully. David Sloman agreed that he would arrange a hospital visit, to include new developments for all NEDs who wished it.

**DS**

## **06/006 Finance Report**

06/006.1 Susan Sorensen presented the month 8 finance report to the Board. The report was projecting a deficit of £1.5m with an absolutely best case of

break-even with significant risk to the level of £3m. She also reported on a meeting this week with the SHA that, on the direction of DofH, had asked for a plan on additional savings of £700k. The Trust has 1 week to report back and is confident we can achieve the new target.

- 06/006.2 David Sloman emphasised that strong controls on spending were being imposed for the remainder of the year and that we were facing an additional income risk. Income performance against SLAs remains strong with over performance, particularly in Haringey, however PCTs were now asking for a slow down in activity due to their financial positions. We are still in discussion with Haringey and Islington but Islington have already asked for us not to book any non-urgent activity. Celia Ingham Clark stated this would have implications for the training within theatres and questioned how this would fit with the choice agenda and national targets. A wide ranging discussion followed with most concern raised over the effects on the Trusts progress towards 18 week waiting times. Susan Sorenson stated that it was not possible to accurately estimate the financial risks associated with this but initial modelling suggested somewhere in the region of £100k, she also said that £400k of income from the NICU consortium was at risk due to underperformance, although last year this was not clawed back. Peter Farmer stated that he thought that the income predictions looked optimistic and that the Finance committee should go through each risk individually to check assumptions and variations, which was agreed.
- 06/006.3 Susan Sorenson went through the month 8 expenditure data as this had shown an increase after previous months improving figures. Kate Slemeck explained the controls in place for nursing staff and the attempts to put the same in place for medical personnel; she also highlighted the work being done on medical rotas to reduce the need for locums. David Sloman summarized the activity surrounding financial expenditure controls; this included the focus on staff expenditure and that non-pay is now reviewed weekly at the Executive Team meeting and controlled at Director level. Peter Farmer asked how the Green and Kassab savings were going and Susan Sorenson stated they were not progressing as rapidly as had been predicted with more reliance on the Trust than had been hoped for. They had struggled to find substantial savings, although as they are paid by results this was not a financial drain on the Trust.
- 06/006.4 Finally Susan highlighted the draft financial risk rating at appendix 4 that Monitor used for Foundation Trusts and has been calculated for the Trust against 2 possible scenarios. She explained how these worked and although the Trust is currently rated at 3.0 and 2.63, which is good, due to low liquidity scores we would currently be capped at 2.0. The chair stated this was very important if we wished to become a Foundation Trust and that Susan was available for further discussion if anyone wanted more information. David Sloman echoed that Chairs comments and said that this could be a useful topic for the February board seminar.
- 06/006.5 The minutes of the Finance & Performance Committee meetings held in November and December were circulated, noted and approved.
- 06/006.6 The Board noted the contents of the Finance Report and approved its

recommendations.

## **06/007 Activity and performance**

06/007.1 Kate Slemeck presented the September activity and performance report. Overall in-month performance against all key targets was good, although infection control was of some concern. Emergency Department performance was at 97.8% despite further increasing attendance levels and the Trust has met the twin goals of the 6-month inpatient and 13-week outpatient targets by the end of December. The performance against the Cancer Assess Times remained at 100% against all three targets, which was commended by Celia Ingham Clark.

06/007.2 Dee Henry asked about length of stay and Kate Slemeck explained the making best use of beds project that has been implemented to try to reduce length of stay. Mike Lloyd asked if there was any evidence of a link with reducing length of stay and any increase in re-admission rates. Kate stated spot checks on reasons for readmission were being put in place to test this. Anne Johnson asked how this was being linked to the local community and David Sloman said it was something that needed further development with PCTs. The chair stated that this was something that need to be taken to a wider audience but should be either a seminar topic or a formal report. David Sloman acknowledged the difficulties but said we are working with our partners to try to achieve the best solutions.

06/007.3 The concerns about infection control and in particular MRSA rates were discussed. Anne Johnson asked if these were being investigated and asked for a report on any investigations. Kate Slemeck said that more and better quality data was required, especially as any failure to meet targets would need to be explained. David Sloman stated that the March board would include information on infection control.

**DW**

06/007.4 The Board noted the report.

## **06/008 Update on the proposal to achieve delivery of sterile services from an accredited sterile services unit for the Whittington Hospital**

06/008.1 Phil lent updated the board on the future of sterile services for the hospital. With requirement to deliver sterile services from accredited units by March 2007 the board was recommended to approve that the Trust join a consortium made up from acute and primary care trusts in the NW London sector. Deborah Wheeler stated her support for the proposal noting that this was a core standard so something had to be done to make the Trust compliant.

06/008.2 The Board agreed the recommendation to join the NWL consortium project and confirm Mike Lloyd as project director.

## **06/009 Assurance and Risk management Strategy**

06/009.1 Margaret Boltwood updated the board on the work of the assurance committee on the development of the Trust's assurance framework and risk management strategy. She noted this was ongoing work and would

be brought back to the board for further approval at the March board. Dee Henry, the committee chair, stated that she was content with the progress and that assurance for all major risks and their mitigation were in place.

06/009.2 The Board noted the report and ratified the revised risk management strategy and terms of reference and membership of the Assurance framework.

## **06/010 Leadership Development Strategy**

06/010.1 Margaret Boltwood briefed the board on the proposal to develop a Leadership Development Strategy for the Trust in order to make best use of the leadership potential within the Trust and based on the NHS Leadership Qualities framework. She stated that this was part of the HR strategy that would be part of the Foundation Trust development plan. The chair said he was a strong supporter as this was an area the Trust would have to build on in the next couple of years. Peter Farmer said he was a supporter in principle but it must be part of a follow on process and more importantly it would have to be properly costed. Pat Gordon also said that she agreed in principle but that this must not start until it is clear how the programme would be used and funded. Anne Johnson said she supported but this must address the different needs of different groups.

06/010.2 The Board noted the report. It agreed leadership development should be based on the Trust's vision and strategy and the leadership dimensions in the proposal. However how the strategy was to be designed, delivered and costed was work in progress and would have to be returned to the board for approval.

## **06/011 Charitable Funds Annual Report and Accounts 2004/05**

06/011.1 Susan Sorenson summarized the reports and accounts and stated that she was happy with them. She also stated that the reducing balances on the general funds were in line with guidelines and that fund raising committees would be formed for specific purposes. Helena Kania questioned why the GHE bequest had been used on Health and Safety equipment. The chair said this was for the enhancement of Spiritual and pastoral care areas and the work was not directly H&S related. David Sloman agreed that the wording within the report was confusing and should be amended to give a more accurate picture.

**SS**

06/011.2 The board noted the report and agreed to adopt the annual accounts, including the cover sheet. It also agreed to approve the content of the annual report pending the minor change identified at 06/011.1.

## **06/012 Clinical Governance Report**

06/012.1 Deborah Wheeler updated the board on progress within the clinical governance development plan. She highlighted the reduced costs on drugs within the medicines management report noting we were the only hospital in London achieving this and Celia Ingham Clark congratulated this as excellent news. A wide discussion then followed on the essence

of care, risk and complaints management which noted that this was essential for being the hospital of choice and much was about communication. Helena Kania did note the state of the hospital toilets and that there should be an audit of facilities as these were not up to required standards. David Sloman highlighted that much of this is covered in the developing hospital marketing plan.

06/012.2 The Board noted the report.

**06/013 FT Diagnostic Project Plans**

06/013.1 David Sloman briefed the board on the requirements of the FT Diagnostic programme and the project management plans proposed to manage the process. He highlighted the relevance in light of the potential wave 3A FT application and pointed out key dates as the site visit on the 27<sup>th</sup> Jan and the full board to board meeting on 15 Mar. Helena Kania asked what the downsides of becoming a Foundation Trust were and David Sloman replied that this would be a discussion item at the February seminar.

06/013.2 The Board noted the contents of the Project Plan and approved the action plan.

**06/014 Provider Sustainability Plan: Presentation**

06/014.1 Susan Sorenson gave a presentation on the provider sustainability plan which in particular highlighted the income assumptions associated with the new build and that increases in the cost base caused by the PFI when it opens.

**05/118 Any other urgent business**

05/118.1 None

**05/119 Opportunity for questions from the floor on matters considered by the Board**

05/119.1 None

**05/120 Date of next Trust Board meeting:** Trust Board – 15 March 2006  
Postgraduate Centre Room 5 1000

SIGNED.....(Chairman)

DATE.....

