

**TRUST BOARD MEETING
MINUTES
Part 1
28th May 2009**

PRESENT:	Ms. Aileen McLeish	Chairman
	Mr. Andrew Liles	Chief Executive
	Mr. John Headley	Director of Finance & Information
	Dr. Mike Baxter	Medical Director
	Mr. Norman Critchlow	Non-Executive Director
	Mr. Paul Bentley	Director of Strategy
	Mr. Philip Beesley	Non-Executive Director
	Ms. Raj Bhamber	Director of Workforce and Organisational Development
	Mrs. Ruth Lallmahomed	Acting Director of Nursing and Governance
	Mr. Terry Price	Non-Executive Director
	Ms. Sue Ells	Non-Executive Director
	Ms Valerie Howell	Chief Operating Officer
IN ATTENDANCE:	Ms Caroline Becher	Chief Nurse
	Dr Jonathan Morgan	Surrey PCT
	Giselle Rothwell	Head of Communications
	Angela Shaw	Consultant Microbiologist
	Sue Rubenstein	Foresight Partnership
SECRETARY:	Ms. Angela Flint	Board Secretary
APOLOGIES:	Mr. Peter Taylor	Non-Executive Director

Minute	Action
<p>The Chairman thanked William Britton and his team for providing the lunchtime catering and said Trust Board welcomed the opportunity to experience patient food which had proved very successful.</p> <p>John Headley was welcomed as a permanent member of Trust Board having been appointed as the Director of Finance & Information. Caroline Becher was welcomed and will be formally in post from 1st June 2009. Petra Cunningham, Jez Tozer and Ruth Lallmahomed were thanked for their significant contribution to Trust Board over the last year.</p>	
<p>1-09/01 MINUTES</p> <p>The minutes of the previous meeting held on 26th March 2009 were agreed as an accurate record subject to the following amendments:</p> <p>Part 1</p> <p>5 - 3 to read: Housekeeping Leaders would not be included in work <i>rosters in order</i></p>	

to enable them to perform their supervisory duties.

5 - 7 to read: The speed of intervention for fractured neck of femur where the Trust showed 72%, improved to 87%.

1-09/02 **MATTERS ARISING**

Summary action points

The Trust Executive Committee reviewed all of the actions from the previous meeting.

REPORTS

1-09/03 **Chairman Report**

The Chairman presented the Chairman's Report confirming the SHA Board to Board had taken place on the 20th May, with formal approval given to the Trust to proceed to the Consultation phase of the Foundation Trust application. St. Peter's has also had the opportunity to host the new SHA Chairman, Kate Lampard, on a visit to the Trust.

The current economic position had been discussed and Trust Board will be preparing for the financial impact.

The Chairman had attended the Ten Year Staff Award Ceremony and said it was good to recognise staff who had achieved this milestone. The opening celebration of the Multicultural Centre at Ashford had also been a very successful event.

1-09/04 **Chief Executive Report**

The Chief Executive presented the Chief Executive Report. He updated Trust Board on the Swine Flu situation, confirming the Trust continued to work closely with the PCT and Health Protection Agency. Currently five cases had been confirmed in Surrey but none had been presented at the Trust. The situation continued to be monitored and staff kept fully informed.

A year long programme on Bed Remodelling had begun which will include refurbishment of 23 wards, installing additional bathroom and toilet facilities to help accommodate men and women in separate areas. A major communication plan was being undertaken to ensure both staff and patients were kept fully informed.

QUALITY AND SAFETY

1-09/05 **Quality and Safety Report**

The Acting Director of Nursing and Governance presented the monthly Quality and Safety report. Key highlights were as follows:

- No new major risks had been identified during the month of March at the Clinical Governance Committee

- No MRSA cases although one has been identified in the last week
- Five Clostridium Difficile (CDAD) cases during April
- One Serious Untoward Incident had been reported
- First PROMS submission had taken place with all four areas completed
- 35 complaints had been received which was within normal limits
- 97% of patients had responded to the Patient Comment Cards saying they would recommend ASPH to family and friends.

The Chief Executive said that several wards responded to the Patient Comment Card effectively, but other areas needed to be encouraged to participate. The Acting Director of Nursing and Governance confirmed that volunteers had been recruited to assist areas of low return.

Terry Price asked if further progress had been made on inputting data onto the Datix incident reporting system. The Acting Director of Nursing and Governance confirmed an additional person had been recruited with a further two staff members supporting data inputting. It was anticipated the backlog would be resolved by end of June 2009. Trust Board asked that an update report be given to June Trust Board. The Chief Operating Officer suggested exploring the use of patient handheld bedside devices; this had been investigated in the past. It was agreed that the Chief Nurse would investigate additional methods of feedback from patients.

CB

CB

Trust Board NOTED the Quality and Safety monthly report.

1-09/06 **Quality and Safety Metrics**

The Medical Director presented the new Quality and Safety Metric report stating the information team had been instrumental in producing the report. The aim of the report was to provide robust Board assurance with the specific information contained within the report. He asked that Trust Board consider the report's cohesive fit with the monthly Quality and Safety Report and that the benchmarking and measures contained within were meaningful.

The Darzi headings had been used of Clinical Outcome, Patient Safety, and Patient Experience. It was important that the Board be assured that quality remained a key priority as the Trust moved forward with its FT application. The lessons learnt from Mid Staffs would ensure the Board had a robust quality and safety reporting system.

The Medical Director gave a full description of the RAG rating system, the benchmarking data collected by the SHA, and the additional data that was being collated from Dr Foster's.

NICU data was being explored and would be included within future reports, and additional safety measures also continued to be explored. The Acting Director of Nursing and Governance recommended that the Patient Comment Card information be included with the report.

MB

In summary the Chief Executive agreed the Quality and Safety Metrics Report would provide a key assurance process and would be work in progress over the coming year. He asked that it be presented in a Balanced Scorecard style with benchmarking, targets and triggers. The Medical Director confirmed that both PCT

MB

and SHA measures were used. Trust Board agreed that the Metrics report complemented the monthly Quality and Safety report.

Trust Board NOTED the Quality and Safety Metrics Report.

1-09/07 Infection Control Annual Report

Angela Shaw presented the Annual Infection Control Report, stating the Clostridium Difficile targets had been met, the MRSA target had breached target by 2, and the Hygiene Code declaration had been compliant.

She explained that the Infection Control Leads were in all Business Centres and reported into the Clinical Governance Committee.

An Infection Control Charter had been approved and signed off by Clinical Directors at the Trust Executive Committee. The Charter would be disseminated through the Clinical Directorates led by the Clinical Directors with an expected 100% all Doctors and Nursing staff signing up to the Charter. Non-compliance with the Charter would be formally addressed on an individual basis.

Angela Shaw gave full details of the report highlighting:

- monthly performance MRSA rates
- monthly performance Clostridium Difficile rates
- Antibiotic usage
- High impact interventions – focusing on cannula insertion.

Philip Beesley commented on the MRSA target relating to chest infections, which Angela Shaw explained would be supported by the screening process. The Acting Director of Nursing and Governance added that the number of days between MRSA occurrences was also being monitored. The detail provided would ensure better understanding and actions would be developed accordingly.

Trust Board NOTED the Infection Control Annual Report.

1-09/08 Pals, Incidents, Claims and Complaints (PICC) Report

The Acting Director of Nursing and Governance presented the Quarter 4 PICC Report and confirmed that the Business Centre Clinical Governance Leads were implementing change and ensuring action plans were delivered and monitored effectively.

Key highlights were as follows:

- Grade 3 and 4 incident reports were discussed, and MRSA lessons learnt and action plans detailed
- Falls continue to be well reported and action plans were in place to reduce impact. The Chief Executive asked that this be considered as part of the quality metrics measures
- Lessons learnt from Serious Untoward Incidents with action plans in place to deliver improvements continue to be monitored

CB

Trust Board NOTED the Pals, Incidents, Claims and Complaints Report.

1-09/09 **Inpatient Survey Action Plan**

The Acting Director of Nursing and Governance presented the Inpatient Survey Action Plan and explained examples had been provided from Business Centres. The Trust Executive Committee monitored that the action plans were delivered in a timely fashion. Terry Price asked which committee mechanism was ensuring that delivery of the action plans were indeed being carried out. The Acting Director of Nursing and Governance explained that action plans were RAG rated at Performance Meetings, delivery actioned accordingly and were taken forward by a nominated lead.

Trust Board APPROVED the Inpatient Survey Action Plan.

1-09/10 **Board Assurance Framework**

The Chief Executive presented the full Board Assurance Framework, stating that the assurance framework had been monitored through the Integrated Governance Assurance Committee.

The Director of Finance referred Trust Board to the risk on Service Line Management and explained progress had been made through the Business Centres and that key objectives for delivery would be presented to the Finance Committee.

JH

Trust Board APPROVED the Board Assurance Framework.

PERFORMANCE

1-09/11 **Performance Report**

The Chief Operating Officer presented the monthly Performance Report, stating that further work continued to benchmark the content and style of the report against other FTs. During the month of June the focus would be on exception reporting, actions, accountability and timescales. The current focus continued on delivering actions to improve Amber rated indicators to Green.

Current priorities included:

- Cancer targets 62 days and 2 week rule – action currently includes improving the alert system and some clinical pathways
- Cancelled operations – working with IT to resolve data and validation issues
- A&E 4 hour target – slippage during April at St. Peter's, but improved during May. Improvements have been achieved through weekly Performance Meetings.

The Chief Executive invited the Chief Operating Officer to clarify how the noticeable change had occurred. The Chief Operating Officer explained there had been a clear management focus, bed capacity meetings had been undertaken earlier in the day, there had been a strong focus on bed management and the effective management of the whole of the hospital.

Trust Board APPROVED the Performance Report.

1-09/12 **Finance Report**

The Director of Finance presented the April Finance Report and tabled the Cost Improvement Programme (CIP).

He explained that the information for patient activity income in April had been accrued on a prudent basis until more robust data was available. The present activity information indicated that the Trust was over performing against plans with commissioners, but that for the month of April activity income had been accrued against budget.

Key highlights were as follows:

- The Trust had generated an in-month surplus of £75k against a budget of £182k
- Pay was overspent by £55k with temporary staff high
- Non pay expenditure was overspent by £63k.

The CIP programme was discussed and the Corporate CIP on temporary staffing considered fully. A review of the escalation control mechanism will be explored by the Director of Workforce, the Chief Operating Officer and the Director of Finance. The monthly Performance Meetings will focus on temporary staffing and the Chief Nurse will support a review of clinical staffing issues.

**RB/
VH/
JH/
CB**

Terry Price asked for confirmation that the CIPs were regularly monitored. The Director of Finance confirmed that the CIPs would be monitored, and that several CIPs were proving ambitious and would be replaced accordingly to ensure the programme maintained on track and was delivered the targets. A reviewed and updated programme would be presented to June Trust Board.

JH

Trust Board APPROVED the Finance Report.

1-09/13 **Workforce Report**

The Director of Workforce and OD presented the monthly Workforce Report and stated that the report was currently under development. She highlighted the key workforce trends as follows:

- Establishment profile of staff group
- Staffing and establishment comparisons
- Vacancy levels
- Turnover rates
- Sickness absence
- Diversity.

The Director of Workforce and OD highlighted staff turnover (currently high at 16%); the importance of appraisals (with the aim of retaining staff) and reported that the Employee Partnership Forum would support and provide intelligence about the factors that may lie behind the high turnover rates. The Chief Nurse said that turnover must be a top priority.

Terry Price asked how the rates had been calculated and asked if junior doctor

rotations had been included when analysing the data. The Director of Workforce and OD confirmed that they had not.

Monthly staff turnover trend data will be included in future Workforce Reports.

Trust Board APPROVED the Workforce Report.

RB

STRATEGY & PLANNING

1-09/14 **Corporate Objectives**

The Chief Executive presented the Corporate Objectives for FY 09/10 which had been supported by the Trust Executive Committee (TEC). He explained that the objectives had been formulated by the Executive Team to demonstrate the organisation's priorities for the year and also to provide the context for individual roles and responsibilities within the Executive Team. Action plans were being developed and would be monitored through TEC. A quarterly report will be presented to Trust Board.

AL

Sue Ells asked if the objectives were linked to the IBP. The Chief Executive explained that the objectives related to the current year, rather than the five year IBP and would be cross referenced.

Norman Critchlow asked if the Strategic aims and objectives had been developed further. The Director of Strategy said confirmed the next version of the IBP would include the discussion points made by Board members at the last seminar.

Trust Board APPROVED the Corporate Objectives.

1-09/15 **Foundation Trust Update**

The Director of Strategy presented the FT Project Board Status Report on the Foundation Trust Application Programme. He confirmed that the next version of the IBP and LTFM would be submitted to the SHA on 26th June, and would be presented to Trust Board on 25th June 2009.

Trust Board NOTED the report.

1-09/16 **Expenditure from Trust Funds – Three Isolette Incubators**

The Director of Finance presented the proposal for the three incubators stating that it had followed the approval process.

Trust Board APPROVED the Three Isolette Incubators

1-09/17 **Expenditure from Trust Funds - Maternity Scanners**

The Director of Finance presented the proposal to lease two Maternity Scanners. Terry Price and Norman Critchlow asked if alternative funding had been explored. The Director of Finance explained that each speciality had limited funds available. Trust Board asked that future proposals provided more information on alternative

funding options.

Trust Board APPROVED the two Maternity Scanners, subject to alternative funding options being explored.

REGULATORY

1-09/18 Foundation Trust Constitution

This item was deferred to July Trust Board.

1-09/19 Indemnity Insurance

The Director of Strategy presented the Indemnity Insurance paper, asking Trust Board to consider:

- Option 1 - if they wished to purchase additional indemnity insurance on authorisation as a Foundation Trust or
- Option 2 – if they wished to continue with the current full cover with the NHSLA.

Legal advice and advice from the NHSLA had been sought and a provisional clause provided to be included into the Trusts Constitution.

Sue Ells asked if there were any risks that would not be covered in the current insurance. The Director of Strategy confirmed that both options included those who 'act honestly and in good faith in the execution of their Board function', and that neither option covered liabilities that fell outside the 'relevant function'.

Trust Board APPROVED Option 2 - to remain under the present NHS scheme without additional insurance, but that this be reviewed annually by the Board.

1-09/20 Board Sub Committee Terms of Reference

The Chief Executive presented the Board Sub-Committee Terms of Reference for the Audit Committee, Finance Committee, Trust Executive Committee and Integrated Governance Assurance Committee (IGAC).

Trust Board asked that the styling and consistency be reviewed. The Director of Finance explained the Finance Committee required further review.

Trust Board APPROVED the Audit Committee, Integrated Governance Assurance Committee and Trust Executive Committee Terms of Reference subject to the above amendments. Trust Board asked that the Finance Committee review the amendments to the Finance Committee Terms of Reference and present back to Trust Board.

INFORMATION

1-09/21 Trust Executive Committee Minutes

Trust Board NOTED the Trust Executive Committee Minutes.

ANY OTHER BUSINESS

1-09/22 Terry Price asked if a timetable for the Renal Tender had been provided by the PCT. The Director of Strategy confirmed that the initial statement of interest was due by July 2009 and the final in November 2009. The award would be given in January 2010.

The Head of Communications presented the final editorial version of the Foundation Trust DVD. She added that the narrator 'voice over' would be changed.

Trust Board APPROVED the Foundation Trust DVD.

1-09/23 **NEXT MEETING**

Thursday 30th July 2009 at 2.00pm, Education Room, Ashford Hospital.

Action Points Summary – 28th May Board

	ITEM	Action Required	Action	Date
1-09/05	Quality and Safety Report	Datix incident reporting backlog update report to June Trust Board.	CB	25 June
1-09/06	Quality and Safety Metrics	The Chief Nurse to investigate additional methods of feedback from patients.	CB	30 July
		NICU data was being explored and would be included within future reports	MB	25 June
		Metrics report to be presented in Balance Score Card style with benchmarking, targets and triggers	MB	25 June
1-09/08	PICC	Falls to be considered as part of the quality metrics measures	CB	25 June
1-09/10	Board Assurance Framework	Key objectives for delivering SLM to be presented to the Finance Committee.	JH	30 July
1-09/12	Finance Report	The CIP on temporary staffing - a review of the escalation control mechanism, monthly Performance Meetings to focus on temporary staffing and the Chief Nurse will review clinical staffing issues.	RB/VH/ JH/CB	25 June
		CIP replacement programme to be presented to June Trust Board	JH	25 June
1-09/13	Workforce Report	Monthly staff turnover trend data to be included in future Workforce Reports.	RB	25 June
1-09/14	Corporate Objectives	Corporate Objectives quarterly report to be	AL	27

Paper 2.1

	ITEM	Action Required	Action	Date
		presented to Trust Board.		August