

Ashford & St Peter's Hospitals NHS Trust

Minutes of the forty-eight meeting of the Ashford & St Peter's Hospitals NHS Trust Board Held on Thursday 10th July 2003 in the Lecture Theatre, the Ramp, St Peter's Hospital

Present

Mr Clive Thompson	Chairman
Mr Glenn Douglas	Chief Executive
Dr Mike Baxter	Medical Director
Dr Clare Bennett	Director of Medical Education
Mr Nick Hulme	Director of Operations
Mark Jennings	Director of Clinical and Non Clinical Support Services
Mrs Ruth Lallmahomed	Deputy Director of Nursing & Quality
Mr Keith Mansfield	Director of Finance
Ms Sian Thomas	Director of Human Resources
Mr Michael Bailey	Non-executive Director
Mrs Liz Brooks	Non-executive Director
Mr Peter Field	Non-executive Director
Mrs Jenny Murray	Non-executive Director
Mrs Mary Riley	Non-executive Director
Mr Edward Glynn	Community Health Council Representative
Mr Rodney Gritten	North Surrey PCT Representative

Agenda

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2. **Minutes of the Trust Board meeting held on 5th June 2003**
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 - 3.2. Capital programme
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 - 10.2. Intermediate Care Strategy
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 - 10.5. Minutes of Risk and Incident Advisory Board 14.5.03
 - 10.6. Finance Committee minutes 5.6.03
 - 10.7. Annual audit letter
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1. **Apologies of absence**

Apologies of absence were received from Mrs Joyce Winson Smith, Director of Nursing, Ms Jayne Connelly, Director of Strategic Development and Mr Graham Worsfold, Woking PCT representative

2. **Minutes of the Trust Board meeting held on 5th June 2003**

The Minutes of the Trust Board meeting held on 5th June 2003 were **AGREED** as a correct record.

3. **Matters arising**

3.1 Social facility action plan

The Director of Clinical and Non Clinical Support Services advised that architects had drawn up possible schemes for a social facility on the St Peter's Site. He will report to the next meeting with a preferred option. The Improving Working Lives Group will continue to oversee the process.

3.2 Capital programme

The Director of Finance advised that he will present to the next meeting an update on the Trust's capital programme.

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4. **Chairman's report**

The Chairman advised of the appointment of a new Upper GI Consultant.

The Chairman had attended the annual supper of the Ashford Hospital League of Friends. He had also attended the workshop held on 9th June following the CHI Maternity Services Report to develop the Trust's action plan.

A further meeting of the Transport Working Group had taken place, and the Chairman had attended the launch of the Stephanie Marks Diabetes Appeal and had had a tour of Cardiology.

The Chairman reported from a meeting of Surrey and Sussex StHA Chairmen: emphasis had been on recently changes in the NHS, from 1st July there is no regional organisation, major changes were taking place in central office and the role of the StHA is becoming much more important. The StHA report directly to the Department of Health.

The next round of Acute Trust Star Ratings are due to be published week commencing 14th July.

Reports from Non-Executive Directors

Mrs Brooks, Non-executive Director, advised that the Minister for Health, John Hutton, had attended the opening of the Sandgates accommodation development and visited the St Peter's Hospital Playscheme. He congratulated the Trust on its innovative work.

Mrs Riley, Non-executive Director, advised that she had attended a Board meeting of the North West Surrey Mental Health Partnership.

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5. **Chief Executive's report**

The Chief Executive advised of two new appointments: Mr Dunsmuir, Consultant Urologist, and Dr Sellick as Lead Consultant in Information Services.

The Chief Executive had attended a quarterly review meeting with the StHA. The Trust had received a good review in terms of progress made.

He had also attended the "waving off" of the taxi cabs taking children from the Paediatric Unit for their annual visit to Thorpe Park.

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6. Presentation – delayed transfers of care

Heather Schroder, Assistant Director, Surrey Social Services, was unable to join the meeting due to unavoidable commitments, but has offered to take part in a further Board review of progress in the Autumn.

Mr Nick Hulme, Director of Operations summarised the current situation with regard to delayed transfers of care.

He presented the figures from the previous week detailing the numbers of beds taken by delayed discharges. He advised that although the figures have decreased and moving in the right direction, they still remain high.

The Director of Operations detailed improvements being undertaken to reduce the average length of stay for patients. Multidisciplinary and multiagency workshops on discharge planning have taken place for all medical wards. The structure of admission and discharge had been reviewed. There is ongoing development and teaching for all ward staff and the role and function of the MDT team meetings had been reviewed. Several of the patient pathways are under review, together with a review of the whole discharge process. There are to be stronger links with support services; eg pharmacy and imaging, and the Bed Escalation Plan had been formalised. There are to be regular weekly meetings to review cases, Social Services will be involved in the preassessment stage.

The Director of Operations intends to raise the profile of discharge across the Trust. Also under review is the individual length of stay, by Consultant, for each patient.

The Director of Operations advised that there had been no overnight stays in the A & E Department since December and that there is a greater awareness of using capacity more efficiently and effectively.

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The Director of Operations presented slides on behalf of Heather Schroder:

He advised that many patients who come to the Trust from residential homes do not actually need acute care. Support teams are to be put into nursing homes to avoid the need for admittance. "Step down" beds are also to be created. These situations are also more suited for better assessment of the needs of patients rather than in an acute hospital bed.

The Director of Operations stressed the need to ensure that the quality and safety of patient is not compromised in any way. Readmission rates following acute episodes are constantly monitored. The Trust is still below the national average for readmissions.

Mrs Brooks, Non-executive Director, commended the work undertaken so far and queried the number of patients awaiting discharge. The Director of Operations advised that the vast majority have funding available but that there is no capacity in the local economy. Social Services are active in trying to resolve the situation.

Mr Field, Non-executive Director, expressed concern at the local closure of many nursing homes from his personal contacts and there is evidence that the level of funding had become more mixed.

The Board discussed the implications of insufficient funding and the provision of short and long term care.

The Director of Medical Education enquired of the comparative cost of keeping a patient in their own home to being in hospital. She was informed that the most cost effective is for patients to remain in their own homes with full support packages.

The Director of Operations confirmed that the Trust is moving in the right direction and commended John Coleman, General Manager for Medicine and Emergency Services, and Claire O'Brien, Head of Admissions and Discharge, for their work in reducing the length of stay of patients.

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7. Trust objectives 2003/04

This item is to be initially debated at a Trust Board Seminar on 15th July and a formal presentation will be made at the public Trust Board meeting in September. This will not delay the application and monitoring of the key performance related objectives.

8. Quality and Clinical Governance

8.1 CHI Maternity Action Plan

The Medical Director presented the paper at Enclosure B which was **NOTED** by the Board.

He advised that an action plan had been produced following the workshop held on 9th June following the CHI investigation into maternity services at the Trust. As yet there had been no feedback from CHI, they are still considering their response. The action plan and response will be presented on the Trust and CHI websites.

The Deputy Director of Nursing & Quality advised that the timescales contained there fits in with the Trust's Clinical Governance plan.

The Medical Director expressed concern at the number of action points and asked whether the Board should focus on the top items only. This will be further considered for the quarterly review to which the Board are committed. He also advised of the appointment of a Consultant Midwife to the unit.

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9. **Finance and Performance Management**

9.1 Performance Report

The Director of Operations tabled the Performance Report which was **NOTED** by the Board.

He highlighted there had been no overnight stays in A & E and that the Trust is hitting its target of 90% of A & E patients not waiting longer than 4 hours. The Trust is part of the 5th wave of the Emergency Services Collaborative which has been instigated to help Trusts delivery their targets.

The Director of Operations advised that there were no major concerns elsewhere. There had been lots of activity in Outpatients, cancer patients are being seen within 2 weeks and treated within 31 days and that delayed discharges are moving in the right direction.

Mr Field, Non-executive Director, enquired whether activity is higher than that planned. He was advised that next month's performance figures will indicate planned activity.

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9.2 Workforce Information Report

The Director of Human Resources presented the report at Enclosure C which was **NOTED** by the Board.

The Director of Human Resources highlighted the huge effort in Pathology; Ashford and St Peter's are one of the best performing Trusts in the south of England. The Director of Clinical and Non Clinical Support Services commended Dr Martyn Knapp, Clinical Director for Pathology, and Steve Shiel, Pathology Services Manager, for their hard work within the department and for creating a committed workforce.

Recruitment of midwives is ongoing with 6 midwives attending for interview this month. Twenty Surrey career advisors from local schools and organisations had attended the Trust as part of a recruitment drive.

The Trust is continuing to work hard to reduce locum medical staff expenditure.

Thames Valley Housing is bidding for another 150 units for starter home support.

The pay award for staff will be received this month and will be backdated from April 2003.

Diversity week is scheduled for the week of 15th September to raise awareness amongst staff.

The Consultant Contract is on track but it is recognised that there is to be more debate nationally and locally.

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9.3 Finance Report

The Director of Finance presented the Finance Report at Enclosure D for the first two months of the year which was **NOTED** by the Board.

The Director of Finance advised that the annual plan was based on the Trust receiving the full NHS Bank application. However, only 93% had been received. Discussions are ongoing regard the way forward. He advised that the Trust is currently overspent by £248k and that this figure must not develop further. Performance review meetings with all directorates had taken place and will continue each month.

The Director of Finance reported high expenditure on drugs, blood products and support services. The Chairman asked that more information be provided regarding the link between expenditure and activity.

9.4 Finance Recovery Plan

The Director of Finance presented the Finance Recovery Plan at Enclosure E on behalf of Ms Sue Braysher, Special Projects Director, which was **NOTED** by the Board. Of the 14 projects, 7 are making good progress, 4 have been agreed, and 3 still require direction.

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10. **Items to note/approve**

10.1 Updated Quality and Risk Management Strategy

The Deputy Director of Nursing and Quality presented the updated Strategy at Enclosure F which was **RATIFIED** by the Board.

10.2 Intermediate Care Strategy

The Chief Executive presented the Strategy at Enclosure G which was **NOTED** by the Board.

10.3 LIT Performance Assessment Framework

The Chief Executive presented the Framework at Enclosure H which was **NOTED** by the Board.

10.4 Transforming health and social care in Surrey and Sussex

The Chief Executive presented the report at Enclosure I which was **NOTED** by the Board. Various and related aspects were debated at length by the Board, and the priority to be given in the plan to N W Surrey reconfiguration was noted.

10.5 Minutes of Risk and Incident Advisory Board 14.5.03

The Chief Executive presented the Minutes at Enclosure J which was **NOTED** by the Board.

10.6 Finance Committee minutes 5.6.03

The Director of Finance presented the Minutes at Enclosure K which were **NOTED** by the Board.

10.7 Annual audit letter

The Director of Finance presented the Annual Audit Letter at Enclosure L which was **NOTED** by the Board.

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11. **Any other business**

Mr Fox enquired whether the Trust would be implementing the recommendation of the CHI maternity services report that a midwifery led unit on the Ashford site be instigated. He was advised that the Trust is taking all suggestions into consideration as part of the reconfiguration process.

Mr Dimond brought the Board's attention to public reconfiguration meetings held in the Feltham locality, one of which provided only very minimal information.

Mr Dimond also suggested that the Trust should vet prospective tenants who are provided with accommodation. He also commented on the huge expense of certain drug prescriptions. Mr Dimond also commented on discrimination against patients over the age of 65 with mental illness. In response, the Chairman suggested that he take the issue up with the Mental Health Trust. The Chief Executive commented that he would welcome any evidence that Ashford and St Peter's Hospitals NHS Trust discriminated against the over 65's as he felt that the Trust had taken strong measures to eliminate any age factors.

12. Date of next meeting

Thursday 11th September 2003, Education Centre, Ashford Hospital

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