ASHFORD & ST PETER'S HOSPITALS NHS TRUST
Minutes of the Ashford & St Peter’s Hospitals NHS Trust Board Meeting
Held on Thursday 25th May 2006, in the Education Centre, Ashford Hospital

Present: Mr Clive Thompson, Chairman
Mr Glenn Douglas, Chief Executive
Mr Keith Mansfield, Director of Finance
Mrs Antonia Ogden-Meade, Director of Operations (Elective Lead)
Mrs Michaela Morris, Director of Operations (Emergency Lead)
Mrs Joyce Winson Smith, Director of Nursing
Dr Mike Baxter, Medical Director
Mr Humphrey Scott, MSC Chair
Mr John Macey, Acting Director of Human Resources
Mrs Liz Brooks, Non-executive Director
Mrs Jenny Murray, Non-executive Director
Mr Peter Field, Non-executive Director
Mr Norman Critchlow, Non-executive Director
Mr Rodney Gritten, North Surrey PCT Representative
Mr Graeme Carman, Patient and Public Involvement Forum Representative
Mr Ken Ellis, Patient Panel Representative

In attendance: Mrs Shirley Sikora, Board Secretary

action:

Part 1

1. Apologies for absence:

Ian Mackenzie, Director of Information
Aileen Mcleish, Non-executive Director
Mr Maurice Cohen, Patient Panel Representative

2. Minutes of the Public Trust Board Meeting held on 30th March 2006

The Minutes of the Public Meeting held on 30th March 2006 were agreed as a correct record.

3. Matters arising:

3.1 Shared Financial Services

The Director of Finance reported outstanding issues with regard to the procurement system.

3.2 Transport Plan

A series of traffic surveys have taken place on the St Peter’s site compounded in a discussion with Runnymede Borough Council as a precursor to a formal planning application. It is anticipated a formal application will be made by the middle of July.

Mr Field, Non-executive Director, asked for confirmation that finance will be available to support the Plan. The Director of Finance replied that a bid has been submitted to the Strategic Health Authority, where a favourable response had been received so far.

4. Presentation: Surgery and Specialist Surgery

Mr Kieran Dawson, Clinical Director Surgery, and Ms Charlotte Williams, General Manager, Surgery, presented to the Board a summary of achievements and plans within the Surgical
Directorate.

Highlights of Mr Dawson’s presentation included:

- Minor ops – will be starting soon within the Outpatients Dept during clinics, resulting in a streamlined service, with no need for a second visit
- A new modular Day Care Unit at St Peter’s
- Generic lists and outpatient waiting times – patients are put more appropriately into a clinic with the shortest waiting time
- Vascular surgery – new technology for Gelfoam ablation of varicose veins, day case endovascular laser treatment
- Hepatopancreaticobiliary surgery – all pancreatic cancers now being done at the regional centre at the Royal Surrey County Hospital, endoscopic ultrasound for pancreatic cancer staging, majority of laparoscopic cholecystectomies are now day cases with telephone follow-ups by nursing staff
- Colorectal – cooperative working with Gynaecology
- New Surgical Assessment Unit opens at the end of July
- Laparoscopic Obesity Surgery – not yet commissioned in this area but Trust has skill and training for procedure to be undertaken as a day case
- The Directorate has ‘over performed’ – plans are in hand to manage this better.
- Capacity and waiting times – an enormous challenge
- Ongoing work with Anaesthetics to improve pre-operative assessment
- One stop clinics for suspected cancers eg urology
- Complete reconfiguration of surgical services including implementation of a new theatre timetable
- Challenge to move towards the 18 week pathway
- Development of business units/centres
- Medical outliers – a significant problem. Bed remodelling underway

5. Trust Board Member Reports

5.1 Chairman

Much of Mr Thompson’s time had been taken up with the Turnaround and Foundation Trust (FT) processes. The FT Diagnostic had been launched one month ago to identify the Trust’s strengths and weaknesses and identify the significant differences between existing and independent status.

The Chairman had attended various meetings: NHS Confederation of Acute Chairman, Equality and Diversity, and Crisis Management Procedure (which included flu pandemic procedures).

The Mayors of Woking and Runnymede opened Aspen and Chestnut Wards and the Day Surgery Unit at St Peter’s. Mr Thompson had also attended Civic Receptions and thanked the outgoing Mayors in all four boroughs for their support of the Trust in the last year.

Stephanie Marks Appeal – “Living with Diabetes Day” hosted by Sir Williams Perkins’ School had been a very successful day.

Mr Thompson had been the independent Chairman on a panel to interview for new Non-executive Directors at Maidstone and Tunbridge Wells NHS Trust.

5.2 Non-executive Directors

Mrs Brooks had attended (on behalf of the Chairman) a “Settings of Care” meeting at the Strategic Health Authority. She had also attended the monthly Directorate Performance Meeting.

Mr Critchlow had commenced meetings regarding an overview of the estates function.
5.3 **Chief Executive**

The Chief Executive presented his report at Enclosure B which was noted by the Board.

He added that he had met with other local Chief Executives to address the potential for options of service changes within Surrey.

5.4 **Director of Nursing**

5.5 **Medical Director**

5.6 **Director of Finance**

5.7 **Director of Operations (Elective)**

5.8 **Director of Operations (Emergency)**

5.9 **Director of Information**

5.10 **Acting Director of Human Resources**

The Board noted the Trust Board Member Reports at Enclosures C to I.

The Chairman remarked that this was the last Board meeting for John Macey, in his capacity of Acting Director of Human Resources, and thanked him, on behalf of the Board, for his significant contribution to the Board and for moving the Human Resources Department forward with the enormous challenges they have faced over the last year.

6. **Performance Summary**

The Board noted the summary at Enclosure J.

Highlights include:

- A&E 4 hour target - a significant improvement in April. Opening of the Surgical Assessment Unit will have a further impact.
- Patient transport service – problems with GSL contract were noted
- MRSA – aims for no more than 18 cases per year in 2008/9. Number of cases acquired within the Trust has decreased, overall figure has increased due to patients admitted from the community with existing infection. It should be noted that this is a very tough target as the reference year was one of low MRSA cases for the statistic population
- Day case surgery rates – sustained above target
- Outpatients – 13 weeks achieved and sustained
- Cancer waiting times achieved
- MRI and CT scans waiting times significantly reduced
- Finance – last year’s deficit of £7.6m officially recorded
7. Turnaround

The Chairman reminded the Board of the Trust’s financial status which had been assessed as ‘Level 3’ indicating that the Trust requires ‘careful monitoring’. However, the Board made the decision to employ a Turnaround Director to assist in the preparation of a Turnaround Plan, so in March appointed to this position.

The Chief Executive confirmed that the Executive Directors are working on a high level Turnaround Plan, with a cost savings target of £16m to be created over the next 2 years. He stressed that the Plan must be integral with the business of the organisation, part of everyone’s everyday jobs and thinking to make it a reality. The CRES programme had not achieved the level of savings needed, therefore focus is to be applied to the following areas:

- Whole systems approach
- Organisational restructuring
- Capacity and discharge, support services
- Theatre efficiency
- Reduction of Length of Stay
- Reduction of estates and facilities costs, reduction in energy consumption
- Use of IT to reduce back office functions
- Reduction in bank and agency locum spend
- Reduction in overheads – ie. non pay costs
- Medical staff costs

This information will be presented to all Senior Managers, for dissemination to staff, on Friday 26th May 2006.

The Chairman confirmed that the Trust Board had approved the Turnaround Plan in its draft format, and that the final format will be presented to the next Public meeting of the Board.

Mrs Murray, Non-executive Director, reminded the Board of its commitment to patient care and safety during the Turnaround period. The Chief Executive gave a public undertaking that the whole focus of Turnaround is to support those people who deliver front line patient care.

8. Items to note/approve:

8.1 Health & Safety Annual Report

The Board noted the report at Enclosure K.

8.2 Register of Interests

The Board noted the paper at Enclosure L.

8.3 Register of Gifts and Hospitality

The Board noted the paper at Enclosure M

8.4 Banking arrangements

The Board approved the proposal at Enclosure N

8.5 Minutes of Finance Committee meetings, 24.4.06, 8.5.06

The Board noted the Minutes at Enclosure O.
8.6 Minutes of Audit Committee meeting 24.4.06

The Board noted the Minutes at Enclosure P.

9. Any other business

9.1 Endoscopy Theft

Mr Scott, MSC Chair, asked that consideration be given to increased security in vulnerable areas in order to avoid situations as in the recent theft of endoscopy equipment.

9.2 Ms Castledine asked the Board to clarify the situation re the Independent Treatment Centre at Ashford Hospital. The Director of Finance replied that the rumours are unfounded regarding Capio’s financial status, that the Trust negotiations have concluded, and lawyers are now working on the contractual arrangements. It is hoped to make a more positive statement at the beginning of June. Ms Castledine asked for regular updates within the Aspire staff bulletin.

10. Date of next public meeting:

Thursday 27th July 2006, 2pm, Lecture Theatre, Ramp, St Peter’s Hospital

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