

**TRUST BOARD MEETING
MINUTES
Part 1
30th July 2009**

PRESENT:	Ms. Aileen McLeish	Chairman
	Mr. Andrew Liles	Chief Executive
	Ms Caroline Becher	Chief Nurse
	Mr. John Headley	Director of Finance & Information
	Dr. Mike Baxter	Medical Director
	Mr. Peter Taylor	Non-Executive Director
	Mr. Philip Beesley	Non-Executive Director
	Ms. Raj Bhamber	Director of Workforce and Organisational Development
	Mr. Terry Price	Non-Executive Director
	Ms. Sue Ells	Non-Executive Director
	Ms Valerie Howell	Chief Operating Officer
IN ATTENDANCE:	Ms Giselle Rothwell	Head of Communications
	Ms Vanessa Harris	SHA
	Ms Suzanne Cliffe	SHA
	Ms June Harrison	SHA
	Dr Jonathan Morgan	PCT Representative
	Mr Maurice Cohen	Patient Representative
SECRETARY:	Ms. Angela Flint	Board Secretary
APOLOGIES:	Mr. Paul Bentley	Director of Strategy
	Mr. Norman Critchlow	Non-Executive Director

Minute	Action
	The Chairman welcomed the SHA representatives as Trust Board observers for the Foundation Trust application.
1-09/25	MINUTES The minutes of the previous meeting held on 28 th May 2009 were agreed as an accurate record.
1-09/26	MATTERS ARISING Summary action points The Trust Board reviewed all of the actions from the previous meeting. Nominated leads confirmed that all of the respective actions had been completed, appeared as agenda items for this meeting, or were on track within the agreed timescales. 1-09/06 - The Chief Nurse confirmed the Datix reporting system was now up to date

and an on-line incident reporting system would be introduced. Hand held devices to collate patient views were also being explored.

REPORTS

1-09/27 **Chairman Report**

The Chairman presented the Chairman's Report and added that after twenty years both Alli and Ruth Lallmahomed would be leaving the Trust; a number of Board members had attended the leaving party to wish them well.

1-09/28 **Chief Executive Report**

The Chief Executive presented the Chief Executive Report. He updated Trust Board on the Renal Unit tendering process and the initial Programme Board meeting. He said this was a significant step for the Trust and regular updates would be provided throughout the process. Maurice Cohen asked if dialysis care would be shared with Epsom and St. Helier. The Medical Director confirmed that transplant surgery would continue at St. Georges and that ASPH (Ashford and St. Peter's Hospitals) would initially supply the estate in which Epsom and St. Helier would carry out their service

PB

The 'Lean' programme has been initiated and would support the Trust's drive to continue to improve service provision. The company 'Simpler' had been commissioned to support the programme. Executive leads had been identified for the two programmes to begin in September 2009.

A second Gold Award from the Twin and Multiple Births Association had been awarded to the Trust. The Trust was the first organisation to achieve this.

QUALITY AND SAFETY

1-09/29 **Quality and Safety Report & Quality and Safety Metrics**

The Chief Nurse presented the monthly Quality and Safety report. She said that the current format remained under review and that the version presented to Trust Board was the first iteration. In future an overarching dashboard would underpin information provided with trajectory data and benchmarking being included.

She referred Trust Board to the improved SUI (Serious Untoward Incident) process attached at the appendices and confirmed it had been ratified at TEC (Trust Executive Committee). The Chairman asked that an additional step which would inform Trust Board earlier be included in the process.

CB

Key highlights were as follows:

- One SUI had been identified and investigated
- Infection Control rates are within target
- A pilot Trust Patient Questionnaire would be issued during August.

The Director of Finance and Information detailed the actions taken to mitigate further risk from the data memory stick incident, explaining that formal channels of

investigation and reporting had been followed.

The Chief Nurse confirmed that interim arrangements had been made for the Trust named nurse for Child Protection. Dagnar Gohil Paediatric Matron, is currently in the role while recruitment for a dedicated Child Protection named nurse is underway.

The Chief Executive confirmed that it had been 127 days since a hospital acquired MRSA case had been identified and this demonstrated a good commitment to infection control by clinicians.

The Medical Director referred Trust Board to the Quality and Safety Metrics Report and confirmed that trajectory, clinical outcome, safety and action plan delivery would be included in future reports. Terry Price added that the neonatal data required benchmarking detail against a Level 3 Unit.

The Chairman summarised the report and stated that the Medical Director was working with the SHA Observatory in order to ensure that clinical quality outcomes of care were reported to Trust Board in the format of an exception report traffic light system.

Trust Board APPROVED the on going development of the Quality and Safety monthly report and Quality and Safety Metrics.

1-09/30 Health and Safety Report

The Chief Nurse presented the Health & Safety Report and referred Trust Board to the number of assaults on staff which had increased significantly in the last quarter. She confirmed that a zero tolerance approach would be adopted and measures would be taken to reduce the risks to staff and patients from acts of violence.

Trust Board NOTED the Health and Safety Report.

1-09/31 Matrons Development Report

The Chief Nurse advised Trust Board of the developments made to the Matron role and said the plan indicated the Trust's recognition of the importance and priority attached to the work and ultimately the improvement in the patients' experience that would follow. The plan intended to empower Matrons to reach their full potential and meet the agreed objectives, and she added that Debbie Stubberfield from the SHA had supported the three workshops.

The Director of Workforce and OD and Sue Ells said that the addition of cultural aspects to the workshop agendas would support the programme as it developed.

The Chief Nurse concluded that in order to aid visibility the new scarlet with navy piping uniform for Matrons had been introduced.

Trust Board NOTED the Matrons Development Report.

1-09/32 Annual Single Equality Scheme Review

The Director of Workforce and OD presented the Annual Single Equality Scheme Review which had been developed in 2007 with a three year life. She said it was an ambitious plan and the paper intended to update the Trust Board on the actions which had been completed and to provide a stocktake of the plan, given the changes that have occurred since July 2007. She added that a more focused approach had been taken with a new Programme Manager appointed, six Workstreams developed with Programme Champions identified.

Terry Price asked for further clarification on disability and improving physical access to the hospital buildings. The Director of Workforce and OD confirmed this was a national standard requirement and work was currently moving at a fast pace to improve this. A report would be presented to September Trust Board.

RB

Trust Board NOTED the Annual Single Equality Scheme Review.

1-09/33 **Single Sex Accommodation**

The Chief Operating Officer presented the Single Sex Accommodation report on behalf of the Director of Strategy, which had been developed in direct response to the non compliance identified in Standards for Better Health C13a and C20b. Progress towards the elimination of patients exposed to mixed sex accommodation continued to be on target, and additional refurbishment to bathroom and toilet facilities included in the programme.

Regular reports will be presented to Trust Board to provide information on monitoring non-compliance with the single sex agenda together with progress updates on the programme.

**CB/
VH/
PB**

The Chief Nurse confirmed that the SHA had asked the Trust to present the achievements made on the Single Sex Accommodation programme to the Department of Health. Trust Board agreed the importance of continued communication with carers.

GR

Trust Board NOTED the Single Sex Accommodation Report.

1-09/34 **Swine Flu Update**

The Chief Operating Officer confirmed that appropriate Swine Flu plans had been developed and that the Trust continued to monitor and report details to the SHA. Currently the Trust had seen increased attendances in both Adult and Paediatric A&E Departments of people with flu-like illnesses. There have been a small number of admissions, of both children and adults. However on further investigation swine Flu had been ruled out.

To date attendances had been managed within the A&E Department, and admissions managed within the Aspen and Ash Ward side rooms, without the need to escalate.

A 'flu week' to raise preparedness within the Trust had been successful.

Philip Beesley asked if the 'worst case scenario' had been fully mitigated. The Chief

Operating Officer confirmed the Trust was fully prepared in line with current guidelines.

Terry Price asked for details of the presenting symptom to admission process. The Medical Director explained the cascade system of symptom severity.

The Director of Workforce and OD added that there was a flu vaccination programme underway for staff, where historically update was low.

Trust Board NOTED the Swine Flu Update.

1-09/35 **Corporate Risk Register**

The Chief Nurse presented the Corporate Risk Register, stating there had been four new risks and four risks closed since 1st April 2009. She referred Trust Board to Item 837 - Psychiatric Assessments, adding that the Chief Executives from both organisations were negotiating improved arrangements.

Terry Price asked when Item 887 on memory stick data, would be reduced due to the significant programme of mitigated action plans currently underway.

The Chief Nurse said an additional column with mitigated actions rag rated would be introduced. **CB**

The Trust Board NOTED the Corporate Risk Register.

1-09/36 **Board Assurance Framework (BAF)**

The Chief Executive presented the full Board Assurance Framework highlighting the mitigated actions on:

- Hospital Acquired Infections - the Infection Control team along with the Chief Nurse 'walk the patch' to monitor compliance with the Hygiene Code and report back to the monitoring committee (Trust Executive Committee).
- Embedding the patient experience – supported by the Matrons Development Programme. Monthly Performance meetings monitor against the Patient Survey action plan.
- Financial investment decisions – new processes introduced and embedding well.

The Chief Nurse will review the BAF and realign against the four Strategic Objectives. Terry Price confirmed that the Integrated Governance Assurance Committee, as monitoring committee, had confidence in the BAF's mitigated action system. **CB**

Trust Board APPROVED the Board Assurance Framework.

PERFORMANCE

1-09/37 **Performance Report**

The Chief Operating Officer presented the monthly Performance Report, stating that overall performance had been good. She highlighted the following key areas:

Monitor Compliance Framework (Q1). The Trust's overall performance score remained at 2.3, which rated as Amber. Performance in two key areas contributed to the position:

- Core standards against the Care Quality Commission criteria. It was unlikely that the Trust's position would improve against the standard throughout the coming year, although the bed remodelling programme of work will ensure delivery of all standards by the end of the financial year.
- Cancer 62 Days and two week target. The Trust was potentially below target in both areas. In response weekly Cancer Performance Meetings commenced in June with Business Centre Managers.

Care Quality Commission - the Trust was at risk against the following Care Quality Commission targets:

- Cancelled Operations. Despite an improved May performance, June has seen a deterioration. A revised action plan is being produced and improved data validation processes are in place.
- Data Quality on Ethnic Group. An internal project had been established, as part of the trust's 'Pacesetter' Programme, and focused on improved data capture.
- 18 Weeks. Aggregated performance remained strong, but specialty performance within orthopaedics remained a challenge. Improved pathways and improved compliance with policy was underway.

A&E Performance had improved during May and June through increased MAU staff levels to support A&E flow, together with weekly performance improvement team meetings.

Emergency admissions were up by 6.93% year to date, with A&E attendances up by 2.46%. This represented a high level of emergency demand on the service. Discussions with the PCT were underway to understand the pattern emerging.

The Chairman noted there had been an increase in Maternity activity. The Chief Nurse agreed, and said that the departmental refurbishment had been successful with further improvements planned. The Chief Executive added that the recent Maternity Patient Survey results were due within the next week and that the NHSLA Standards (old CNST) and Birth Rate Plus assessment were also due to take place by the end of the year.

The Chairman congratulated all the teams on the strongest Trust performance to date.

Trust Board APPROVED the Performance Report.

1-09/38 **Finance Report**

The Director of Finance and Information presented the Finance Report and explained that the year to date surplus was £1.0m, which was £0.2m less than target.

The Trust was however forecasting that it will recover the current position and deliver

the target surplus for the year of £4.8m.

The Trust reported a strong income position due to over-performance on activity. However, performance against Cost Improvement Plans (CIPs) remained short of its target at Month 3, with a year to date shortfall of £0.3m. Performance meetings with Business Centres had been used to review progression against CIPs, manage accountability and delivery and seek out replacement CIPs, a number of which had subsequently been identified. After including the new plans the projected shortfall against plan was reduced to £0.6m. Further replacement CIPs are actively being sought to further reduce and ultimately eliminate the projected shortfall against plan.

Pay was overspent by £0.1m in month. Expenditure on temporary staff remained over £1.0m per month and in June was higher than April and May. The £1.7m original corporate CIP for reducing temporary staff costs was currently forecast not to deliver its target.

Terry Price confirmed that the Finance Committee monitored the CIP programme closely and had approved the replacement CIPs.

Maurice Cohen asked if the European Working-time Directive (EWD) had contributed to the overall overspend. The Director of Workforce and OD said the implementation of EWD had been successful and had been helped by the workforce reconfiguration over the Trusts two sites.

Trust Board NOTED the Finance Report. The Director of Finance and Information presented the Finance Report and explained that the year to date surplus was £1.0m, which was £0.2m less than target.

The Trust was however forecasting that it will recover the current position and deliver the target surplus for the year of £4.8m.

Trust Board NOTED the Finance Report.

1-09/39 **Workforce Report**

The Director of Workforce and OD presented the monthly Workforce Report and highlighted that the primary focus during the month had been on the high agency costs.

The Deanery was alert to the national shortfall in staffing emergency medicine.

The reconciliation work between workforce and finance had been completed.

Work continued to develop on the analysis of staff absence.

Trust Board APPROVED the Workforce Report.

1-09/40 **Workforce Equality & Diversity Annual Report**

The Director of Workforce and OD presented the annual report on Workforce Equality and Diversity, stating that over the last three months the key focus had been

on ethnic minorities' low levels of engagement with training and higher levels of leavers. Sue Ells asked which committees monitored this. The Director of Workforce and OD confirmed that the Equality and Diversity Steering Group reported to the Trust Executive Committee (TEC).

Maurice Cohen asked if registering sexual orientation was a statutory requirement. The Director of Workforce and OD said that it was and added that the Trust had made evaluating the equality and diversity a priority focus and that the Trust had just appointed Champions for each component.

Trust Board NOTED the Workforce Equality and Diversity Annual Report.

STRATEGY & PLANNING

1-09/41 Corporate Objectives 2009/10

The Chief Executive presented the Corporate Objectives 2009/10 Quarter One. Of the 21 milestone actions for Quarter One, 17 were RAG rated Green; 4 Amber and 2 Red. The 2 Red were now Amber.

Trust Board NOTED the Corporate Objectives.

1-09/42 Non Executive Roles

The Chairman presented the amendments to Non Executive Roles which had been approved by the Remuneration and Nomination Committee.

Trust Board APPROVED the amendments to the NON Executive Roles.

1-09/43 Foundation Trust Update

The Chief Executive presented the Foundation Trust Update, stating that the twelve weeks Public Consultation had three more weeks to complete. Over seven hundred public members had been recruited so far and once responses to the mail shot had been received it was anticipated that the Trust would be well on target for the 3000 public members. The Chairman reminded the Non Executives that they would need to complete a membership form in order to become an approved member of the Board, by the Council of Governors, on achieving Foundation Trust status.

The Chief Executive confirmed that the final version of the Integrated Business Plan (IBP) and Long Term Financial Plan (LTFM) were currently undergoing final reiterations, and would be ready for submission to the SHA on 28th August 2009.

Trust Board NOTED the Foundation Trust Update report.

REGULATORY

1-09/44 Constitution Ratification

The Chairman presented the Constitution for ratification subject to the outcome of

the Consultation and Monitor's approval.

Trust Board RATIFIED Ashford and St. Peter's Hospital NHS Trust Constitution subject to the points above.

1-09/45 **Confidential and Public Board Papers**

The Chief Executive presented the Confidential and Public Board Paper. He confirmed the paper had complied with the legal advice that had been obtained and that it brought clarity to Trust Board business.

Maurice Cohen agreed and was content with the paper.

Trust Board NOTED the Confidential and Public Board Paper.

1-09/46 **Scheme of Delegation – (summary version) Board to the Chief Executive**

The Director of Finance and Information presented the Scheme of Delegation summary, which delegated the day to day trust business to the Chief Executive with a ceiling of £1m. Terry Price and Peter Taylor confirmed the Finance Committee had fully discussed and agreed the delegated powers.

Trust Board asked that the Scheme of Delegation be reviewed in April 2010.

JH

Trust Board APPROVED the Scheme of Delegation – (summary version) Board to the Chief Executive.

1-09/47 **Treasury Management Policy**

The Director of Finance and Information presented the Treasury Management Policy which had been agreed at the Finance Committee. He added that it was a prudent policy and followed Monitor's guidelines.

Terry Price asked if the PWC recommendations had been included. The Director of Finance and Information confirmed that they had. The Chairman asked that the Finance Committee continue to review and monitor the policy in light of potential economic changes.

JH

Trust Board APPROVED the Treasury Management Policy.

1-09/48 **Finance Committee Terms of Reference**

The Director of Finance and Information presented the Finance Committee Terms of Reference, reminding Board that a draft had been presented to May Trust Board. A final full discussion at the Finance Committee Amendments had brought clarity to the objectives and membership.

Trust Board APPROVED the Finance Committee Terms of Reference.

1-09/49 **Audit, Trust Executive and Integrated Governance Assurance Committees**

Terms of Reference

The Chief Executive presented the Board Sub-Committee Terms of Reference for the Audit Committee, Trust Executive Committee (TEC) and Integrated Governance Assurance Committee (IGAC), which had been approved by Trust Board in May and where improvements to styling and consistency had been requested.

The Director of Workforce and OD added that the Remuneration and Nomination Committee Terms of Reference would be presented to next Trust Board. **RB**

Trust Board RATIFIED the Audit Committee, Trust Executive Committee and Integrated Governance Assurance Committee Terms of Reference.

INFORMATION

1-09/50 **Trust Executive Committee Minutes 12th and 26th June 2009**

Trust Board NOTED the Trust Executive Committee Minutes.

1-09/51 **Integrated Governance Assurance Committee Minutes 3rd June 2009**

Trust Board NOTED the Integrated Governance Assurance Committee Minutes.

1-09/52 **Finance Committee Minutes 17th June 2009**

Trust Board NOTED the Finance Committee Minutes.,

ANY OTHER BUSINESS

The Chairman asked how effective the Trust Board meeting had been. Peter Taylor, Terry Price and Philip Beesley said that the Board papers were improving in shortness of length and discipline in briefing. The Chief Nurse added that during Foundation Trust applications the number of papers presented to Board increased considerably. The Chairman concluded that the development of Balance Score Card would support the depth of detail presented to Trust Board.

1-09/23 **NEXT MEETING**

Thursday 24th September 2009 at 2.00pm, Education Room, Ashford Hospital.

Action Points Summary – 30th July Board

	ITEM	Action Required	Action	Date	Status
1-09/28	Chief Executive Report	Renal Unit update to be presented to Board	PB	24 Sept	Agenda item
1-09/29	Quality and Safety Report & Quality and Safety Metrics	To add earlier step to inform Trust Board into the revised SUI process	CB	24 Sept	

Paper 2.1

	ITEM	Action Required	Action	Date	Status
1-09/32	Annual Single Equality Scheme Review	Clarification on disability and improving physical access to the hospital buildings. A report to be presented to September Trust Board.	RB	26 Nov	
1-09/33	Single Sex Accommodation	A report will be presented to next Trust Board to provide information on monitoring non compliance with the single sex agenda and progress updates on the programme	CB/ VH	24 Sept	Ongoing
		Trust Board agreed the importance of continued communication with carers.	GR	24 Sept	Ongoing
1-09/35	Corporate Risk Register	Additional column with mitigated actions rag rated would be introduced.	CB	24 Sept	
1-09/36	Board Assurance Framework	Realign the BAF against the four Strategic Objectives	CB	24 Sept	Complete
1-09/46	Scheme of Delegation	Trust Board asked that the Scheme of Delegation be reviewed in April 2010.	JH	April 2010	
1-09/47	Treasury Management Policy	Finance Committee to review and monitor the Treasury Management Policy in light of potential economic changes	JH		Ongoing
1-09/49	Sub Board Committee Terms of Reference	The Remuneration and Nomination Committee Terms of Reference to be presented to next Trust Board.	RB	24 Sept	Agenda item