

Ashford & St Peter's Hospitals NHS Trust

Minutes of the fifty-first meeting of the Ashford & St Peter's Hospitals NHS Trust Board Meeting held on Thursday 6th November 2003 In the Education Centre, Ashford Hospital

Present

Mr Clive Thompson	Chairman
Mr Glenn Douglas	Chief Executive
Dr Mike Baxter	Medical Director
Dr Clare Bennett	Director of Medical Education
Ms Jayne Connelly	Director of Strategic Development
Mr Nick Hulme	Director of Operations
Mr Mark Jennings	Director of Clinical and Non Clinical Support Services
Mrs Ruth Lallahomed	Deputy Director of Nursing & Quality
Mr Keith Mansfield	Director of Finance and Information Services
Ms Sian Thomas	Director of Human Resources
Mrs Liz Brooks	Non-executive Director
Mr Peter Field	Non-executive Director
Mrs Mary Riley	Non-executive Director
Mr Rodney Gritten	North Surrey PCT Representative

Agenda

- 1) **Apologies of absence**
- 2) **Minutes of the Trust Board meeting held on 9th October 2003**
- 3) **Matters arising**
- 4) **Chairman's report**
- 5) **Chief Executive's report**
- 6) **Presentation: Freedom of Information Act**
- 7) **Clinical Governance Development Plan**
- 8) **Finance and Performance management**
 - 8.1 Performance Report
 - 8.2 Workforce Performance Report
 - 8.3 Finance Report
- 9) **Items to note/approve**
 - 9.1 "Shaping the Future of your Local Health Services – A Public Consultation"
 - 9.2 Minutes of Audit Committee meeting 9th October 2003
 - 9.3 Minutes of Finance Committee meeting 27th October 2003
 - 9.4 Approval of expenditure from Trust Funds
- 10) **Any other business**
- 11) **Date of next meeting**

[Top](#)

Part 1

1. **Apologies of absence**

Apologies of absence were received from Mrs Joyce Winson Smith, Director of Nursing, Mr Michael Bailey, Non-executive Director, Mrs Jenny Murray, Non-executive Director and Mr Graham Worsfold, Woking PCT Representative

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2. Minutes of the Trust Board meeting held on 9th October 2003

The Minutes of the Trust Board meeting held on 9th October 2003 were **AGREED** as a correct record.

3. Matters arising

There were none.

[Top](#)

4. Chairman's report

The Chairman had undertaken two days resource management training understanding the importance of human factors within risk management. The event was part of an ongoing programme to be attended by many members of staff.

The Chairman had attended the St Luke's Service at Ashford, and the Annual General Meeting of the Ashford Hospital League of Friends. A Trust Board away day had begun to address the main issues facing the Trust over the next 3-5 years.

The Chairman announced the commencement of the public consultation period for the reconfiguration of acute services.

Mr Thompson advised that two job-share Consultants in Paediatrics had been appointed.

Reports from Non-executives

Mrs Riley had attended meetings in the Spelthorne area regarding the configuration of services. Public transport had featured high on the agenda together with ambulance services. The meetings had not been very well attended by members of the public but had provided very good feedback.

The Director of Strategic Development confirmed that many more meetings are scheduled to take place to fully engage all members of the local health economy.

[Top](#)

5. Chief Executive's report

The Chief Executive expressed appreciation to all Executive Directors for their attendance at internal and external configuration meetings and commended Ms Connelly her tremendous input into the process.

The Chief Executive announced that the Trust has won the Health Services Journal award for its work on the recruitment and retention of staff.

Four 'B' awards for clinical excellence had been received by Dr Mike Baxter, Mr Martin Thomas, Mr Douglas Donaldson, and Dr Liz Bellamy. Congratulations were extended by the Trust Board.

The Chief Executive reported that Mr Simon Robbins, Chief Executive of Surrey and Sussex Strategic Health Authority had visited the Trust and had been very impressed with the changes made within the Maternity and A & E Departments.

As this was the last Trust Board meeting for Dr Claire Bennett, who has decided to step down as Director of Medical Education, the Chief Executive, on behalf of the Board, thanked Dr Bennett for her tremendous input, and commended her for her enormous contribution in making changes in the way medical education is delivered by the Trust.

[Top](#)

6. Presentation: Freedom of Information Act – Cath Rich, Information Manager

Cath Rich, Information Manager, presented to the Board an overview of the Freedom of Information Act and how it relates to the Trust. General access is to be given to members of the public to all types of recorded information thereby making the organisation open and accessible.

There is a statutory obligation to adhere to the Act as from 31st October 2003. The Trust has agreed to adopt the model for all acute NHS Trusts
Ms Rich described the 14 classes of information, which are quite broad in what they cover.

The Publication Scheme is available on the Trust website, and the IT Department will be able to respond to requests within 20 days. A programme of staff awareness will be commencing.

By January 2005, all information must be readily accessible and available, the Trust will now undertake much work around document management eg standardisation of minute taking, report writing. The Board discussed the problems this would entail.

Mr Field, Non-executive Director, enquired how information will be retrieved. Ms Rich replied that various systems are under review at the moment.

The Director of Operations advised that information relating to clinical activity and waiting lists may also be published on the website.

Ms Rich tabled a summary of the Freedom of Information Act.

[Top](#)

7. Clinical Governance Development Plan

The Deputy Director of Nursing and Quality presented the summary report at Enclosure B which was **NOTED** by the Board. A full version of the report is available on the Intranet.

Mrs Lallmahomed highlighted various points of the report:

- Good progress has been made by the Trust in relation to targets
- The Trust has been commended by the Commission for Health Improvement for work undertaken in relation to the Consent process
- Trust-wide training is ongoing in root cause analysis to help identify when processes have gone wrong, as well as training by TeReMa to look at patient and staff safety and how they work together.
- The Essence of Care clinical benchmarks have been updated again this year to look at essential aspects of care and incorporating the involvement of all groups of staff
- Patient and Public Partnership Strategy
- Education and Training: continued professional development targets have progressed well
- IT training programme
- Establishment of a Risk Register

Clinical audit was noted as an area where the Trust has not progressed as well. It is hoped that the recent appointment of a Clinical Effectiveness and Audit Manager will rectify this situation.

[Top](#)

8. Finance and Performance management:

8.1 Performance Report

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

The Director of Operations advised that October had been a very busy month for activity. There had been a noticeable increase in hospital admissions and attendances in A & E. Activity was up in all areas. October, November and

December will see further increased activity in order to meet all inpatient and outpatient targets.

Mrs Brooks enquired whether the number of patients staying longer than 28 days was falling. She was advised that this figure is slowly decreasing.

The Director of Operations reported that emergency admissions through the A & E Department and onto the wards is the main pressure area. He detailed what work is being undertaken to rectify the situation. The Winter Planning process had also begun.

Mr Hulme was asked to identify at the next Board meeting areas where pressure can be reduced.

[Top](#)

NH

8.2 Workforce Performance Report

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

Ms Thomas advised that the staff survey had commenced and tabled a copy of the questionnaire. It had been developed by the Commission of Health Improvement in association with the Department of Health and contains questions about people's jobs, worklife balance, teamworking, errors and incidents, health and safety, and bullying and harassment.

The Board were updated on compliance by medical staff with the European Working Time Directive. A development plan for the Strategic Health Authority will be created by the end of December.

Ms Thomas reported that the number of staff leavers had increased slightly and is seeking further information on the reasons for this.

Mr Field, Non-executive Director, brought the Board's attention to a report from the LSE on demographics showing the migration of staff from London, including the loss of teachers as well as nursing staff.

Maternity still remains a high risk area. The Board were assured that the Maternity Department are doing everything possible to encourage more midwifery students, return to practice and adaptation nurses/midwives as well as retaining existing staff.

The Director of Operations had attended a meeting that morning of the Agenda for Change Steering Group which had been very positive and will look at how the Trust can we enhance the roles of staff, meet a life balance, evoke better patient care, and provide real opportunities.

[Top](#)

8.3 Finance Report

The Director of Finance presented the report at Enclosure E which was **NOTED** by the Board.

Mr Mansfield reported an overspend of £418k for the first half of the financial year. The annual plan now reflects the revised budget, incorporates the NHS Bank loan and includes the change of discount rate from 6 to 3.5%.

Non pay still remains a problem particularly the cost of drugs and blood products. The Director of Operations was asked to undertake an analysis of these figures to determine any relation to increased activity.

The Finance Committee has debated the year end forecast overspend of £429k and the need to break even. The Finance Department will be consulting with

NH

Directorates to see what can be achieved.

The Chairman asked a report be provided on what effect actions on increased financial control are having at the Trust.

[Top](#)

NH/KM

9. Items to note/approve:

9.1 "Shaping the Future of your Local Health Services – A Public Consultation"

The Chairman announced the launch of the public consultation period and tabled the Consultation document

The Board **FORMALLY** accept the report.

The Director of Strategic Development updated the meeting on the consultation process and explained how the public is being engaged together with local press and media coverage. Tear off slips are provided within the document for personal responses. Presentations will be made to community groups and local forums. Public workshops will also take place with the public given opportunity to address their questions. The Trust's Joint Staff Consultative Committee have been involved in the process. There are also open staff meetings each week on both sites.

The Chairman emphasised that the process is being led by North Surrey PCT and urged people to take part in the process. The Trust will not carry out change where it will increase risk. Configuration is a national issue to determine where people can receive the best possible service. The Trust has tried to consider all communities in the local health economy, accessibility problems for West London residents, looked at patterns of usage, and an out of hours service at Ashford. The Consultation period ends at the end of January 2004. There will be a final review for stakeholders in February, before final scrutiny by the Department of Health and Strategic Health Authority.

The Board received one question from a member of the audience:

"In local papers it was informed that A&E (AH) will be closed and it will be run by nurses and no doctors. Also it was called an Urgent Treatment Centre instead of A&E."

The Chief Executive advised that the department, which at the current time does not provide a full trauma service, will be in line with a "walk in" facility which will be nurse led. After 10pm the service will be run by GP's. The Board agreed that further clarity was necessary on this issue.

[Top](#)

9.2 Minutes of Audit Committee meeting 9th October 2003

The Minutes of the Audit Committee meeting held on 8th October 2003 were **NOTED** by the Board.

9.3 Minutes of Finance Committee meeting 27th October 2003

The Minutes of the Finance Committee meeting held on 27th October 2003 were **NOTED** by the Board.

9.4 Approval of expenditure from Trust Funds

The Board **APPROVED** the purchase of Choledochoscope equipment for the Surgical Directorate at a cost of £24,698.

[Top](#)

10. Any other business

There was none.

11. Date of next meeting

Thursday 11th December 2003, 2 pm, Lecture Theatre, the Ramp, St Peter's Hospital

[Top](#)