

**TRUST BOARD MEETING
MINUTES
Part 1
24th September 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. Paul Bentley	Director of Strategy
	Mr. Peter Taylor	Non-Executive Director
	Mr. Philip Beesley	Non-Executive Director
	Mr. Norman Critchlow	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. Katy Elstrup	PWC Observer
	Mr. Tim Glen	PWC Observer
	Dr Jonathan Morgan	PCT Representative
	Mr Maurice Cohen	Patient Representative
	Lynn Robinson	PALS Manager
	Ms Eileen Nolan	Associate Director Of Maternity Services
	Ms Sally Morgan	Complaints Manager
SECRETARY:	Ms. Angela Flint	Board Secretary
APOLOGIES:	None	

Minute	Action
	The Chairman welcomed the PWC representatives as Trust Board observers as part of the Foundation Trust application process.
1-09/54	MINUTES The minutes of the previous meeting held on 30 th July 2009 were agreed as an accurate record subject to deleting the duplicate lines in Paragraph 1-0938.
1-09/55	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.

Item 1-09/29: The Chief Nurse to report back next Board.

Item 1-09/32: The Director of Workforce and OD confirmed that work on disability access to hospital buildings was being carried out and changes had been made to lift buttons, kerb access and colour schemes.

REPORTS

1-09/56 Chairman Report

The Chairman presented the Chairman's Report adding that the SHA Assurance process had, as part of the Foundation Trust application, demonstrated good progress, with a small number of processes to be completed.

Philip Beesley congratulated the Chairman on behalf of the Board for her excellent first year as Chairman.

1-09/57 Chief Executive Report

The Chief Executive presented the Chief Executive Report and highlighted the good progress made with the renal tender bid.

He confirmed that the 'LEAN' work had progressed well and that it would support the wider programme for continuous improvement in the quality of care delivered to patients over the next five years. The two pilot projects, Day Surgery and Discharge, will equip staff with the tools to develop more innovative working practices, ensuring high quality care whilst improving efficiency. The work is being carried out with Simpler, and an internal Service Improvement team has been appointed.

Significant improvements had been made within the Maternity department, with recent survey results demonstrating improved experience for mothers over the last two years. The recent internal staff survey had shown a marked improvement on how staff feel about working in the Trust.

Trust Board NOTED the Chief Executive Report.

QUALITY AND SAFETY

1-09/58 PALS Annual Report

Lynn Robin presented the PALS Annual Report and provided the summary of activity from April 2008 to March 2009. Of concerns raised, 81% were resolved, 6% given information about the formal complaint process, 6% referred directly for investigation, and 4% referred to other sources of support.

Positive outcomes included:

- Process changes to the Hearing Aid Clinic to make appointments
- Changes in practice for the storage of soiled patient cloths
- Changes to Outpatient doors signage
- A Braille machine installed in the PALS department

- Wheelchair availability on Level 1 improved.

Trust Board NOTED the PALS Annual Report.

1-09/59 **Nursing and Quality Report**

The Chief Nurse presented the Nursing and Quality report. The nursing initiatives and progress included:

- The Matrons Development programme had established a set of expectations and a vision for nursing as well as providing highly visible matron uniforms. The programme had now entered the transformational phase.
- A trust wide mattress audit had been conducted with 15 mattresses condemned
- A new trial 'plated system' for patient nutrition had been initiated.

Trust Board NOTED the Nursing and Quality report.

1-09/60 **PALS Incidents Complaints (PIC) Report**

The Chief Nurse presented the PIC Report explaining that incident reporting had significantly improved. This was attributed to the appointment of Clinical Governance Managers within each Business Centre.

The Chief Nurse informed Trust Board of a latex incident and said a full investigation would be carried out. Falls remain the highest category of incident reporting and Matrons had been focusing on this area.

Philip Beesely asked for further details on the incident 04/318. The Medical Director said drug incidents were below regional average and mitigating action had been implemented.

Sue Ells requested the addition of patient percentages as part of the report data. The Medical Director confirmed it would be incorporated into the Quality dashboard.

MD

The Chief Nurse added that complaint targets had been set at for a 10% reduction in complaints and would be regularly monitored by Trust Board.

Trust Board NOTED the PIC Report.

1-09/61 **Child Protection Update**

The Chief Nurse advised Trust Board that child protection continued to be high on the agenda for all healthcare organisations. The Trust Executive Committee (TEC) had received the report on 11th September 2009. The Trust's current status report demonstrated that the Trust met its statutory requirements in full with regard to the Criminal Records Bureau. Revised policies and procedures supported the Surrey Safeguarding Children's Board procedures. A successful programme of child protection was being carried out for all staff, to be completed by end of September 2009. Designated named staff were aware of their responsibilities and the Board lead for child protection was the Chief Nurse.

Terry Price enquired if training attendance had been monitored. The Medical Director confirmed 95% of all staff had attended and focus was on the last 5% to complete training by the end of November.

Trust Board APPROVED the Child Protection Update report.

1-09/62 **Patient Survey Briefing Paper**

The Chief Nurse presented the Patient Survey report and confirmed that the action plans associated with previous surveys had made significant progress would be regularly presented to Board.

The Medical Director said real time data was being explored to gather patient experience data with hand held systems. The Chairman reminded Board that the challenge would be to set the Trust key priorities from the collated data.

AL

Trust Board NOTED the Patient Survey Briefing Paper.

1-09/63 **Maternity Services Presentation**

Eileen Nolan gave a presentation on Maternity Services. The patient survey carried out in 2007 had had a poor reception. Results from this year from an identical patient survey confirmed that excellent progress had been made. 29 questions showed significant improvement and there were no questions that demonstrated significantly worse outcomes.

The 2009 survey had demonstrated an improvement from 2.7 'least well performing service' to 3.435 'best performing' service.

Midwives had worked very hard to improve their service and this included:

- Improved breast feeding
- Improved consistent provision of information
- Improved cleanliness.

Work continued to provide place of choice for antenatal check-ups.

Maurice Cohen asked if mothers who gave birth to subsequent children required less information. Eileen Nolan said that care needs were assessed on an individual basis and information and care provided according to specific need.

Trust Board commended the Maternity Service team for their excellent work.

Trust Board NOTED the Maternity Services Presentation.

1-09/64 **Complaints Annual Report**

Sally Maughan presented the Complaints Annual Report, stating the Trust had responded to 99.75% of complaints within the Department of Health timescale of 25 days.

During 2008/09 the Trust received 401 formal complaints. This represented a

decrease of 8%. The majority of complaints had been resolved through Local Resolution and eight requests had been made to the Healthcare Commission for Review. This represented a 33% decrease in the numbers of complaints referred for independent review.

The Complaints Committee chaired by the Chief Executive monitored complaint progress. Sally Maughan added that Complaint training for all staff would be carried out in the coming year. She also asked Trust Board to note the planned development of the Complaints Process.

The Director of Workforce and OD added that the Complaints Report aligned with the work being carried out on values and behaviours.

Trust Board NOTED the Complaints Annual Report.

1-09/65 **Corporate Risk Register**

The Chief Nurse presented the Corporate Risk Register, stating there had been two new risks since 27th August 2009; Swine Flu Pandemic and 'not being licensed for Foundation Trust Status'.

Peter Taylor and Terry Price said the addition of target dates to the template would help focus the Board's attention upon the timescales attached to mitigating actions. The Chief Nurse agreed to add target dates to the next Board report.

CB

The Trust Board NOTED the Corporate Risk Register.

1-09/66 **Board Assurance Framework (BAF)**

The Chief Executive presented the Board Assurance Framework which now aligned with the four strategic objectives and cross-referenced to the Corporate Risk Register. The Integrated Governance Assurance Committee (IGAC) monitored progress of action plans for both documents.

Trust Board APPROVED the Board Assurance Framework.

PERFORMANCE

1-09/67 **Balanced Scorecard including Operational Performance**

The Chief Operating Officer presented the Balanced Scorecard which reflected the four Strategic Objectives and demonstrated performance against the agreed Key Performance Indicators as recommended by the SHA. The Balanced Scorecard had taken three months to develop and allowed a quick access to areas of achievement and concern. During the transition from a full Operational Performance Report to Balanced Scorecard, both reports will be presented to Trust Board. The Medical Director explained that the quality dimension of the dashboard was still work in progress and that each of the four quadrants reflected details held within the individual finance, workforce and quality reports.

The Chief Executive added that each 'red' indicator would include an exception

report with further detail.

The Chief Operating Officer presented the monthly Operational Performance Report which had been presented to the Trust Executive Board (TEC) on 11th September 2009. Overall performance had been good with the following key areas highlighted:

- Monitor Compliance Framework (Q2). The Trust's overall performance score remained at 0.8, which rated as Green. MRSA performance remained strong with three reported cases; root cause analyses have been undertaken, and the Trust target remains well under the SHA target.
- Cancelled Operations and 28 Day Guarantee.
- Breast Initiation. PCT funding has been agreed for the Baby Friendly Initiative.
- A&E Performance for St Peter's alone fell below 98% in August. Mitigation measures have been put in place and the Escalation Policy has successfully been implemented Trust-wide.
- Theatre utilisation figures remain unavailable. Terry Price asked for a progress update on the business case. The Chief Operating Office said the business case had been approved by TEC on 11th September 2009 and procurement was in progress. Interim data would be included as part of the Board report.
- Fractured Neck of Femur. An action plan was in place with a working group in place to continue to improve performance with this target including an expanded orthogeriatric service.

VH

Trust Board APPROVED the Balance Scorecard and Operational Performance Report.

1-09/68 **Finance Report**

The Director of Finance and Information presented the Finance Report which reported against key issues with the full report having been presented to the Finance Committee for approval.

He summarised the financial position and explained that the year to date surplus was £2.8m, which was £0.2m ahead of target. The Trust was forecasting a surplus for the full year of £3.5m.

The Trust reported additional income due to over-performance of activity. This position created issues for the main commissioner Surrey PCT.

Progress against the Cost improvement Programme (CIP) had a shortfall of £185k. Performance meetings with Business Centres have been used to review progress against CIPs and manage accountability. These have made good progress in identifying replacement CIPs. Bank and agency spend has continued to remain at high levels and was HENCE RED RATED IN THE DASHBOARD. In August two replacement schemes had been included and further CIPs are still being sought to further reduce the projected shortfall. The Director of Finance and Information and Chief Operating Officer will continue to update the Finance Committee on progress.

The Director of Strategy added that Surrey PCT Quarter One had yet to be closed.

The Chairman confirmed that resolving Quarter One with Surrey PCT was a priority for the Trust.

Trust Board NOTED the Finance Report.

1-09/69 **Workforce Report**

The Director of Workforce and OD presented the monthly Workforce Report and highlighted the key indicators identified in the Balance Scorecard dashboard. She said it was disappointing that the overspend in agency continued, but that the team was to working hard to support the Business Centres. She added that staff turnover continued to be stable.

She reported on staff satisfaction captured in national and local surveys from July 2007 to July 2009, stating there was a positive improvement, with the Trust moving from the bottom quartile to the top quartile. There were three areas that required improvement: training and development, career progression and promotion, and feeling valued.

Team Briefs continued to be very popular with 'standing room' only.

Trust Board NOTED the Workforce Report.

STRATEGY & PLANNING

1-09/70 **Foundation Trust Update**

The Director of Strategy presented the Foundation Trust Update, stating that the Board to Board with the SHA on 23rd September had gone well and the Trust has received the SHAs support for its FT application. A small number of issues remained which included the closure of Quarter 1 with Surrey PCT. The SHA had invited the Board to advise it when it felt the right time for the application to be passed to the DH. He confirmed that the public membership was currently over 4,500. Members had been invited to the Annual General Meeting and it was anticipated to be well attended. Terry Price asked how the membership would continue to be engaged. The director of Workforce and OD confirmed that the Membership Newsletter would be published in October.

Trust Board NOTED the Foundation Trust Update report.

1-09/71 **Stephanie Marks Building Progress Update**

The Director of Strategy presented the report, stating that the new building would be the focal point for patients and their families and would enhance the current diabetes service. Maurice Cohen asked if additional ongoing costs had been included in plans. The Director of Finance and Information confirmed that existing resources would be realigned, and the Medical Director said the centre would be the host for community initiatives.

Trust Board NOTED the Stephanie Marks Building Progress Update.

1-09/72 **Remodelling Bed Capacity**

The Director of Strategy presented the Remodelling Bed Capacity report, confirming good progress had been made. Ashford Hospital was now fully compliant with single sex accommodation. He added that over the winter months progress could be more difficult. The Chief Operating Officer said the programme would be managed along with the Winter Plans and a flexible approach adopted. The Director of Finance and Information reminded Trust Board that financial penalties would be incurred for breaches in the next financial year.

Trust Board NOTED the Remodelling Bed Capacity.

1-09/73 **Flu Pandemic Plan**

The Chief Operating Officer presented the Flu Pandemic Plan, reminding Trust Board that Boards were required to formally publish a 'state of readiness'. The plans were informed by the national and local agendas using best practice and in close collaboration with the Surrey community. Staff are kept informed of the progress of the pandemic and the Trust's response and the communication will increase as the pandemic develops.

Patient numbers presenting with Swine Flu remained low and a rigorous assessment process was in place. The Trust had been visited by the SHA in the last ten days and they were confident about the Trust's state of readiness.

The Trust was actively encouraging the uptake of both the swine flu and the seasonal flu vaccine. The Director of Workforce and OD encouraged Trust Board members and senior managers to lead by example.

Trust Board APPROVED the Flu Pandemic Plan

REGULATORY

1-09/ **Remuneration and Nominations Committees Terms of Reference**

Trust Board APPROVED the Remuneration and Nominations Committees Terms of Reference subject to alteration of review dates to coincide.

INFORMATION

1-09/ **Trust Executive Committee Minutes 10th and 24th July and 28th August 2009**

Trust Board NOTED the Trust Executive Committee Minutes.

1-09/ **Integrated Governance Assurance Committee Minutes 12th July 2009**

Trust Board NOTED the Integrated Governance Assurance Committee Minutes.

1-09/ **Finance Committee Minutes 21st July and 19th August 2009**

Trust Board NOTED the Finance Committee Minutes.

1-09/ **ANY OTHER BUSINESS**

None

1-09/ **NEXT MEETING**

Thursday 26th November 2009 at 2.00pm, Education Room, Ashford Hospital.

Action Points Summary – 24th September Board

	ITEM	Action Required	Action	Date	Status
1-09/60	PIC Report	The addition of patient percentages to be added to the Quality dashboard.	MB	26 Nov	
1-09/65	Corporate Risk Register	Add target dates to the Corporate Risk Register template for next Board report.	CB	26 Nov	
1-09/67	Balance Scorecard & Operational Performance Report	Interim data on theatre utilization to be included in the next Board report.	VH	26 Nov	

Action Points Summary – 30th July Board

	ITEM	Action Required	Action	Date	Status
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	
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	
1-09/46	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	26 Nov	Ongoing