

Board of Directors Meeting, 26 November 2009
 Extract of approved minutes

Present

Non-Executive Directors	Prof. Sir Christopher Edwards	CE	<i>Chairman</i>
	Andrew Havery	AH	
	Colin Glass	CG	
	Richard Kitney	RK	
	Karin Norman	KN	
	Charles Wilson	CW	
Executive Directors	Heather Lawrence	HL	<i>Chief Executive</i>
	Amanda Pritchard	AP	<i>Deputy Chief Executive</i>
	Lorraine Bewes	LB	<i>Director of Finance & Information</i>
	Mike Anderson	MA	<i>Medical Director</i>
	Andrew MacCallum	AMC	<i>Director of Nursing</i>
In attendance	Catherine Mooney	CM	<i>Director of Governance and Corporate Affairs</i>
	Vida Djelic	VD	<i>Interim FT Secretary</i>

1 GENERAL BUSINESS

1.1 Apologies for Absence **CE**

There were no apologies received except AH had indicated that he would be late.

1.2 Declaration of Interests **CE**

None were tendered.

1.3 Minutes of the Meeting of the Board of Directors held on 29 October 2009 **CE**

These were approved as an accurate record of proceedings.

1.4 Matters Arising **CE**

1.6/Sep/09 Members' Council Report

CE confirmed that he had written to the Headmaster of Westminster School and had a date in the diary to meet with him.

1.5/Oct/09 Chairman's report – Election incident

CM confirmed that a report on the election incident had been circulated.

2.2/Oct/09 Performance Report Commentary – September 2009

AMC confirmed that the case of MRSA for AJ was following an admission to A and E with a fractured neck of femur and was therefore not an elective.

1.5 Chairman's Report (oral) CE

He advised the Board that there had been a maternal death at the Trust. The patient had been received as an emergency from the RMH. Both she and the baby died although the baby was not alive when the patient arrived here. HL advised that Monitor, the SHA and the PCT will be informed and an investigation undertaken. An external chair is being sought and a lead investigator will be agreed.

1.6 Council of Governors Membership Report CE

KN expressed concern about the data as there were so many unknowns. AMC confirmed that the gaps are where data has not been supplied by individuals. KN said that the % ethnicity was not helpful without knowing the population ethnicity.

CE said that the election results were now available and an induction session had been run which the new governors thought was worthwhile. CM confirmed that Alison While's appointment had been acknowledged.

1.7 Chief Executive's Report HL

Infection Control

HL said that, unfortunately, since the last performance report the number of MRSA bacteraemias has increased. The Trust had a ninth patient confirmed. She informed the Board that we are on track for the Care Quality Commission (CQC) rating but not for the PCT bonus.

HL also notified the Board about the incidence of Acinetobacter on ITU.

MA confirmed the mode of transmission and that most ITUs have either had it or got it, and that it was very difficult to eradicate.

2 PERFORMANCE

2.1 Finance Report Commentary – October 2009 LB

LB outlined the executive summary of the finance report paper and reported that the financial position for the 7 months to 31 October 2009 is a surplus of £4.3m. She said that the EBITDA position for October was behind the plan by £0.33m.

LB outlined the key areas of pressure in the month. She said we expect to recover the position through increased activity except for trauma and orthopedics. We are behind on electives but costs have increased due to an increase in prostheses, which is linked to the case mix.

She added that no consultant locums could now be appointed without the Medical Director's approval and a quota system was being introduced for other medical staff. This was different to the system for nursing staff as not all doctors were on MAPS.

In answer to a question from KN, HL said that the Trust is 23 out of 26 on the use of Chose and Book.

AP explained that if we reduced waiting time then referrals through Choose and Book would go up. The biggest problem is Trauma and Orthopaedics and GPs cannot book directly to Trauma and Orthopaedics as patients have to have had 6 weeks of musculo-skeletal therapy first.

LB said that there was an error on page 7 – cardiology. The same error is reflected on p.8 of the finance report paper.

2.2 Performance Report Commentary – October 2009 **LB**

LB said that performance against the Monitor selection of indicators is broadly on track with the exception of the MRSA target where performance has deteriorated in October. LB said that the Trust has currently met rating for existing and national targets for the Care Quality Commission. She pointed out that there are some key risks that must be mitigated in order to achieve 'fully met' at the end of the year. She said that there are three areas of concern, inpatient waits above 26 weeks, outpatients waits above 13 weeks and delivery of 18 weeks target.

HL said that she wished to acknowledge the huge amount of work done by the Director of Operations on delivery of 18 week target.

3 ITEMS FOR DECISION/APPROVAL

3.2 Private Patient Strategy Update **LB/AP**

RK left at this point.

3.3 Risk Awareness/Health and Safety Board Training **CM/AP**

CM introduced the session by reminding the Board of the requirement for regular risk awareness training (NHS Litigation Authority standards) and the key areas that were covered in the training a year ago which are also outlined in the paper. It had been agreed that we would focus on health and safety.

KR presented a number of cases from other Trusts and the lessons we might take from them.

HC outlined Board responsibilities relating to Health and Safety. She noted that work would be undertaken to assess the Trust against the IOD/HSE checklist. This would be reported through the usual Trust reporting structures to the Assurance Committee which would oversee the position on behalf of the Board.

CE noted that he had had experience of receiving regular safety reports at Board level. CM said that the Assurance Committee receives an annual risk management report which outlines the structures, systems and processes and actions taken to mitigate risk and ensure learning. This was also reported to the Board. She suggested that as it was a comprehensive report that some issues could be made clearer. AP suggested that the annual report from the Assurance Committee to the Board might be another mechanism of highlighting relevant issues.

KN asked how risks were identified. HC said that the responsibility is with individual wards and departments to identify risks and do assessments.

CE thanked HC and KR on their joint presentation and stressed the importance for the Board to be aware of health and safety issues and perhaps the issue should be raised more. It was confirmed that health and safety is part of induction.

Regarding the Health and Safety policy, KN said it reads like a document for managerial staff and not front line workers. She pointed out that the paper does not mention who staff should talk to if they notice anything.

HL said that matrons and ward sisters and department heads are not mentioned but have an important role. Procurement should also be included e.g. ensuring that what we buy is the safest product. CE suggested that if any product or equipment does not comply with health and safety should not be purchased.

AH asked about transferring risk of agency staff to providers. HC felt that the agency agreements were as robust as they could be as there are clear standards re accreditation.

3.4 Safeguarding Children Declaration

AMC

AMC presented the paper which outlined Monitor's requirements for a declaration and the Trust's position. The Board were asked to confirm assurance.

Level 1 training was discussed. AMC said that 'eligible' was Monitor's word and there had been subsequent guidance from NHS London which had suggested a target of 80% of staff. AMC said that the figure of 65% in his paper relates to induction training since 2006. In addition to induction a leaflet has been sent to each member of staff and there is a requirement to return a signed slip to say it has been read.

AMC To confirm 'eligible' staff and the Trust's position

AMC

	CG asked if all agency and bank staff would sign the leaflet. AP said that bank staff will receive the leaflet to sign but not agency staff. She said that all agencies are under a PASA agreement but she will clarify exactly what is included.	AP
	AH suggested that a way to protect the Trust could be by refusing to pay agency staff before they had the training.	
	HL asked about the staff in specialist areas e.g. those working in paediatrics. AMC confirmed that there is training for those staff.	
	CE asked for confirmation that staff working with children undertake appropriate training.	AMC
	HL asked for confirmation that the named doctor had a job plan in place.	AMC
	LB asked about the outcome of the internal audits undertaken on CRB checks.	AMC
	HL was concerned about the deadline of 2 working days. CM said that the deadline of 30 November is self imposed and not set up by Monitor. The Board could ask Monitor to extend the deadline. This was agreed. AMC to ask Monitor to extend the deadline.	AMC
	CE summarised the issues which were definition of eligible, and ensuring appropriate training for all staff including agency staff. AMC to report back to Board at its meeting on 17 December 2009.	AMC
3.7	Standards for Better Health – submission to Care Quality Commission	CW
	CM apologised to the Board for the missing pages on the SfBH assurance paper. A full set was available and she confirmed that CW had been through the Board paper in some detail and his queries and amendments had been addressed. She circulated a list of the amendments. She reported that the Assurance Committee recommended a declaration of compliance but the report from internal audit had not been available to them. She reported that she had received confirmation that internal audit had reviewed the evidence in six standards and that this supported the declaration on those standards. This review acted as a proxy for all the standards. Internal audit had, however, highlighted that some procedures were out of date and these will be updated.	
	CE said that the Board needed to be guided by the Assurance Committee and he was happy to confirm the declaration of compliance.	
	LB raised the data security incident that had been reported to the Information Commissioner (IC) and asked the Board's view on whether this affected our compliance.	

HL expressed her view that the laptop stolen from the hospital, while not encrypted, did not contain any data and therefore was more of a serious near miss.

CG said that the Board had been assured that all the laptops were encrypted and queried how it happened that one which was stolen was not.

CM noted that the CQC may become aware of the report to the IC and that a record of our investigation and decision would be important to explain our position should the CQC request clarification.

HL suggested that the Trust need to ensure that Monitor is fully aware that there was no data on the laptop which was stolen.
To inform Monitor.

CM

CE confirmed that the Board supported a declaration of compliance with Standards for Better Health.

3.8 Proposed amendments to Standing Orders regarding the seal **CM**

The Trust Board approved the proposed amendment to Standing Orders.

3.9 Ratification of viral load contract **LB**

The Trust Board approved the contract.

4 ITEMS FOR INFORMATION

4.1 Assurance Committee Minutes – 2 November 2009 **CW**

This item was taken as read.

4.2 Audit Committee minutes – 22 October 2009 **AH**

This item was taken as read.

4.3 Finance and Investment Committee minutes – 20 October 2009 **CE**

This item was taken as read.

5 ANY OTHER BUSINESS

None.

6 DATE OF THE NEXT MEETING – Thursday, 17 December 2009.

NB: These minutes are extracts from the full minutes and do not represent the full text of the minutes of the meeting. For information on the criteria for exclusion of information please contact the Foundation Trust Secretary.

Signed by

A handwritten signature in blue ink, appearing to read "Christopher Edwards". The signature is fluid and cursive, with a prominent initial 'C'.

Prof. Sir Christopher Edwards
Chairman