

Board of Directors Meeting, 3 April 2008 Extract of Approved Minutes

Present:

Non-Executive Directors:	Chris Edwards (CE) (Chairman) Charles Wilson (CW) Colin Glass (CG) Richard Kitney (RG) Andrew Havery (AH)
Executive Directors:	Heather Lawrence (HL), Chief Executive Mariella Dexter (MD), Interim Director of Service Integration and Modernisation Lorraine Bewes (LB), Director of Finance and Information Andrew MacCallum (AMC), Director of Nursing
In Attendance:	Catherine Mooney (CM), Director of Governance and Corporate Affairs Julie Cooper (JC), Foundation Trust Secretary/Head of Corporate Governance Maxine Foster (MF), Director of HR for item 3.1

1. GENERAL BUSINESS

1.1 Apologies for Absence

Apologies were received from Mike Anderson and Karin Norman.

1.2 Declarations of Interest

No declarations were recorded.

1.3 Minutes of Previous Meeting held on 28 February 2008

The minutes were agreed as an accurate record of the meeting.

1.4 Matters Arising

Chief Executive's Report (1.4/Feb/08)

CE said that the date of 29 May has been proposed for the Board Away Day. Although LB will not be present it was agreed that as everyone else could attend, that we should proceed with this date. Topics are likely to include future strategy and communication between the Board and the operational side of the Trust.

LB highlighted two key deadlines. The first is 31 May which is for the sign off of the annual plan and the second is 16 June which is for the sign off of the audited accounts. The audit committee meets on 10 June so a special Board will need to be held between 11 and 13 June to adopt the accounts.

THE BOARD AGREED TO HOLD THE AWAY DAY ON THE 29TH MAY AND A SPECIAL BOARD BETWEEN THE 11TH AND 13TH JUNE.

Progress on Draft Annual Plan (3.1/Feb/08)

CM said that this paper on self-certification would be done once Monitor publishes its guidance, following the consultation.

Register of Seals (3.3/Feb/08)

The Trust seal will be applied to the Cavaye Place lease once it is returned from the solicitors.

Information Security (3.7/Feb/08)

LB said that the practice of taking copies of maternity notes had taken place in certain instances, but has now been stopped unless requested by the patient.

Monitor Consultation on Amendments to the Compliance Framework (3.11/Jan/08)

The CGAC did not meet to approve the response but members had been asked to comment and the final response had been agreed with LB and CM.

Healthcare for London (4.3/Feb/08)

A response to the consultation was sent from HL.

1.6 Members' Council Report

CG said that he has been involved in discussing membership and noted that we need to increase the membership numbers as well as opportunities for genuine input. JC reported on work with the Membership Development and Communications Sub Group to discuss how the Members' Council funding might be used to improve membership materials and promote membership and engagement. Proposals included that the week leading up to the Trust Open Day was to be 'Membership Week' and face to face recruiters would be employed both within and outside the hospital. New membership leaflets would be developed, and an area within the hospital would be designated a 'Membership Information Area' where there would be a plasma screen capturing membership activity as well as a professional leaflet display for all key materials. There would also be an electronic information board for up to date meeting and clinic information to be displayed. CM added that we would also be running a complete internet diagnostic of the website to advise us of the most effective changes to make to maximise communication and marketing. CG suggested that we should also assess disability access. Approval from the Members Council was awaited for these proposals. AMC discussed the possibility of re-branding PALS as MPALS to indicate membership support. CG asked whether GPs should be a constituency of the membership. HL said that we must get better at communicating with GPs. HL noted that the move to a staff opt-out approach will serve to increase total membership but Ministers are particularly concerned with public and patient membership categories.

1.7 Chief Executive's Report

HL presented her report. In addition, she said that the specification for paediatric services will be available in June and there will be two months to respond. Tribal has provided a paper on the best model for paediatrics and a proposed way forward.

The expansion to NHS Choices means that patients can be referred anywhere, rather than just choose from five providers.

She noted that the performance report will demonstrate that we have delivered 18 weeks and she thanked Mariella Dexter. However, we have yet to confirm the level of data completeness which is the determination of whether we are credited with the achievement.

2. PERFORMANCE

***2.1 Finance Report Month 11**

This paper was taken as read. CE said that the financial situation is very good news. CW noted the tremendous progress on savings.

***2.3 Performance Report Month 11**

This paper was taken as read and no items were raised for discussion.

2.4 18 Weeks

CE congratulated MD on achievement of the 18 week target. MD noted that it had been a huge team effort. Data completeness was still uncertain. It was noted that the Trust is well ahead on the outpatient target due to GUM being included, but there are still breaches predicted for April and May. HL said special thanks were due to those who worked so hard to control the C.Difficile outbreak, which could have affected the achievement of the target.

The Board thanked all those involved and agreed they would consider how to convey their thanks and celebrate success. CG asked if in the business plan we might set lower targets. HL said that as a Trust we want to continue to drive the referral to treat time down further but this needs to be considered in light of capacity issues.

3. ITEMS FOR DISCUSSION/APPROVAL

3.1 Staff Survey

MF noted that the results from this year's survey are better than last year although there are still areas for improvement. The highlights are that the Trust is in the top 20% for 10 indicators and scored above average for six indicators. We are still scoring in the bottom 8% for some key indicators. The action plan agreed last year was implemented with a strong directorate led approach. She outlined the structure of Appendix 2. Green indicates top 20% of acute trusts. Amber is average and red is below average. MF noted that we are moving in the right direction, but violence, harassment and bullying are still reported as higher than average. The Board noted that there are most likely varying degrees of bullying and concepts of physical violence. The Board asked what the awareness of this was. MF reported that HR got involved in two incidents last year. CW said the report was a great improvement from last year e.g. staff said they feel more valued. It was noted that the £100 pay out may have affected this scoring and the emphasis on appraisals. The Board felt that appraisals should improve further. CW asked if when we communicate the results we can ensure staff it is confidential. MF noted the poor response from management and consultants. CW asked if we might have a dialogue with medical staff to understand better why they did not respond. There was some uncertainty about what the percentage response meant. LB noted a discrepancy in that the score was poor in working extra hours but there was a good score for work life balance. HL said that this may be pertaining to certain areas such as theatres. MF said that we had a comprehensive action plan last year and that this year we might streamline and shorten to focus our efforts.

Action: Clarify response rates from management and consultants and investigate apparently low response rate.

3.2 Annual Budget

LB presented the paper on the annual revenue budget. LB summarised the assumptions as highlighted in the paper and stated that the capacity plan had now been finalised with Kensington and Chelsea PCT. The breakdown of the 2008/09 tariff uplift was highlighted, and it was noted that the budget increased by 4.7% but then 3% is taken off for efficiency. Some rebasing is needed in Medicine to take into

account activity. The key decision is that we plan to be Monitor rating of level 5 which means delivering a surplus of £8m on the initial planned income for 2008/09. A corporate efficiency target of 4.4% will be required to achieve this. The first round of meetings with the directorates has been completed and progress is being made.

LB explained the detail in table 3 regarding high level resources and expenditure assumptions. Monitor requires a three-year plan which will determine our risk rating and therefore how much we can borrow. This will be presented in draft to the next Board.

HL gave an example of zero-based budgeting and the effort to link cost pressure with capital planning. CG asked if software development was considered capital or revenue. LB confirmed that the costs of software developers are included in capital budget.

It was noted that the introduction of IFRS has been delayed. The biggest capital expenditure will be paediatrics and a large sum will be needed for this potential work.

The Board was asked to approve the initial budgets as set out in appendix 1.

THE BOARD APPROVED THE INITIAL BUDGETS AND TO SET THE CORPORATE EFFICIENCY TARGET AT 4.4%.

3.4 Board Away Day

CE said the day is confirmed for May 29th and the venue has been booked. HL to suggest some key people that may be invited to different parts of the day. CG and RK were not supportive of having a facilitator but were keen to have external contributors.

3.6 Point System for Overseas Workers

MD said this paper was being brought to the board to note the changes in legislation and to approve having the Human Resources Director responsible for the license to sponsor and employ foreign workers. This was agreed.

3.7 Maternity Action Plan

MD presented the action plan. She noted that it had not been approved by the maternity task group yet but it need to be submitted to Monitor. LB asked if we are now accepting the benchmark for a midwife ratio of 28:1. She suggested that the aim is to review staffing levels in light of this guidance without committing to anything specific. HL said that these improvements must be considered in relation to the budget. The issue of making all rooms ensuite was raised and it was suggested these be included as a consideration and possible long term goal. The issue of ropes in rooms needs to be clarified as this might be a hazard. It was agreed that if we want to provide choice for women we need to first understand what it is they want. It was agreed to change the word 'developing' to 'exploring'.

Action: Update action plan to reflect the comments of the Board.

3.8 Engagement Strategy

This item was not discussed.

***3.9 Healthcare Commission**

CM said the paper was tabled as the Audit Committee met just the previous week.

The committee looked at compliance and progression from last year. In most areas we have made significant improvement. Decontamination was one low risk area which has not seen much change. Since the Audit Committee she had sought clarification on the risk of failing to comply totally with CJD requirements. The Director of Infection Control had advised her that the risk was low. Nevertheless this does need to be addressed this year. Subject to an update on CJD the Audit Committee recommended that the Trust could declare compliance with the core standards. The Board was asked to confirm the declaration of compliant against each of the core standards and the statement regarding the hygiene code. The Board agreed.

CE asked about the general workings of the Audit Committee and how it reports back into the Board. AH said that the minutes from each meeting come to the Board and any significant issues are highlighted. Actions against internal audit recommendations are monitored and that there were no reds (significant failure to address actions) in the last two meetings. AH reported that he is happy with internal audit although there had been some delays in work due to resource issues. Counter Fraud remains a difficult area and action is slow.

THE BOARD APPROVED THE STATEMENT OF COMPLIANCE TO THE STANDARDS FOR BETTER HEALTH TO THE HEALTHCARE COMMISSION.

5. ANY OTHER BUSINESS

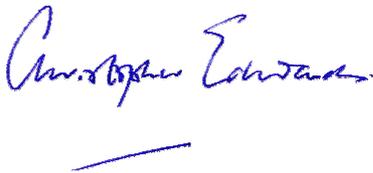
There was no other business.

6. DATE OF THE NEXT MEETING

29 April 2008

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', with a horizontal line underneath.

**Prof. Sir Christopher Edwards
Chairman**