



## TRUST BOARD

### Minutes of a meeting held at Devon House, Heartlands Hospital on 3 May 2011

**PRESENT:** Lord P Hunt (Chairman)  
Dr A Anwar  
Ms M Coalter  
Mrs A East  
Ms N Hafeez  
Mr R Harris  
Mr P Hensel  
Dr M Newbold  
Mr A Stokes  
Mr R Samuda  
Ms M Sunderland  
Dr S Woolley

**IN ATTENDANCE:** Ms L Dunn  
Mr S Hackwell  
Mr A Laverick  
Ms C Molloy  
Mr J Sellars  
  
Mrs A Hudson (Minutes)

#### 11.69 APOLOGIES

Apologies were received from Mr Bucknall and Mr Pye

#### 11.70 DECLARATIONS OF INTEREST

The schedule of declarations of interest was noted.

#### 11.71 MINUTES OF PREVIOUS MEETINGS

##### 11.71.1 30 MARCH 2011.

The minutes for the meeting were approved by the meeting and signed by the Chairman.

##### 11.71.2 5 APRIL 2011.

The following amendments were noted:

Mr Harris to be added to the attendees.

11.66 Item 4b Chairman's Report: Governance Review. The first sentence should read "..... a proposal to hold an offsite Trust Board Away Day to review Governance and set the strategic direction for the Trust for 2011/12 including improving working relationships with the Governors Consultative Council.....".

11.68 Item 19 should read “.... the scheme had not proved as successful as planned in engaging consultants with job plans”.

Subject to the above amendments the minutes for the meeting were agreed and signed by the Chairman.

## **11.72 CHAIRMAN'S REPORT**

The Chairman welcomed Claire Molloy, Executive Lead for Solihull to the Trust Board meeting and looked forward to receiving progress reports on the integration following the transfer of community health and adult social care services from Solihull Care Trust to HEFT on the 1 April 2011.

The Chairman congratulated Richard Harris on completing the London Marathon in an incredible time of 3 hours, 56 minutes and 48 seconds.

The Chairman went on to summarise his written report drawing the Board's attention to the recent opening of Theatre 6. The refurbishment of the theatre suite will ensure that patient safety and the quality of patient outcomes will improve and the work undertaken by everyone involved in the refurbishment was noted. A very successful Governors' induction meeting had been held and this had been followed up with a celebration event where the outgoing Chair and Governors had the opportunity to meet in a social setting and the Trust took to the opportunity to formally thank them for their contribution during their terms of office. The Chairman has been asked by Monitor to speak at a safety and quality conference in June.

The Chairman advised the Board that following his appointment as Chair it was no longer appropriate for him to be a member of Audit Committee and as such resigned with immediate effect. Mr Samuda, Chair of the Audit Committee, agreed to pass on Lord Hunt's resignation to the meeting which was to immediately follow today's Trust Board meeting.

## **11.73 STRATEGY AND PLANNING**

### **11.73.1 CHIEF EXECUTIVE FORWARD LOOK**

Mr Newbold summarised his written report. The Trust Management Realignment implementation came into effect in April. The new management structure creates a clinically led, management supported approach in which all specialities are clinically led and nursing care quality has a strong and independent voice. There remains some details to be clarified between hospital and group responsibilities but this is being worked through by the Group Medical Directors. Interviews for the Managing Director post at Good Hope are due to be held mid May. Site performance will be monitored through the monthly Performance Committee meetings chaired by Mr Stokes.

A&E 4 hour 95% performance over the holiday weekend periods was well managed and was a credit to teams in their discharge planning. Demand has been high over both of the holiday weekends but admissions and discharges have been managed well. The Trust Board asked that their thanks were conveyed to staff members. Dr Newbold advised that he had met with United Birmingham Commissioning which is made up of 30% of our GP catchment area. A clinical interface is to be set up to look at new ways of commissioning care; this is a welcomed approach and Dr Anwar will be the Trust lead.

### **11.73.2 CORPORATE PRIORITIES 2011/12**

Mr Hackwell summarised his written report setting out the key service priorities for 2011/12. The document has been prepared in the context of the strategic goals and priorities that were agreed by the Trust Board earlier in the year. The five operational groups and corporate departments have been asked to identify their key priorities for 2011/12 in the light of the Trust's revised mission and strategic goals. It is important that delivery of the corporate priorities is managed as a formal programme and early identification is made of any capacity and capability issues that could impede delivery. The key priorities in conjunction with key financial, workforce and performance targets will form the annual business plan that will be presented to the June meeting of the Trust Board. There were minor amendments to the language used in the report requested and a need for the plan to be more specific in its required output. An updated report is to be presented to the next meeting.

The annual business plan is to be presented to the Governors Consultative Council in May for input and comment and following this will be presented to the June meeting of the Trust Board. Progress against delivery will be reported quarterly to the Board.

### **11.73.3 ANNUAL PLAN 2011/12**

Mr Stokes presented the annual plan. The annual plan must be submitted to Monitor at the end of May following consideration by the Governors. The detailed plans are being worked through and the highlights were presented to the Trust Board in advance of the Governors meeting at the end of May 2011. The net surplus remains at £11m per year in line with the 2010/11 outturn performance and recurrent budget position for 2011/12. Capital expenditure over the period is £109million and the end cash position is forecast at £5million. It was agreed that a committee comprising the Chairman, the Chief Executive, the Finance Director and such Non Executive Directors who are available shall meet on 26 May 2011 in order to finalise and approve the Monitor Annual Plan 2011/12 for submission to Monitor.

## **11.74 QUALITY AND PERFORMANCE MONITORING**

### **11.74.1 EFFICIENCY CHALLENGE**

Dr Anwar tabled a report and gave a presentation on CIP and Safety. Clinicians are engaged in generating potential CIPs whilst ensuring safety and quality are not compromised. The key is to ensure processes are in place to drive CIPs and the Trust has a number of mechanisms in place to monitor ongoing service delivery and safety. The Board received assurance that the efficiency challenge has been clinically led from the start with separate oversight by the head nurses also giving assurance and challenge required to ensure that safety and quality are not compromised.

### **11.74.2 INFECTION UPDATE ON NOROVIRUS**

Ms Sunderland gave a verbal update on norovirus infections. March has been a difficult month with a major outbreak at Good Hope Hospital. Good Hope Hospital declared the major outbreak in line with national guidance and visiting was restricted for one week. In total 207 bed days were lost in March. The Chairman and Trust Board expressed their thanks to all staff for management of a very difficult situation.

### **11.74.3 QUARTERLY INFECTION CONTROL REPORT**

As Dr Itisha Gupta, Director of Infection Prevention and Control was not in attendance at the meeting the report was deferred to next month.

### **11.74.4 NURSING INDICATOR REPORT**

Ms Sunderland summarised the Nursing Indicator report. The report consists of nine nursing care indicators and fifteen patient feedback questions which are evidence based and follow advice from bodies such as the NPSA, RCN and NICE. Unannounced audits take place on every ward including scrutinising the records of ten patients. A 'back to the floor' model and real time data collection and reporting is used. Data is triangulated with existing information to ensure that there is an accurate picture of processes in place. The metrics demonstrate nursing standards of screening, assessment and planning of core nursing activities. The overall score for the 12 months to 31 March 2011 was 93%; there was a slight drop in standards in December 2010 and January 2011 due to the opening of temporary wards. The Trust has received national recognition of its work with Nursing Metrics and has won two national awards. The Trust Board recognised and congratulated the nursing team on the work undertaken and the improvements seen in nursing care.

### **11.74.5 MONTHLY FINANCE REPORT**

Mr Stokes presented a summary of the monthly finance report. The I&E year end position was £11.8 million surplus prior to the impact of the year end PCT negotiations and impairments. There was a PCT contracts reduction of £15.1m, impairment and accelerated depreciation was £11.3m and CIP actual delivery was £13.3m which equated to 80%. Pay costs remain high particularly in relation to medical pay. Extra costs were also incurred for flexed capacity, additional measures for flow and the need to utilise private sector services. CQUINs and new to follow up ratios require early attention in 2011/12. The above has no impact on our Monitor return.

### **11.74.6 PERFORMANCE MANAGEMENT UPDATE**

Mr Stokes presented the 2011/12 Monitor Compliance Framework – performance indicators and escalation process and the new A&E performance indicators. Mr Stokes reported that the indicators, apart from A&E and 18 weeks have not changed significantly from last year and plans detailed in the consultation document to implement indicators for community provider services have been put on hold further to an additional consultation process this year. Mr Stokes advised that there is new referral to treatment waiting time (18 weeks) guidelines and failure to achieve the target in any one month will mean that the whole quarter will fail. Monitor expects trusts to report in month failures in real time rather than wait until the end of the quarter.

Monitor will be monitoring the Trust against five out of eight of the new indicators and in Q1 against only one (total time in A&E 95%). Monitor has also confirmed that they will monitor the Trust by the overall Trustwide performance, unlike the Department of Health who want the Trust to report by hospital site.

### **11.74.7 FRAMEWORK AGREEMENT FOR NEGATIVE WOUND PRESSURE THERAPY PUMPS AND CONSUMABLES**

Mr Stokes presented the above report setting out the recommendation to award a

framework agreement for negative wound pressure therapy pumps with the option for a capital purchase or rental along with associated consumables for a period of two years. The Trust currently uses a single supplier of negative wound pressure therapy pumps on a rental basis equating to £141,157.00 per annum. The aim of the agreement is to allow the Trust to engage with tissue viability nurses to shift demand to lower cost new entrants, reduce rental costs and reduce overall consumable costs. The exercise was carried out as part of a West Midlands Procurement Alliance tender. The Trust Board agreed to the recommendation.

#### **11.74.8 FINANCE COMMITTEE MINUTES**

Mr Stokes presented the Finance Committee minutes for the meeting held on 28 March 2011. No comments were received.

#### **11.74.9 IPROC REQUISITIONS APPROVALS**

The following Iproc requisitions were presented for approval:

- Purchase requisition 617296 - Surgical and General linen laundry contract with Synergy Health covering the period 01.03.11 to 31.08.11 to the value of £251,000.00 plus VAT.
- Purchase requisition 617768 - legal fees to Beachcroft Solicitors for estimated annual costs for the financial year 2011/12 for £500,000.00
- Purchase requisition 617965 - annual payment to NHSLA for 2011/12 of £13,000,000.00
- Purchase requisition 620352 - provision of GP Courier Service for Heartlands Hospital and Good Hope Hospital for the 2011/12 for £211,500.00 +VAT.
- Purchase requisition 621903 – to cover pending invoice from Recall for storage and retrieval of documents for £740,000.00.
- Purchase requisition 622672 for Cardiology Forify VR System CD1233-40 for £214,500.00 + VAT

All the above requisition were approved.

It was agreed to review the approval of iproc requisition by the Trust Board as part of the Governance Review being undertaken.

### **11.75 TRUST NEWS AND EXTERAL ENVIRONMENT UPDATE**

#### **11.75.1 UPDATE**

Ms Dunn gave a verbal update. The Trust is working with five community led groups and has given support at three local events and is continuing to work in engaging the community and Ms Dunn will bring back a report on progress to a future meeting.

#### **11.75.2 BI MONTHLY PATIENT EXPERIENCE**

Ms Dunn presented the patient experience report for March 2011. There has been a huge amount of work done around improving the patient experience and improvements are being seen. The Trust is working to improve NHS Choice recommender index results including working with colleagues at Warwick to look at their systems in order to improve our patient recommendation success. Several other initiatives are in place to promote the NHS Choice recommender index including working with our membership and asking

for permission to update the site when we receive positive comments and compliments for patients and carers.

## **11.76 GOVERNING BODY & MEMBERSHIP**

### **11.76.1 GOVERNORS INDUCTION UPDATE**

Ms Dunn reported that the new Governor induction meeting had been held on the 7 April with several of the existing Governors being in attendance to give their views on the role of the Governor.

A Governors workshop is being held to discuss the Chair and NED reappointment process and an update will be brought back to a future meeting.

Membership – A seminar is arranged for next month on Cancer.

## **11.77 MATTERS FOR INFORMATION**

Dr Newbold presented the Executive Management Board Minutes, these were taken as read and no comments were received.

## **11.78 DATES OF FUTURE MEETINGS**

- Thursday 26 May to approve the Monitor Annual Business Plan, the Boardroom, Devon House, Birmingham Heartlands Hospital
- Wednesday 1 June to approve the Trust Annual Accounts, the Boardroom, Devon House, Birmingham Heartlands Hospital
- Tuesday 7 June – Trust Board, Room 3, Education Centre, Good Hope Hospital

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**Chairman**