



TRUST BOARD

Minutes of a meeting held at Devon House, Heartlands Hospital at 1.00pm on Tuesday 2 March 2010

PRESENT:

Mr C Wilkinson (<i>Chairman</i>)	
Mr D Bucknall	Prof C Ham
Ms M Coalter	Ms E Ryabov
Mr I Cunliffe	Mr R Samuda
Mr P Hensel	Mr A Stokes
Ms A East (up to item 12)	Ms M Sunderland
Mr M Goldman	Dr S Woolley
Mr R Harris	

IN ATTENDANCE: Mrs C Lea
Dr S Smith (item 8 only)

Action

- 10.33 1. APOLOGIES**
Apologies were received from Ms B Fenton and Ms N Hafeez
- 10.34 2. DECLARATIONS OF INTEREST**
The declarations of interest were accepted by the Board.
- 10.35 3. MINUTES**
The minutes of 25 January and 2 February 2010 were accepted as a correct record and signed by the Chairman.
- 10.36 4. MATTERS ARISING**
Ms Lea confirmed that KPIs for the inpatient survey had now been agreed and would be considered by the next Governance and Risk Committee.
- 10.37 5. CHAIRMAN'S REPORT**
Mr Wilkinson informed the meeting that he had received Mr Goldman's written notice confirming he would be leaving the Trust. His notice period was six months and the Appointments Committee had met prior to the Board meeting to agree the process going forward. Saxton Bampfylde would be appointed as recruitment advisers to assist with the appointment of a new CEO.

Wider health economy

Meetings between the Trust and SHA had been attended by Chairman and Mr Goldman to discuss the significant changes that were required across the health

economy in the light of the impending financial climate. Further work had been agreed for working together for health with an increased pace of change. There would be an implementation board and governance structure to help advance the health economy working together. The agreements that had been reached would be brought back to the Board for agreement. The potential plans being considered would have a significant impact and the Trust had to be prepared in advance. Mr Stokes confirmed that the numbers presented by SHA were consistent with previous financial reports going back to last September. The SHA had praised the health economy for working closely together on the financial assumptions underlying the strategies.

MG

STRATEGY AND PLANNING

10.38 6. FORWARD LOOK

Update on Solihull Maternity Services

The plan to move the services was running to schedule. Mr Goldman updated the Board on subsequent discussions with the OSC. This included a meeting of the OSC with the Neonate Network and the Trust had shared the legal position on which it had been advised. Monitor has been kept advised throughout the process. Mr Goldman had also been to see Andrew Lansley MP to advise on whether there was a financial benefit to the Trust and he had been able to advise that there had been a cost to the Trust and that the key driver was patient safety.

Prof Ham challenged whether there were other services that had safety issues Mr Goldman confirmed that the important factor was that whenever the Board became aware of a safety issue then it had to take immediate action to mitigate the risks, for example, the latest paediatric review. The business of the Trust would always give rise to safety issues but the Trust was proactive in seeking out the safety issues. The Trust was continuing to work on becoming an open and transparent organisation with regard to these issues.

Mr Harris asked whether the Trust should have an ongoing programme of external reviews for each clinical area. Mr Goldman confirmed that some areas had regular external or peer review; those areas that didn't could be required to have such reviews. Ms East confirmed that work was ongoing in developing a co-ordinated role for clinical audit. Mr Goldman confirmed that the current maternity provision at Solihull would not be closed down until the capacity had been created at Heartlands.

PERFORMANCE

10.39 7. Performance Balanced Scorecard- National and Local Targets (MG)

Ms Ryabov highlighted the smoking in pregnancy local target which was currently red rated for year to date status.

Two week cancer wait performance had significantly improved in Q3. Current performance suggested that the Trust was on track to achieve the target by the year end.

Participation in heart disease audit – assurance had now been received that data completeness for all key fields will be completed prior to the CQC assessment at the year end.

Delayed transfers of care – performance year to date was red rated.

Mr Goldman then advised the Board about a triggered risk summit meeting taking place on Friday 5th March with the CQC. The papers relating to this meeting were tabled for the Board to take away and consider. If the meeting did not go well then the Trust could face a full scale CQC inspection. It was not clear how this played into the registration process. There had also been a recent report from the Birmingham LINKs on the unannounced inspection visits which was being followed up with a face to face meeting with the LINKs team. This had previously been circulated to the Board.

10.40 8. A&E 98%, 4 hour access target monthly update

Dr Smith attended for this item. February was showing a continued improvement but the organisation was just below the 97% year-end target set for the Trust. Implementing 7 day working at Heartlands had been a major factor in the improvement but this had not yet been fully implemented at Good Hope. Dr Smith explained the consultation that was now taking place to make the necessary changes at Good Hope. Mr Goldman suggested that consideration should be given to moving any clinicians reluctant to take on 7 day working across to other sites. Mr Wilkinson asked if there were any nursing issues that were impacting on the 97% target. Ms Sunderland confirmed that this was being monitored on a daily basis. Mr Wilkinson reiterated that wards should be monitored on a daily basis to ensure that 40% of discharges were achieved before 1pm. Following the consultation meeting Dr Smith was asked to highlight those individuals who were unwilling to change and to offer additional PAs for Heartlands or Solihull clinicians to travel across to Good Hope. The Board agreed to support Dr Smith with the resources that he needed to ensure that the 97% target was achieved.

SS

The action plan across all five work streams has now been finalised and will be taken to the Executive Directors Committee in March. The Trust was awaiting feedback from George Alberti's visit.

Mr Goldman highlighted his letter to Monitor in which he set out a draft agreement with Monitor whereby they might lift the red risk rating earlier than scheduled if the Board could demonstrate sustained improved performance. The Board agreed to support Mr Goldman in this line of approach with the necessary evidence to support this. Mr Samuda and Mr Harris had been asked to be the NED leads and the Trust needed to demonstrate it was making progress in the area. Mrs Lea was asked to carry out an analysis of similar decisions that Monitor had taken in this area and what the ground rules were for the lifting of red rating.

CL

BUSINESS PLAN 09/10 PRIORITIES
We Provide The Highest Quality Patient Care

10.41 9. Safety Situation Report

The report which had been circulated was the first draft of the safety metrics which had been considered by the Governance and Risk Committee. Areas showing as concerns demonstrated the value of the metrics in identifying trends. However, Dr Woolley was able to confirm that those areas shown as concerns at the end of Q3 were no longer concerns. The remaining issues of concerns related to the outstanding coroner's cases. The SUIs were still under investigation and in future Dr Woolley would bring the close down reports from the investigations.

SW

A final set of safety metrics would be available to the Board by the end of Q4. The nursing metrics would also be aligned with the data being collected by the Ward Nursing metrics.

10.42 10. Q3 Assurance Framework and Risk Register

The strategic risks had been reviewed at the last Governance and Risk Committee. The risk S3 relating to patient flow and capacity had been increased from 16 to 25 based on Monitor's decision and S10 Current Clinical Service Business Development had increased from 12 to 16. S12 relating to site strategy and S18 Responsiveness of Services had been decreased from 15 to 12. S11 Financial strategy had been decreased from 16 to 12. Risk S10 would be reworded to ensure it reflected the development of a clinical service strategy.

Mr Hensel asked whether the business continuity risk should be considered as a risk for the strategic risk register. Dr Woolley would take this into account for the review of the risk register.

10.43 11. Update on externally validated Nursing School

Ms Sunderland had met with the SHA to progress the initiative as a pilot which was externally validated. Conversations had then taken place with education providers for the external validation. Two providers were interested in taking this forward but unfortunately neither of these was Birmingham City University. This had created a complication as it would require a movement of funding away from BCU. Ms Sunderland will revisit the discussions with the SHA and update the Board in three months time.

We are the Local Employer of Choice

10.44 12. Local Staff Survey Report

Ms East left the meeting at this point.

Ms Coalter presented the findings of the Staff Survey which indicated that there had been a dip in employee engagement when compared to the results from 2008. She set out that the Executive Team would be agreeing an action plan following on from the staff feedback which would highlight the three key areas that the Trust would be focusing on.

The Board was disappointed to see that engagement had deteriorated since last

year and requested that the action plans be brought back to the Board in due course. Mr Harris highlighted the correlation between staff satisfaction and patient satisfaction and requested that the Board consider these issues on the board agenda on a regular basis. Mr Goldman questioned whether good performance led to happy staff and patients or the other way round. His view was that the deteriorating performance and group restructure led to the dip in the staff engagement and so by focusing on achieving good performance staff engagement would improve. It was important to get the balance right. Mr Samuda added that it was important that staff behavior that contributed to good performance was rewarded and behavior that didn't should be performance managed. Mr Bucknall thought that refocusing attention on the Trust's values and objectives would be beneficial. Ms Coalter highlighted the importance of the appraisal system in communicating the values and objectives.

10.45 13. HR Committee Minutes

Ms Coalter presented the draft minutes and highlighted the workforce planning update which would have to take into account the limited pool of potential candidates in some areas. The gateway policy and pay progression had been agreed and this would be linked with the roll out of an organisational timetable for appraisal. There is no longer an automatic progression for incremental pay awards, they have to be signed off by their respective manager.

We Are Financially Secure

10.46 14. Monthly Finance Report

Mr Stokes presented his previously circulated paper, highlighting the following points:

- Income and expenditure surplus in January of £0.5m, £6.6m year to date.
- Further over performance of £0.9m in January.
- In month result requires improved performance in remaining months to achieve £10m surplus for 2009/10 (excluding any impairment charges or use of private sector).
- Monitor risk rating remains at 4 at month 10.
- Tariff delayed until the end of February.
- Monitor Compliance framework implication paper attached.
- Impact of tariff.

In conclusion January had been a very challenging month.

Valuation indices indicated that Property valuations had decreased substantially since the last Trust valuation as at 31/3/09. To ensure IFRS compliance, the Trust was required to recognise the fall in values by performing a further valuation as at 31/3/10 which may result in an additional charge to the I&E statement net in 2009/10.

Mr Stokes then referred to the appendix on the Monitor consultation on Compliance Framework which suggested that there would be a tougher regulatory framework in future, additional Governance rating categories would be

added and additional criteria added to governance ratings. The scoring methodology would be adjusted to score repeated failures of the same target higher each quarter. In essence Monitor was looking to step in more quickly on A&E issues. There were also additional financial reporting requirements. It was expected that these changes would be implemented with effect from April 2010.

Mr Stokes tabled a paper on the 2010/11 CIP position. The paper demonstrated that there was a lot of work still to be completed to ensure that CIPs are robust and deliverable. Ms Ryabov confirmed the work being undertaken with the groups to provide support to achieve the CIPs. Prof Ham clarified that the £14m total was not over ambitious. Mr Stokes confirmed this and that the CIP total would be even more ambitious in 2011/12. The Board asked for more focus to be given to more radical service redesign and a greater focus on delivery of existing plans to drive out the level of CIP required.

Mr Stokes then tabled a paper on the changes in the 2010/11 tariff prices and the likely financial impact. The net effect of changes to MFF and CQUINs would compensate for the likely loss from tariff changes. This was dependent on the Trust successfully completing negotiations with the PCTs on local prices and other counting and charging issues. Mr Stokes confirmed that demand management plans were still to be confirmed by PCTs. The Board accepted the recommendation contained in the report to achieve the likely outcome. Mr Stokes has delegated Board Authority to negotiate outturn activity at the value contained within likely scenario. Mr Stokes also confirmed that he would report back the level of proposed demand management initiatives to the April or may Board dependant upon negotiations

GENERAL BUSINESS

10.47 16. COMPANY SECRETARY'S REPORT

The draft Minutes of the sub committees were noted. Ms Lea highlighted the request for board approval of expenditure of £340,200 + VAT on a two year contract for the provision of courier services. The Board approved this expenditure.

17. ANY OTHER BUSINESS

Mid Staffs Review

A review of the findings would be carried out by Dr Woolley and reported to the Governance and Risk Committee before a report was brought to the Board meeting.

10.48 18. DATE OF NEXT MEETING

6th April 2010

..... **Chairman**