



**TRUST BOARD COMMITTEE**  
**Minutes of a meeting held at Devon House, Heartlands Hospital**  
**on 31<sup>st</sup> October 2008 at 11.00 a.m.**

**PRESENT:** Mr C Wilkinson (Chairman of meeting)  
Ms A East  
Mr A Stokes  
Ms B Fenton  
Mr J Gould

**IN ATTENDANCE:** Ms L Jennings (Minute taker)

**1 APOLOGIES**

Apologies were received from Mr M Goldman.

**2 APPOINTMENT OF BOARD COMMITTEE**

The Board at its meeting on 8 January 2008 appointed the Chairman, Deputy Chairman, the Chief Executive (or his deputy) and the Chief Finance Officer to a Board Committee to approve the Monitor Quarterly returns.

**3 APPROVAL OF MONITOR QUARTER 2 RETURN**

The Quarter 2 (30<sup>th</sup> September 2008) Monitor return had been completed in line with the Compliance Framework. The financial risk rating was 5, the highest rating possible and the Governance rating was green.

Mr Wilkinson raised the point that the Trust had been overspending against budget but Mr Stokes confirmed that this was under control and the situation would be rectified in the near future and that the Transformation Programme would assist in this.

Mr Wilkinson drew attention to Capital Spend and was concerned that the Trust appeared to be behind on actual spend, against budget. Mr Stokes said part of this was due to orders having been placed but not yet paid for. However, he was confident that this would be rectified within the financial year and that the Side Strategy, he had been working on in conjunction with Mr David Bucknall, would assist in that.

Mr Wilkinson expressed his concern that there still appeared to be unspent allocated money left over from last year. Mr Stokes confirmed that the £38m included the money due to be spent on the Side Strategy and Cath lab at Good Hope Hospital; as well as the demolition of ward 34/35 at Birmingham Heartlands Hospital, in readiness for the Outpatient build.

Mr Gould and Mr Stokes confirmed that they had met with the contractor two weeks ago to discuss the option of a modular build at Good Hope. It could potentially last for 60 years but was extremely flexible and so could be modified when the need arose. A modular build would not only be much quicker and less disruptive but had the potential to save the Trust approximately £20m, which could

**Action**

be invested in other areas.

Mr Stokes confirmed that all building options including modular were being looked at.

Mr Wilkinson said that speed was very important and that if the new Out Patients' department could be up and running sooner than scheduled, it would result in huge benefits to the hospital.

Mr Stokes listed the benefits of a modular build, which included flexibility, facilitating effective deep cleans, as well as the benefit of being much quicker and less expensive than a traditional build. On the negative side the aesthetics would not be as impressive, although much improved with the option of brick cladding available.

Mr Wilkinson asked if they could wait and see the outcome of the Good Hope hospital build and stressed the importance of easy maintenance.

Mr Gould confirmed that they would look at all options regarding flexibilities, particularly relating to deep cleans. The more flexibility built into the build, the more the initial investment but this would be recouped.

Mr Wilkinson said he would like to see one that had been up for two to three years. Mr Stokes offered to arrange a visit around one of the Wards at Walsall Hospital and confirmed that Ian Cunliffe, Kath Kelly and Hugh Raynor had been round the ward at Walsall Hospital and had been impressed.

AS

Mr Wilkinson asked if it would be possible to have single rooms and bays that could be sealed off to help with infection control, Mr Stokes confirmed that it was.

It was agreed that the external look was important too and Mr Gould confirmed that Walsall had achieved a good standard in this respect.

Mr Stokes pointed out that in relation to the eight ward build at Good Hope, the remaining seven wards could be based on the same style as the initial one. Thus would benefit from economies of scale.

With regards to the covering letter, Ms Fenton questioned whether the wording should include that the Trust was carrying out their own root cause analysis alongside the Coroner's report. However, Mr Stokes confirmed that the wording in the letter was standard wording.

BF

The Board approved the Quarter 2 return and authorised Mr Goldman to sign the Return and Declaration.

**4 DATE AND TIME OF NEXT TRUST MEETING**  
4<sup>th</sup> November 2008, 1.30pm.

..... *Chairman*