

TRUST BOARD

Minutes of a meeting held at Devon House, Heartlands Hospital

at 2.30pm on 31st July 2007

PRESENT:

Mr C Wilkinson (<i>Chairman</i>)	Mr A Okuyiga
Mrs F Baillie	Prof J Perry
Mr I Cunliffe	Dr H Rayner
Ms A East	Mr R Samuda
Mr M Goldman	Dr S Woolley
Ms N Hafeez	
Mr P Hensel	

IN ATTENDANCE:

Mrs L Dunn	Mr A Stokes
Mrs C Lea	Mrs M Pittaway
Ms A Gynane for Items 6.4 & 6.5	

1. APOLOGIES

Action

Apologies were received from Mrs B Fenton and Ms M Coalter.

2. MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 26th June 2007 were agreed apart from Item 4: Chief Executive's Report:

THIS MINUTE IS RESERVED UNDER SECTION 43 OF THE FREEDOM OF INFORMATION ACT 2000

A PRESENTATION was made to the Board by Heart of Birmingham PCT on their 2010 Project

The Chairman thanked the presenters and requested that Mr Goldman and colleagues arranged to discuss further what HEFT might be able to offer in partnership with the PCT and to present their findings to a future Board meeting.

MG

3. MATTERS ARISING

3.1 PACS

The CfH had not approved the Trust's business case; therefore the CfH PDC would go back to the centre. The NHS Finance Director had said that under the circumstances it might be possible to award this but having considered the business case this was not now possible. He would prepare and send a formal response to the Trust on this basis.

The Chairman reminded the Board that its decision at the last meeting was that the benefits of accepting a contract with external suppliers outweighed any fines that might be incurred.

The Board agreed that the Trust would wait for the formal letter before making a final decision but the Chairman asked for approval, in consultation with Mr Goldman, to go ahead with the contract. If any other issues arose out of this letter the matter would come back to the next meeting on 25th September 2007.

The Board accepted that penalties would be levied by the DoH but the Trust would negotiate with the DoH to minimise these.

4. MONITOR Q1 RETURN

Mr Goldman stated that there was one adjustment to the papers that had been circulated, namely that 44 of 44 targets had been met. Dr Woolley confirmed that although the year on year reduction in the MRSA infection rates was not meeting the trajectory target for the end of the Quarter, the rates had reduced in comparison to where they would expect to be, based on last year's data. On this basis the Trust can therefore declare it was compliant for Q1 i.e. it was a technical lapse of the organisation.

As the Trust progresses through the year it was possible that the Trust would be able to continue to reduce the MRSA infection rates still further by the end of Q2.

The Trust was therefore compliant at present on 44 out of 44 targets but would still only be at 'amber' because of not meeting the trajectory target.

Mr Stokes advised the Board that the financial risk rating was 5, which was according to plan and resulted from a surplus of £4.6m.

5. INFECTION CONTROL REPORT FOR 2006/07

Dr Savita Gossain attended in order to present the annual report to the meeting for both the Trust and Good Hope.

The Board noted that the Trust would not achieve the trajectory targets this year, but that progress would be made in reducing infection rates. The appointment of infection control practitioners was key and recruitment underway. Interviews

would be held during the first week of August 2007 and an Isolation Ward would also shortly be in place.

A study had also been undertaken on MRSA screening on admission to wards and the results of this were still awaited.

6. CHIEF EXECUTIVE'S REPORT

6.1 *Performance Monitoring*

Mr Stokes referred to Appendix 1 attached to the Chief Executive's report and advised the Board that the Trust was now compliant against all 44 targets.

The Trust was doing well against its KPI for Access, Finance and Staff. The areas for improvement included:

- Emergency readmission rates
- Reduction in MRSA bacteraemia
- Reduction in C.Diff diarrhoea
- Smoking in pregnancy

6.2 *Combined Key Risk Progress Report*

Operational Risks

The contents of serious untoward incidents report contained in Appendix 2 of the Chief Executive's Report were noted.

THIS MINUTE IS RESERVED UNDER SECTION 43 OF THE FREEDOM OF INFORMATION ACT 2000

MG/
SW

Strategic Risk Assessment

Corporate Strategy: an integrated corporate strategy had been developed and therefore the risk and impact weightings would be reduced to 9.

Infection Control: Dr Woolley reported that the progress being made would reduce the current risk score from 20 down to 16. It was agreed to introduce a second additional risk to Infection Control as follows:
HEFT would not meet the Infection Control trajectory.

SW

A question was raised as to whether the risk to the delivery of the Savings Delivery Plans had now increased. In response it was stated that after only three months it was too soon to tell if the target was under threat, but that this would be kept under review.

6.3 *HSE Prosecution update*

Mr Goldman referred the Board to his report detailing the outcome of the

prosecution and the costs involved.

6.4 *Pay Award from 1st April 2007: Consequences of Staging*

The RCN were currently undertaking a ballot of members' opinion on whether they should proceed to a formal legal ballot for Industrial Action. UNISON were considering their position.

THIS MINUTE IS RESERVED UNDER SECTION 43 OF THE FREEDOM OF INFORMATION ACT 2000

6.5 *New Doctors Appointments*

Mr Goldman updated the Board on the first round of appointments from the Deanery and stated that the Trust had 46 vacancies. As a result of internal temporary appointments this figure has been reduced to 7 vacancies (2% of the total). Of those outstanding HEFT were in the process of selecting locums.

The new junior doctors commence employment on 1st August 2007. The Trust had received the names of the doctors only 10 days ago so currently there were a large number of outstanding CRB/Occupational Health clearances (120). The new doctors were being asked to bring with them paperwork confirming CRB checks within the past 3 years. If they were unable to do so, a declaration would be sought stating that they had no criminal convictions or bindovers and verification of the information provided would be requested from another NHS Trust.

No junior doctors would be allowed into high risk specialties prior to evidence of their original CRB clearance being produced or a copy that was less than 3 years old.

6.6 *Operations Committee Report*

The meeting noted that the purpose of this report was to give assurance to the Board on action taken and progress made at the Operations Committee Meeting held on 20th July 2007 and that there were no formal decisions required by the Board.

Car Parking: Mr Goldman asked the Board to note the proposal to increase charges for staff car parking from £11.20 to £14.70/month at Heartlands and Solihull and from £9.17 to £12.67/month at Good Hope Hospital.

Good Hope Hospital: GHH had failed to receive the reimbursement grant from Birmingham City Council Social Services. Following a meeting between Mr Goldman and Sue Anderson (Birmingham Social Services) last year it had been agreed that the debt would be settled in full. However this had not been the case and Mr Goldman would be writing again to request payment. GHH now forms part of the local partnership agreement and it was proposed that reimbursement funds would be used to pay for schemes which would reduce delayed discharges at the hospital. If settlement of the

historic debt was not made the Trust would have to reconsider its position.

Catering: Mr Goldman confirmed to the meeting that the flexi-menu was currently being evaluated.

6.7 Report from Asset Management

The Board noted the report from Asset Management setting out progress with site strategy and other issues relating to estates and facilities. The Board considered whether in view of changes to the rules on asset management, there might now be a weakness on the Board in respect of new build expertise side. It was agreed that where this was the case the Trust would look to source outside expertise.

MG

6.8 Breath of Life Appeal

Mr Goldman updated the meeting on the launch of the Breath of Life Appeal that had taken place on 23rd July on 3 sites with the aim of raising £300,000 to purchase new equipment for the Neonatal units at Good Hope and Heartlands Hospitals. The Trust had received substantial publicity from local radio and newspapers and its corporate partners were supporting a concert at the Town Hall to be held on 19th December 2007.

MG

Mr Goldman would update the Board on the progress of the Appeal at future meetings.

7. BOARD COMMITTEE MINUTES

7.1 Donated Funds Committee minutes

The Chairman said that there was nothing further to add to the minutes of 25th June 2007 other than in relation to the Hollier Charity (Item 10 of the minutes). When a review of its terms of reference had been completed the Hollier Charity Committee would then report to the Donated Funds Committee as a standing item on the agenda.

7.2 Finance Committee

The minutes of the Finance Committee of 25th June 2007 were noted by the Board.

7.3 Finance Report

Mr Stokes reported that although £1.6m of CIP had been achieved for the year to date against plans of £2m, the shortfall of £0.4m was due to a delay in some schemes and therefore greater efficiency to ensure CIP targets were met was needed. The level of reserves at year end was forecast to be £17m-£18m and it was planned to have a Capital Investment Programme for reinvestment in place by the year end in order to bring the Estate up to a standard comparable with UHB and Coventry & Warwick in the medium and long-term. This would be presented to the Board in December 2007 or

MG

January 2008.

Mr Stokes also reported that work continues with DHL and an offer for procurement was awaited. The NHS had signed up to do some logistics and it was hoped to bring an offer to the October Board meeting.

AS

Proposals for Solihull and Good Hope sites based on the needs inherent in the recently published service strategies had been aired for comment with the Executive Directors. The same high level approach would be considered for the Heartlands site. A full paper would be brought to the Board in autumn 2007 and the Board noted that immediate action in areas of urgent need or demolitions which had previously been agreed were now in hand.

8. ANY OTHER BUSINESS

Board self-assessment

Mrs Lea informed the Board that this is a requirement in MONITOR's Code of Governance. It was proposed that in the first instance, after consultation with the Chairman and Chief Executive, a paper outlining the proposed draft self-assessment methodology be circulated to Board members for comment in order to identify developmental issues and establish the representative quality of the Board.

Mr Goldman stated that he would prefer a more rigorous assessment to be conducted by an independent external assessor. Some discussion on the way forward took place.

It was agreed that following the meeting and further discussions between the Chairman, Mr Goldman and Mrs Lea, a paper would be circulated as outlined above and Board members were asked to respond in a frank and critical manner as it was important to try and establish how the Board was perceived by others.

CL/
CW/
MG

9. DATES OF FUTURE MEETINGS

It was agreed that the meeting scheduled for Tuesday 28th August would be cancelled due to many of the Board being away on holiday.

Tuesday 25th September 2007

Tuesday 6th November 2007

Tuesday 4th December 2007

Tuesday 8th January 2008

Tuesday 5th February 2008

Tuesday 4th March 2008

.....
Chairman