

**Meeting of the Board of Directors
Wednesday 30th June 2010**

Present:	Michael Cassidy	Chairman
	Nancy Hallett	Chief Executive
	Jo Farrar	Finance Director
	Dr John Coakley	Medical Director
	Cheryl Clements	Director of Workforce and Education
	Andrew Panniker	Director of Environment
	Tracey Fletcher	Interim Chief Operating Officer
	Charlie Sheldon	Chief Nurse & Director of Governance
	Eric Sorensen	Non-Executive Director
	David Stewart	Non-Executive Director
	Imelda Redmond	Non-Executive Director
	Stephen Hay	Non-Executive Director
	Professor Michael Keith	Non-Executive Director
Minutes	David Bridger	Head of Governance

1.0 Chairman's Welcome and Introduction

Michael Cassidy, Chairman, opened the meeting and welcomed Charlie Sheldon to his first meeting of the Board of Directors.

2.0 Apologies for absence

Professor Chris Griffiths Non-Executive Director

3.0 Declaration of interests regarding items on the agenda

None

4.0 Minutes of the previous meeting held of 26/05/2010 and matters arising

The minutes of the previous meeting were agreed

5.0 Chairman's Report

Michael Cassidy informed the Board that the Trust had received enquiries from a member of the public and Hackney LINK regarding holding the Board of Directors meetings in public. The member of public has been advised to discuss this

matter with the Vice Chair of the Council of Governors. Hackney LINK have been approached to meet with the Chairman and Chief Executive.

Michael Cassidy notified the Board that he approved the contract for KPMG to support the Trust in the transfer and integration of NHS City and Hackney's community health services.

6.0 Chief Executive's Report

Nancy Hallett informed the Board that the Trust had received written confirmation from Monitor regarding the 62 day cancer target. The trust has been allowed to remain at amber for the governance risk rating but this will be dependant upon the Trust's performance for this target over the next quarter.

She also notified the Board that the Trust has now had three patients diagnosed with MRSA bacteraemias against a target of four for the year. Each bacteraemia is fully investigated and the risk to the Trust has been assessed and incorporated on the Trust risk register.

Tracey Fletcher, Interim Chief Operating Officer provided the Board with feedback from the recent all agency major incident exercise (Exercise Milo). Homerton enacted its major incident policy and site lockdown procedure. The Trust received a total of 35 "casualties". A de-brief amongst staff involved was carried out immediately post the exercise. Analysis of feedback showed that Homerton responded very well and learning points have been identified. A formal report from the Health Protection Agency assessors will be circulated to the Board when it is published.

Dr John Coakley, Medical Director provided the Board with a summary of the case of the death of Baby L which had been subject to media interest following the coroner's inquest. The coroner had returned a verdict of accidental death contributed to by medical neglect. He summarised the conclusions and next steps. The NPSA will be written to review the clarity regarding information pertaining to phenytoin in the BNF. The GMC are going to carry out a review of the Doctors involved.

7.0 Strategy and Policy – Homerton Strategic Position***

This item was discussed under reserved business.

7.3 Revision to the Operating Framework for the NHS in England 2010/11

Nancy Hallett provided the Board with a summary of the Revision to the Operating Framework for the NHS in England 2010/11 published on 21st June 2010. The Board considered the implications of the revisions particularly the change in the threshold from 98% to 95% for the four hour A&E waiting times performance indicator. The Board agreed that it was clinically important to maintain this target in the Trust. The Board noted the revisions.

Quality and Safety

8.1 SUI Report***

This item was discussed under reserved business

8.2 Safeguarding Annual Reports – Adults and Children

Charlie Sheldon, Chief Nurse and Director of Governance presented the annual safeguarding reports for children and adults. He highlighted the following:

Safeguarding Children

- Homerton is compliant with safeguarding arrangements
- Homerton has assessed itself as green against CQC / national safeguard arrangements for children for all standards except training.
- Level 3 child protection training is at 77% against a target of 80%
- Further work is required to increase level 2 training from 60% to 80%
- A safeguarding improvement team visit will take place on 13th and 14th July 2010

Safeguarding adults

- Across the partnership, systems and processes have been assessed as 'good'.
- Homerton has a productive and active role in the partnership.
- Implementation of key national drivers including "Six Lives"
- There is a need to develop plans and services specifically against learning disabilities – work has already commenced and action plan in place.
- There is a need to strengthen internal reporting processes so that an accurate database can be maintained.
- There is a high level of confidence that effective primary / secondary care pathway can be developed for patients with known learning difficulties.
- Further work is required in the area of "first contact" with vulnerable adults.

The Board noted the content of the report and the associated action plans.

8.3 Enhanced Recovery Programme CQUIN

Dr John Coakley presented a paper regarding the introduction of the enhanced recovery program (ERP). He summarised the plan to introduce the work into two specialties in the Trust as part of the regional CQUINs for this year. A project clinical lead has been identified along with a multi-disciplinary team to plan the introduction of the work. The planned start date is 4th October and it is anticipated that the introduction will lead to improved outcomes and decreased length of stay. The Board approved the plan.

Corporate Governance

9.1 Annual Report and Accounts 2009/10

Jo Farrar, Director of Finance presented the Board with final copies of the Annual Report and Accounts. The accounts had been signed off on behalf of the board by the Audit Committee and will now be submitted to parliament.

9.2 Homerton Q4 2009/10 Monitoring results notification

Jo Farrar presented a letter from Monitor summarising the results of Monitor's Q4 analysis of Homerton and a summary of the results of Monitor's analysis for Q4 monitoring of all NHS Foundation Trusts. The Trust was assigned an amber risk rating for Governance due to breaches of the cancer target. Q4 was the third consecutive breach of the target and could have led to a red risk rating in light of the "three ambers to red" override rule. Monitor expects the Trust to achieve the target from Q1 2010/11. This is the subject of a separate paper to the Board under item 10.2. The Board noted the report.

9.3 Constitutional Review

Nancy Hallett presented a letter from Monitor confirming that they had agreed the amendments to the Trust Constitution. The Constitution has now been amended to allow elected public Governors to stand for three consecutive terms of three years each. The Board noted the letter.

9.4 Additional Board Meeting

This item was discussed under reserved business.

Business Planning & Performance Management

10.1 Finance and Performance Report Month 2

Jo Farrar presented the Board with the financial position for M2 and explained the Trust was ahead of its financial plan. There is continued over performance against the plan partially due to increased elective and daycase activity, and outpatient follow-up attendances. Relatively high levels of agency staffing have continued leading to overspends against pay budgets.

He presented a draft Service Line Report (SLR) showing actual contribution by service for the two month period. This was presented for illustrative purposes only as the data has not been validated.

A question was raised regarding the private patient cap and unpaid bills from the PCT. Jo Farrar explained that the cap was understated at 0.2% when it should be 0.3%, there is however an indication that the cap will be removed. Regarding unpaid bills he provided the Board with assurance that these are being suitably managed.

The key areas of focus for service performance relate to the 62 day cancer, A&E and the MRSA targets. Further details relating to the 62 day cancer target were provided under item 10.2. There have been significant improvements in A&E performance over the last month and it is highly likely the Trust will achieve the overall target for the Quarter. All three targets continue to be monitored closely as part of Trust weekly performance review.

10.2 62 Day Cancer Target

Tracey Fletcher presented a paper highlighting current performance against the 62-day cancer target. She summarised the actions taking place to ensure sustainable performance against the target in future including refinements to the pathway, management of shared breaches, improving communication mechanisms and information sources. She also summarised the assessment of risk with regard to the target for Q1 and Q2 and it is anticipated that the target will be achieved for Q1. The Board noted the content of the report.

10.3 Options Appraisal for Hosting of EPR Hardware.

This item was discussed under reserved business

10.4 Carbon Management Strategy

Andrew Panniker, Director of Environment presented the draft Carbon Management Strategy. He explained that there was a requirement for all Trusts to have a Board approved plan in line with the NHS Carbon Reduction Strategy indicating how carbon reduction will be achieved and how this will be incorporated into every day business. The Trust strategy sets out the roles and responsibilities and a framework for the delivery of a 10% reduction in the Trusts carbon footprint. The Board discussed the investment and commitment required to meet the plan in the context of business and financial return through the delivery of savings. The Board approved the strategy.

10.5 Edith Cavell Ward Refurbishment

Andrew Panniker presented a paper outlining the proposed works to refurbish Edith Cavell ward. He requested the Boards approval to proceed with the work and explained the contingency arrangements for the management of patients whilst the ward was closed. He explained that the original budget in the approved capital programme was £500,000. Following return of tenders a budget of £550,000 is required if no cost reduction exercise were undertaken. It is however recommended that an additional £50,000 be allocated from the capital contingency to ensure the continued stepped change in patient experience. The board approved the works.

Human Resources

11.1 Human Resources Report

Cheryl Clements, Director of Workforce and Education, presented the Board with the Human Resources Report. She stated that whilst sickness absence has increased marginally it remains below the NHS average. CRB checks continue to create delays to recruitment some taking up to 10-12 weeks to process. The Board discussed the issues surrounding CRB checks and considered the option to adopt a waiver for some staff if they already have a recent CRB. A new manager for the Employee Health Management Service has started in post. Focused work is continuing on improving mandatory training with a new model of delivery starting in July and appraisal rates have improved in some areas. The Board noted the report.

11.2 Nurse Vacancies

Cheryl Clements presented a paper outlining the vacancy position across the organisation. There are currently 273 budgeted vacancies and of this 132 are nursing and midwifery vacancies. She provided a summary of the posts that are currently in the process of being filled. A review of the vacancies has shown that some areas have particular difficulties specifically paediatrics and neonates. The Trust has also done some targeted recruitment in the press, utilized overseas recruitment including Ireland. The Board noted the report.

11.3 Banding Claim

Cheryl Clements provided the Board with a verbal report regarding a case of four doctors who have made a claim against the Trust for working over their allotted number of shifts. Their claims is for 100% uplift in their salaries for the additional hours worked. The Board discussed this issue and the measures in place to prevent this from happening in future including the ensuring rotas are suitably managed by the Clinical leads.

11.4 AAC Ratification

None

12. Committee Reports

Stephen Hay, Non-executive Director provided the Board with feedback from the last Audit Committee meeting. He stated that the committee had approved the Annual Accounts. He highlighted one issue regarding money spent by the Mental Health Trust for works on the Homerton site. David Stewart, Non-executive Director and chair of the Risk Committee had attended the meeting and further assurance is received by having Michael Keith sitting on both the Risk and Audit Committee. He also highlighted the following reports discussed at the meeting; GEM divisional report, quality accounts report and coding and income loss report.

The Board noted the contents of the Risk Committee minutes

13.0 Any Other Business

None