

**Meeting of the Board of Directors
Wednesday 25th March 2009**

Present:	Michael Cassidy	Chairman
	Nancy Hallett	Chief Executive
	Pauline Brown	Chief Nurse & Director of Governance
	Dr John Coakley	Medical Director
	Anna Anderson	Director of Finance
	Andrew Panniker	Director of HR & Environment
	Simon Weldon	Chief Operating Officer
	Stephen Hay	Non-Executive Director
	Professor Chris Griffiths	Non-Executive Director
	Eric Sorensen	Non-Executive Director
	Imelda Redmond	Non-Executive Director
	Michael Keith	Non-Executive Director

Minutes: David Bridger Head of Governance

1.0 Chairman's Welcome and Introduction

Michael Cassidy, Chairman, opened the meeting.

2.0 Apologies for absence

David Stewart Non-Executive Director

3.0 Declaration of interests regarding items on the agenda

There were no declarations of interest.

4.0 Minutes of the previous meeting held on 25.02.09 and matters arising

Nancy Hallett had minor amendments to the minutes under Chief Executives report which were agreed.

5.0 Chairman's Report

Michael Cassidy gave some feedback from the Joint Board of Directors and Council of Governors meeting which was well attended and had proved to be very positive and interesting. The meeting had included a discussion regarding the Healthcare Commission (HCC) Investigation into Mid Staffordshire NHS Foundation Trust.

6.0 Chief Executive's Report

Nancy Hallett, Chief Executive informed the Board that a number of academic centres have been created in London including King's Health Partners, Imperial College Healthcare and UCL Partners. The Homerton is now a partner with UCL partners within the specialty of Infectious diseases. Our strong academic links continue with Queen Mary and Westfield College.

The current consultation on Stroke and Trauma services for London continues and is due to close on 8th May.

NHS London has recently announced the development of six sectors across London leading on work to strengthen the commissioning of services. The Homerton sits within the inner NE London sector.

Ms Hallett reported that she had now had a meeting with Diane Abbott MP and discussed the proposed changes to healthcare in London. Ms Abbott had been made aware of a complaint regarding the Homerton which was also discussed. The complaint has not been entirely resolved and the PCT is now the focus for the issues raised.

Ms Hallett reported that it has been confirmed that the North London Line will be closing for approximately 4 months in early 2010. Andrew Panniker, Director of HR and the Environment provided more detail on the proposed closures. These were being proposed as part the Olympic developments and include platform extensions and track replacement. It was noted that the closure of the line will pose a significant problem for the Trust with the service being replaced by buses. It was acknowledged that these may not be adequate for the Trusts requirements and that alternative arrangements will need to be explored. It was suggested that the Chairman should write to TFL on behalf of the Trust outlining the concerns and the potential impact on service delivery.

Ms Hallett also informed the Board that the Trust had been designated as a receiving hospital for casualties (protestors) in the event of a major incident at the G20 summit planned for next week.

9.4 HCC Investigation into Mid Staffordshire NHS Foundation Trust

Dr John Coakley tabled a paper updating the Board in light of the findings of the HCC investigation of the Mid Staffordshire NHS Foundation Trust in particular the care given to patients as emergencies. He outlined the 22 key findings and reflected on Homertons position against these. Areas identified as potential risk for the Homerton were lack of certain protocols, pathways and audit in the emergency department and responding too nurse-call buttons. These had had previously been identified as areas of risk by the Trust and as such were already being addressed. Dr Coakley also provide the Board with data regarding the Standardised Mortality Rate (SMR) for the Homerton. The Board had a lengthy discussion regarding the findings relating to Trust Board assurance and the use of outcome and quality reports including mortality rates, incidents and complaints. Dr Coakleys paper is to be circulated to the Council of Governors.

Action: Dr Coakley to send paper to all trust Governors

7.0 Corporate Governance

7.1 Annual Plan

Nancy Hallett presented a paper outlining the key priorities for the Trusts Annual Plan. This provided an update on the paper presented to the Board in November and subsequently to Clinical Board and the Council of Governors. She outline the three key areas of corporate priority, these were:

1. Productivity and efficiency
2. Quality and risk
3. Strategic direction

She went on to describe the main sections of the plan itself including the proposed content for the service development plans, the CEO summary and other major issues. The plan will be agreed at an extraordinary meeting of the finance committee ready for final signoff and submission to Monitor at the end of May.

Stephen Hay, Non-Executive Director commented whether it should be made explicit regarding what is done for the Trust will be doing for its staff. It was considered that this would be covered by priority 3.

Chris Griffiths, Non-Executive Director asked why research did not appear to be reflected in the plan. It was agreed that this would be noted and referenced under priority 3. It was acknowledged this was a key area of development and that the trust would be working with key stakeholders.

The Board confirmed the 2009/10 corporate priorities and supported the proposed approach.

7.2 Consultation on Quality reporting in 2008-09 Annual Reports and Accounts

Pauline Brown, Chief Nurse & Director of Governance presented a paper from Monitor outlining proposals for a quality reporting framework to be included in the 2008-09 Annual Reports and Accounts. A paper setting out the Foundation Trust Networks (FTN) suggested statement in response to the consultation was tabled. Monitor suggested a retrospective report however the FTN had disagreed with this approach. It was accepted that there was a need to develop measures to capture patient experience which will need to be included.

7.3 Insurance renewal

Pauline Brown informed the Board that the Trust had renewed its insurance the terms of which remain the same as the previous year's insurance. She also stated that the FTN are looking at the possibility of Foundation Trusts purchasing collective cover but this is yet to be finalised. It was questioned whether the Trust had pursued a claim for financial loss due to the recent adverse weather. This had not been done but would be looked into.

Action: Anna Anderson to check if a claim could be made.

7.4 IVF Drugs Waiver

Anna Anderson, Director of Finance presented a paper requesting approval of a waiver for six month supply of IVF drugs as a framework being negotiated by the London Procurement Programme is not yet in place. The Board approved the waiver.

7.5 Waiver for Graham ward uplift and construction of parents room for perinatal development

Andrew Panniker, Director of HR and Environment presented a paper requesting approval of waivers for two projects, the refurbishment of Graham ward and the construction of a parent's room in the new perinatal centre. Based on the rationale he provided the Board approved the waivers.

8.0 Business Planning & Performance Management

8.1 2009/10 Financial and activity plan

Anna Anderson presented a paper summarising activity and financial plans for 2009/10. She stated that the contract negotiation round had been much more difficult this year and contracts have only just been agreed.

She outlined the following:

- Service targets for the year
- Contract negotiation
- Activity levels
- Summary income and expenditure plans including reserves
- Savings plans
- Assessment of risks
- Capital
- Financial management regime change

The Board considered the position presented and approved the budget.

8.2 Productivity and Efficiency Programme (PEP) update

Simon Weldon, Chief Operating Officer provided an update on the work of the PEP. The project team has been established with Sallie Rumbold as Project Director. Work is underway on three major projects; length of stay, procurement and theatre efficiency. He also outlined three cost cutting themes where the Trust needs to develop these were data quality, service improvement and cost pressure reductions/CIPS. Updates on the three major projects will be fed back at the next Board meeting. The Board noted the report and supported the ongoing work.

8.3 Finance and activity report month 10 position

Anna Anderson presented the Month 11 finance and performance report. She reported that the Trust I&E surplus to date has increased to £5.4m. Clinical income was below plan in February mainly due to a reduction in outpatient activity resulting from cancelled clinics during the adverse weather. The under-performance against non-elective activity and income plans reported in previous months continues. There is continued pressure on expenditure budgets in some areas, but also unused reserves of just under £2.7m.

Looking at service performance, cancer targets for 2 week wait and 62 days are at risk for Q4. This is due to changes in reporting rules and cancer standards that came into force from 1st January 2009. The Board noted the contents of the report.

8.4 Perinatal developments

Andrew Panniker updated the Board on the ongoing development works in the Trust. The concrete used on the perinatal development that had failed the crushing test has now all been broken out and recast. The next phase to clad the outside of the build is due to commence and the plant room has now been configured. The refurbishment of Graham ward is on target.

He also reported that a further meeting had taken place with GE and a report is expected back in two weeks time.

9.0 Clinical Governance

9.1 SUI Report***

This item was discussed under reserved business.

9.2 Safeguarding Children Assessment

Pauline Brown gave a verbal report regarding the Trusts recent safeguarding children assessment submission to the HCC.

9.3 HCC Children's Hospital Services Follow-up Review 2008-09

Dr John Coakley presented the results of the HCC follow-up review of children's hospital services. He stated that the data had proved very difficult to interpret but the Trust was identified as under performing in the following:

- Consultant surgeons with child protection level 1 training in last year and with paediatric life support training in last year.
- Emergency Care Settings - RNs with administration of analgesia training.
- Day case care settings - RNs with pain assessment training; administration of analgesia training and with advanced paediatric life support training.
- Consultant anaesthetists with low levels of anaesthetics on children.

He stated that the findings need to be viewed in the context of the way the service is provided at the Homerton. Relevant staff have involved in the development of an action plan for these areas. The Board noted the contents of the report and requested that the action plan be presented at the next Board meeting.

Action: Dr Coakley to present the action plan at the next Board meeting.

10.0 Human Resources Governance

10.1 Human Resources update***

This item was discussed under reserved business.

10.2 Director of Workforce

Nancy Hallett announced that the Trust had been successful in appointing to the new Director of Workforce post. The new Director will be Cheryl Clements who is currently working as Director of Human Resources and Workforce Development at Medway PCT. She will commence working for the Trust in June.

10.3 Consultant Appointment

The Board ratified the appointment of Dr Claire Gorman Consultant Rheumatologist.

11.0 Strategy and Policy

11.1 Making Healthcare for London Happen in NE London – Case for Change

Nancy Hallett and Dr John Coakley provided an update of the review into Healthcare for London.

12.0 Any Other Business

None