

**Meeting of the Board of Directors
Wednesday 29th April 2009**

Present:	Michael Cassidy	Chairman
	Nancy Hallett	Chief Executive
	Pauline Brown	Chief Nurse & Director of Governance
	Anna Anderson	Director of Finance
	Andrew Panniker	Director of HR & Environment
	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
	David Stewart	Non-Executive Director
	Sally Rumbold	Deputy Director Operations
Minutes:	David Bridger	Head of Governance

1.0 Chairman's Welcome and Introduction

Michael Cassidy, Chairman, opened the meeting.

2.0 Apologies for absence

Dr John Coakley	Medical Director
Simon Weldon	Chief Operating Officer

3.0 Declaration of interests regarding items on the agenda

Andrew Panniker, Director of HR & Environment declared an interest against item 11.1 (Strategic Options for Homerton) on the agenda, as he is married to a Board member of the North Middlesex Hospital.

4.0 Minutes of the previous meeting held on 25.03.09 and matters arising

Anna Anderson, Director of Finance asked that it be minuted that the Board of Directors approved the budget under item 8.1.

Feedback was given regarding the proposed works to the North London Line. A letter had been sent to the Chief Operating Officer at Transport for London (tfl). In response tfl had accepted the impact but were cautious in offering support. A meeting with tfl is planned for early May to which the East London Mental Health Trust and London Borough of Hackney have also been invited.

5.0 Chairman's Report

Michael Cassidy gave some feedback from the meeting of the Remuneration Committee and stated that letters to all Directors had been issued.

6.0 Chief Executive's Report

Nancy Hallett, Chief Executive informed the Board that the Trust is receiving regular updates from the Department of Health regarding the risks of a swine flu pandemic. The Trust has a Pandemic Influenza Contingency Plan in place and the Homerton Influenza Pandemic Planning Implementation Group (HIPPI) are meeting tomorrow (30th April) to assess and review the Trusts current position.

7.0 Corporate Governance

7.1 Annual Plan

Nancy Hallett provided a verbal update regarding the Trust's Annual Plan. The corporate priorities presented to the Board in March are unchanged. The plan needs to be ready for submission to Monitor at the end of May. The first draft will be presented to the Finance Committee on 11th May. The second draft will be circulated to the Non-Executive Directors between the 11th & 19th May and presented to the Council of Governors on 14th May. The final draft will be signed off by the Board of Directors at the next meeting on 27th May.

7.2 Monitor Q4 Declaration

Pauline Brown, Chief Nurse & Director of Governance confirmed that the Trust would not be declaring compliance for quarter 4. The exception report included one breach of the 28 day cancellation rule. The two week and 62 day cancer targets in quarter 4 are at risk as a result of new thresholds. One Governor had been elected for the public, outer constituency and one appointed partner Governor is standing down. A new Executive Director has been appointed to the position of Director of Workforce.

7.3 Annual Health Check Declaration

Pauline Brown presented the Annual Health Check Declaration explaining that the Trust intends to declare full compliance with the exception of standards C4a (infection control) and C4c (decontamination). The previous report presented to the Board identified risks to compliance however no significant lapses had been identified. A copy of the third party commentary from the Health in Hackney Scrutiny Commission was tabled. The third party commentaries were discussed with particular focus on the commentary provided by Hackney LINK. It was agreed that the Boards comments would be conveyed in the general statement of compliance for submission to the Care Quality Commission. A letter setting out the Boards concerns would also be sent to Hackney Council and the Chair of Hackney LINK. The Board agreed to support the declaration and confirmed that the information provided for each standard was also supported.

7.4 Declaration of Interests

Pauline Brown explained that the Trust's Standing Orders require the Board Directors to declare any 'relevant and material' interests to the Board of Directors each year. Declaration forms for 2009/10 would be completed and signed at the end of the meeting.

7.5 Standing Committees – Terms of Reference

Pauline Brown notified the Board that the Terms of Reference (TOR) for the Audit Committee and the Risk Committee had been reviewed at their last meetings. She presented the TOR for the Remuneration and Nomination Committees which the Board approved with no changes. The TOR for the Finance and Charitable Funds Committee will be reviewed during May.

7.6 Annual Plan 2009/10 Board Statements self-certification

Pauline Brown presented a paper containing evidence to support compliance with the Terms of Authorisation reflecting the systems, processes and procedures in place to assess and manage risk to compliance. The Board considered each of the statements and the supporting evidence. No comments were received regarding areas of non-compliance. She notified the Board that the Terms of Authorisation are to be the subject of internal audit review in 2009/10.

7.7 IFRS Restatement of opening balance sheet for 2008/09

Anna Anderson, Director of Finance presented a paper updating the Board regarding the changes to the opening balance sheet previously presented to the Board. She provided a summary of the changes made following agreement with the Trusts internal auditors. The Board approved the audited restated opening balance sheet.

8.0 Business Planning & Performance Management

8.1 Resource position and budget 2009/10

Anna Anderson presented a paper updating the Board on the financial plans for 2009/10. She confirmed that this will achieve a surplus of £1.9 m or 1.1%. She described planned income totals excluding two new developments the COPD community service and the perinatal development. She also outlined the expenditure budgets taking into account savings from the productivity and efficiency programme. Work is ongoing to assess and prioritise the capital spend for the next three years. The Board noted the contents of the report.

8.2 Productivity and Efficiency Programme (PEP) update

Sallie Rumbold, Deputy Director of Operations provided an update on the work of the PEP. There had been good progress, the programme structure has been agreed and a number of projects have been established. The scoping reviews have been completed and a total of £4.7m cost improvements have been agreed Trust wide. Further work is required to identify an additional £1m in savings following signoff of PCT contracts. She provided a summary of progress with the three main projects; reducing length of stay; reducing procurement and pharmacy costs and improving theatre efficiency. The main risk to the programme overall is the continued difficulty in releasing senior clinical staff to work on the programme as suitable locums have not been secured. This will need further review in May. A balance sheet will be presented to the next Board. The Board noted the report and supported the ongoing work.

8.3 Finance and activity report month 10 position

Anna Anderson presented the Month 12 finance and performance report. She thanked Tom Alden, Deputy Director of Finance and his team for their hard work submitting the accounts within the shortened deadline. She confirmed that the Trust I&E surplus for year end was £3.9m which is less than originally forecast due to temporary return of funds to the PCT and additional provision for clinical negligence.

Sallie Rumbold presented the performance report. She stated that all access targets had been met. However thresholds for the 31 day and 62 day cancer targets have not yet been published so Trusts are unable to confirm a performance position. Additionally she highlighted that the Trust is reliant on BLT uploading data onto the cancer database 'Open Exeter' in a timely manner. This sometimes delayed formal confirmation of shared breaches between the two Trusts.

8.4 Perinatal developments

Andrew Panniker updated the Board on the ongoing development works in the Trust. There had been slow progress as there had been problems with the steel work in the new build and refurbished areas. This has now been resolved and the steel work is due to be erected shortly and once complete work will begin on the external cladding. Mr Panniker was asked if the delays will have budgetary implications. He responded that the Trust had a contingency fund for any unplanned costs however the problems were not the Trust's fault and responsibility lies with the structural engineer and steelwork contractor. Any claims associated with this are likely to be complex. He stated that the real risk is the potential loss of service income which will need to be assessed.

He also reported that he had been verbally notified that GE are planning to proceed with the legacy fund. A meeting is scheduled for one week's time to discuss the legacy and it is anticipated that they will make a public announcement in mid - late May.

9.0 Clinical Governance

9.1 SUI Report***

This item was discussed under reserved business.

9.2 Director of Infection Prevention & Control (DIPC) Q4 Report

Dr Daniel Krahe, Acting DIPC and Dr Alleyna Claxton, DIPC joined the meeting to present the Q4 DIPC report. Dr Krahe summarised of the following:

- Dr Alleyna Claxton has returned from maternity leave in April and has resumed her role as DIPC.
- The previously served improvement notice was lifted on 3rd March following a re-visit by the Healthcare Commission in February and based on actions put into place.
- Targets for MRSA bacteraemia and *C. difficile* infection were achieved for the year 2008/09.
- MRSA screening for elective admissions has been successfully implemented.
- All IPC audits planned for 2008/09 were completed.
- Four out of seven previously identified IPC risks could be reduced to a risk score of zero. The two main remaining risks are the ongoing requirement for IPC staff training and the provision of hand washing facilities.
- An SUI has been declared for a patient who had been on an open ward for one week and was later found to be Lassa fever PCR positive. 324 staff members were monitored for clinical symptoms. No secondary cases were observed.

He provided the Board with the first IC balanced score card and high impact intervention audit monitoring results for comment. This approach to the presentation of data for the Board was approved. Dr Krahe was asked if the target of 90% for training was a local or national target. He explained that this was a local target. Regarding the high impact intervention audit monitoring results he was asked what was being done to reduce the number of nil returns. In response he stated that the Matrons Monitoring Group are currently addressing this issue with the Infection Control Audit Nurse. They are now meeting twice a month.

The Board thanked Dr Krahe for his hard work covering for Dr Claxton.

Dr Claxton provided the Board with an update regarding Homerton position in relation to swine flu. She stated that the UK is at alert level 2 and would move to level 3 if there were outbreaks within the population. The Homerton has a flu plan in place and the following are being actioned:

- Swine flu patient assessment procedure and personal protective equipment (PPE) in place in A&E.
- Contact instructions in place.
- Procurement of further PPE for the Trust
- Pandemic flu meeting 30th April
- Multi-agency flu planning meeting later this week

The Board thanked Dr Claxton for updating them with regard to the situation.

10.0 Human Resources Governance

10.1 Human Resources update***

This item was discussed under reserved business.

10.2 Consultant Appointment

The Board ratified the appointment of Mr Darren Gillett, Consultant Paediatric ENT Surgeon.

11.0 Strategy and Policy

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

This item was discussed under reserved business.

12.0 Minutes of the Audit Committee and Risk Committee

These items were not discussed.

13.0 Any Other Business

None