

Minutes of the Board of Directors Wednesday 30th July 2008

Present: Michael Cassidy - Chairman

Nancy Hallett - Chief Executive

Pauline Brown - Director of Corporate Development

Guy Young - Director of Nursing & Quality Tracey Fletcher - Chief Operating Officer

Dr John Coakley - Medical Director
Anna Anderson - Director of Finance

Andrew Panniker - Director of HR & Environment

Eric Sorensen - Non Executive Director Ian Luder - Non Executive Director Michael Keith - Non Executive Director Imelda Redmond - Non Executive Director Chris Griffiths - Non Executive Director Stephen Hay - Non Executive Director

Minutes: Sallie Rumbold - Deputy Director of Operations

1.0 Chairman's Welcome and Introduction

Michael Cassidy, Chairman opened the meeting

2.0 Apologies for Absence

None

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 25.06.08 and matters arising not covered elsewhere on the agenda

The minutes of the previous meeting were agreed as accurate.

5.0 Chairman's Report

Michael Cassidy, Chairman and Pauline Brown, Director of Corporate Development reported on the recent Remuneration Committee and the discussion that followed at Council of Governors.

6.0 Chief Executive's Report

Nancy Hallett, Chief Executive announced that Tracey Fletcher, Chief Operating Officer would be leaving the Trust in November to take up another Chief Operating Officer post at a Trust outside of London. The recruitment process for this post would start as soon as possible with interim cover being provided by the current Deputy Director of Operations until the post was substantively appointed to.

Ms Hallett reported on the Trusts excellent 18 week performance and explained that NE London as a whole was having difficulty achieving the target at the present time.

7.0 Corporate governance

7.1 Monitor Q1 Governance Declaration

Pauline Brown, Director of Corporate Development confirmed that all key targets had been met in quarter 1 and therefore declaration 1 had been signed. The Board noted the exception report which included reference to the Non – Executive recruitment process, Governor elections, action plans for patient, maternity and staff surveys and the Healthcare Commissions reporting of the diagnostic target.

7.2 Q1 Board Assurance Framework

Pauline Brown, Director of Corporate Development presented the Assurance Framework for Quarter 1. Risk scores above 12 were discussed and noted.

7.3 Single Equalities Scheme

Pauline Brown, Director of Corporate Development presented the Single Equalities Scheme and action plan which the Board agreed and supported.

7.4 Information Governance Report

Dr John Coakley, Medical Director presented the Information Governance Report. The Board heard about the new requirement for encryption and the components of the self assessment Information Governance toolkit. Dr Coakley also discussed the four areas in the Statement of Compliance where further development work is required.

7.5 Monitor and DH Consultations

7.5.1 PP Cap 9th September

Anna Anderson, Director of Finance reported on the consultation process by Monitor on the private patient cap. The Board supported the draft response to Monitor and wished to emphasise how the definition of 'private patients' was not appropriate for the patients paying for IVF treatment at Homerton. These are not 'private patients' as such but are self paying because NHS funding for fertility treatment is not universally available.

7.5.2 DoH NHS Constitution – 17th October 2008

The Board noted that consultation on the NHS Constitution closes on 17th October.

7.6 Waiver of competitive tendering – single sex accommodation for elective surgical patients

Andrew Panniker, Director of HR & Environment explained the rationale for the waiver. The Board discussed the reasons for this and supported the action taken

8.0 Business Planning & Performance Management

8.1 Finance and activity report month 3 position

Anna Anderson, Director of Finance provided the Month 3 Finance Report which summarised the financial performance of the Trust for the first quarter. The income position had shown improvement by £0.2m since May. Elective and outpatient activity was now ahead of plan. The main areas of concern were in gynaecology, paediatrics and obstetrics where activity was below plan. Ms Anderson reported that these issues were being investigated. Expenditure had increased in three directorates and it was noted that £290k had been released from reserves to offset this overspend. The Board discussed and considered the use of reserve funds and the process for agreeing this in year. The discussion included the aim of moving from fixed directorate budgets to income and expenditure accounts in future. Ms Anderson explained that the year end forecast was for a surplus of £0.4m above plan based on overspends being controlled.

8.2 Performance Report

Pauline Brown, Director of Corporate Development reported that all key indicators were in a good position. The challenging CDiff target was noted and Guy Young, Director of Nursing & Quality explained the figures and risks to the very challenging target around both the MRSA and CDiff targets this year despite continued low levels of infection across the Trust generally.

8.3 Perinatal and fertility developments

8.3.1 Award of contract for perinatal build***

This item was discussed under reserved business

8.4 Circumcision Service Proposal***

This item was discussed under reserved business

9.0 Clinical Governance

9.1 SUI Report***

This item was discussed under reserved business.

9.2 Q1 Director of Infection, Prevention and Control (DIPC) Report

Guy Young, Director of Nursing & Quality presented the quarter one report from the Director of Infection, Prevention and Control. The Board noted the findings within the report in particular the remaining focus on MRSA and CDiff targets.

9.3 Patient Survey

Nancy Hallett, Chief Executive informed the Board of the measures being taken by the Trust to try to improve both the response rate for the survey and the outcomes recorded. Improving

the quality of inpatient care and also patient perceptions of issues such as cleanliness was currently a clear focus of attention for all teams including senior managers.

9.3.1 Feedback from meeting with Anna Walker

Nancy Hallett, Chief Executive reported back on a recent meeting held on behalf of all 14 London Chief Executives with Anna Walker, Chief Executive of the Healthcare Commission. The meeting had been held to highlight the issues with the methodology used for the patient survey and low response rates both of which disadvantaged Homerton and many other inner London Trusts.

9.3.2 A&E survey response rate

Nancy Hallett, Chief Executive reported on the disappointingly low response rate for the A&E patient survey currently being undertaken by MORI. This placed Homerton with the lowest response rate so far in the country. This was very disappointing and the Board agreed that this response did not accurately reflect the true quality of service provided with the emergency department at Homerton which is consistently of high quality.

10.0 Human Resources Governance

10.1 Staff Survey Action Plan

Andrew Panniker, Director of HR and Environment reported on the action plan taking place to try to improve the outcome for the next staff survey.

10.2 Appraisal Report

Andrew Panniker, Director of HR and Environment reported on the audit of the percentage of staff appraised in the past year. The aim was to achieve 70% by the end of September. Support was being provided to the directorates by HR managers and documentation had been updated and recording improved.

10.3 Employee Relations***

This item was discussed under reserved business

10.4 Ratification of consultant appointments

The appointment of the following consultants was ratified by the Board:

- Dr Michelle Emery, Consultant in General Medicine & Endocrinology
- Dr John Martin, Consultant in Palliative Care at St Josephs Hospice
- Dr Ajall Mullick, Consultant in Palliative Care at St Josephs Hospice

11.0 Strategy and Policy

11.1 Strategic position, to include implications of the Darzi report

Nancy Hallett, Chief Executive presented a paper on current strategic issues. The Board received a summary of the 'next stage review final report' from Dr John Coakley, Medical Director. The implication and significance of the tendering of service provision (example of COPD), the designation of specialist providers (ie stroke services) and the impact of future primary resource centres were discussed and presented by Tracey Fletcher, Chief Operating Officer. The Board discussed and considered the issues and possible approaches for the hospital to take.

11.2 Clinical leadership at the Homerton***

This item was discussed under reserved business

12.0 Committee Report

13.0 Papers for information only

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14.0 Any Other Business

None