

BOARD OF DIRECTORS

Meeting date: 28 February 2007

Agenda Item: 4

Paper: 07/15

Title: Minutes of the Meeting held on 24 January 2007

Summary This document records the items discussed at the last Board of Directors meeting.

Action: The Board is asked approve the Minutes as an accurate record of the matters arising.

Prepared by: Sallie Rumbold, Acting Director of Operations
Presented by: Michael Cassidy, Chairman

**Meeting of the Board of Directors
Wednesday 24 January 2007**

Present

Michael Cassidy	-	Chairman
Nancy Hallett	-	Chief Executive
Tracey Fletcher	-	Director of Planning and Service Development
Pauline Brown	-	Director of Corporate Development
John Coakley	-	Medical Director
Andrew Panniker	-	Director of HR & Environment
Guy Young	-	Director of Nursing & Quality
Caroline Clarke	-	Director of Finance & Information
Ian Luder	-	Non Executive Director
Eric Sorensen	-	Non Executive Director
Stephen Hay	-	Non Executive Director
Kate Costeloe	-	Non Executive Director
Sallie Rumbold	-	Minute taker

1.0 Chairman's Welcome and Introduction

Michael Cassidy, Chairman, opened the meeting and welcomed everyone to the meeting.

2.0 Apologies for Absence

Apologies were received from Jessica Crowe, Non Executive Director.

3.0 Declaration of interests regarding items on the agenda

None.

4.0 Minutes of the previous meeting held on 20 December 2006 and matters arising

The minutes of the previous meeting were agreed as a true record.

5.0 Chairman's Report

Michael Cassidy, Chairman confirmed that Michael Keith had been appointed as a Non Executive Director and would be attending the next board meeting. It was also noted that a full set of Governors were now in place with the appointment recently of James Torr.

Mr Cassidy led a discussion regarding the lecture theatre claim settlement. Andrew Panniker, Director HR & Environment presented a paper summarising the rationale for the commercial decision in settlement of a contractor claim. A settlement of £2.475m had been agreed. The Board agreed that the settlement was acceptable and reasonable in the particular circumstances described.

6.0 Chief Executive's Report

Nancy Hallett, Chief Executive provided feedback from 10 January Monitor review meeting. This item is described in more detail later on the agenda.

Ms Hallett reported on the planned events for 1 March. This will be the opening of the Positive Lives Exhibition which is a rolling exhibition of photographic images of HIV positive people around the world. The aim is to raise awareness of the work being undertaken here at Homerton to support HIV research and development.

Ms Hallett also reported on the formal launch of the Academic Centre planned for 12 June. There will be a particular focus on Children's Services as funding to support the academic centre build had been provided from the Children's Charitable Fund. Professor Costeloe would provide the inaugural lecture and this would be followed by a celebration evening combined with the retirement of Professor Kumar.

Ms Hallett reported on the decision by Hackney Council to go ahead with implementing a controlled parking zone in the roads surrounding the hospital. It was acknowledged that this would have a serious impact on staff travelling to work and also on patients and visitors to the Trust.

It was also reported that Charles Clarke former Home Secretary had participated in a film with Connecting for Health that had been undertaken in the A&E department recently. This would be screened for viewing in early February.

Ms Hallett also discussed the interest that the recent Gerry Robinson film had generated throughout the Trust. As a follow up to this interest a management seminar would be arranged within the Trust.

7.0 Corporate Governance & Hospital Secretary's Report

7.1 Response to Monitor Consultation – Amendments to the Compliance Framework

Caroline Clarke, Director Finance & Information presented the draft response to Monitor's consultation on the proposed changes to the Compliance Framework. The Board commented on the document and in particular were keen to enquire as to the tone of other responses. It was agreed that the answers required tightening up.

Ian Luder, Non Executive Director particularly commented on the importance of the Board and the Bankers being responsible for decisions about major capital investments whereas there now seemed to be greater emphasis within the document on Monitor approval.

7.2 Response to C&H PCT public consultation: Bigger, Brighter, Better

Pauline Brown, Director Corporate Development presented the public consultation by City & Hackney PCT on improving neighbourhood health services and premises. Ms Brown explained that this document should be read alongside the PCT Commissioning and Strategy Plan. Board members broadly accepted the concept but expressed a number of concerns about the consultation document including the following which should be considered as part of the Trust response:

- The document does not describe what is to be provided within the resource centres
- The document does not put it in the context of the overall strategy for health in City & Hackney
- The paper will be difficult for the public to comment on without understanding the context
- There is no mention of funding and affordability or how services would improve for patients if delivered through these premises
- The Board wanted to know who would provide the services within these centres and whether the Trust would be able to 'compete' to provide these services
- There needs to be links with neighbouring PCT plans – not carried out in isolation
- The document is very aspirational – time frames are not mentioned
- Page 8 should say 'people you can see without staying in hospital' rather than 'people you can see without going to hospital'
- No reference to what Hackney really needs in terms of health need
- Document is not specific about what will be delivered

The Board also questioned the implication that disinvesting in hospitals would enable more efficient services to be provided outside the hospital, given the critical mass required to provide good hospital services anyway. The Board wished to understand how the Trust could engage in a joint discussion with the PCT about this. It was agreed that as a major health care provider in Hackney it would be reasonable for the Trust to see the financials regarding the proposal. It was also noted that the consultation document had not come directly to the Trust for comment but had arrived via the Scrutiny Committee. It was also agreed that strategically the Trust would wish to place itself as a provider of both secondary and primary services where appropriate.

Ms Brown agreed to compile a draft response to the consultation document.

7.3 Monitor Q3 Compliance Return

Caroline Clarke, Director Finance & Information presented the draft Q3 compliance return to Monitor which included the signing of declaration 2 due to the risk of breaching the Cancer 62 day target. Assurance had been verbally received from Monitor that this would not mean a red rating but would result in an amber rating for both Q2 and Q3. It was agreed that the Monitor documentation on this was not clear. The Board discussed the return at some length and agreed that it would be appropriate to sign declaration 1 as the Trust had not actually breached the target itself in Q3. The risks and concerns should be clearly documented on the return however.

Ms Brown and Ms Clarke also agreed to have another discussion with Monitor on the way the ratings were classified.

7.4 Plans for Joint BoD and CoG Meeting 15 February

Pauline Brown, Director Corporate Development confirmed the main agenda items which would include a presentation of the initial findings of the Mori Patient Survey, PCT Commissioning Intentions, the Constitution and the Controlled Parking Zone implications.

The Board discussed the risks of the CPZ to staffing the hospital. Andrew Panniker, Director HR & Environment agreed to go through the proposal and the risks with the Chairman.

8.0 Business Planning & Performance Management

8.1 Month 9, Finance & Performance Report

Caroline Clarke, Director Finance & Information presented the Month 9 Finance and Performance Report. Overall income and expenditure was slightly ahead of plan. The revised deficit plan for year end had now reduced to £970k and there were plans to improve further upon this position. Ms Clarke reported that the cash position had improved at the end of December but this was mainly due to the PACS funding being received. The debtors' position was also gradually improving. Creditors were being stretched but payments were not breaching agreed timescales. Risk rating with Monitor would be a 3 and would probably remain so in quarter 4 also. Ms Clarke also reported that the A&E target had been achieved for quarter 3.

Non Executive Directors queried a number of points including income versus activity for first attends, the December elective downturn and the coding percentages. Ms Clarke explained the reasons for this. Eric Sorensen, Non Executive Director enquired about infection control and the numbers reported recently in the media. Guy Young, Director Nursing & Quality explained that the figures in 04/05 were extremely low for reasons that are unknown which had meant that it appeared that our rates had been rising. In fact levels were still consistently low. Clostridium Difficile levels were also low although more of a problem now that MRSA within the Trust. Hygiene protocols, a new infection control policy, new cleaning methods and better isolation procedures were all helping to keep levels of infection low.

Ian Luder, Non Executive Director enquired how much the Trust currently paid for external audit. Ms Clarke replied that this was in the region of £900k but that the last Audit Committee had reviewed both internal and external audit. A different approach was being considered and a paper would return to the Board. Stephen Hay, Non Executive Director and Ms Clarke would be following this up.

8.2 Financial Position 2007/08

Caroline Clarke, Director Finance & Information presented a paper outlining high level planning for the next financial year. The paper outlined some of the proposed changes to contractual arrangements with PCT's for next year and a summary of Department of Health guidance.

Ms Clarke reported that City & Hackney PCT seemed relatively keen to continue using our current 3 year contract which the Trust would also support rather than moving to the new Acute Hospital Contract.

Stephen Hay, Non Executive Director enquired about the lead commissioner role which meant that City & Hackney PCT would co-ordinate the contractual

documentation. Ms Clarke commented that it was unclear at the present time how this would work particularly as Islington PCT had already requested to have separate contract negotiations with the Trust.

The Board commented that points 16 and 18 conflicted with each other. The issue of potential dual waiting lists for different PCT's was discussed. Ian Luder, Non Executive Director noted that this would only really be an issue during the last 3 months of the financial year.

8.3 Progress with Annual Plan 2007/08

Pauline Brown, Director Corporate Development reported that the Annual Plan would need to be submitted to Monitor at the end of May 2007.

8.4 Financial Recovery Plan Update and confirmation of approach to 2007/08***

This item was reported under reserved business.

8.5 Draft response to C&H PCT Health Improvement, Finance and Commissioning Strategy 2007-09

Nancy Hallett, Chief Executive tabled a draft response to the Strategy which was to be submitted by the end of January. Comments were invited and received. It was agreed that the need to link this to the PCT estates strategy should be included in the response. The Board was content with the draft response with incorporated comments. Eric Sorenson, Non Executive Director emphasised that the response should include encouraging the PCT to engage in discussions with Homerton about what the Trust could offer to meet mutual objectives.

8.6 Clinical service profile presentation: opportunities and risks

Tracey Fletcher, Director Planning & Service Development gave a presentation to the Board regarding business opportunities and risks. This included the City & Hackney share of activity at Homerton and also the share that the Trust receives of City and Hackney referrals. This was presented in graphical format. For example we only receive 63% of City and Hackneys first referrals. Work was being undertaken to understand which GP's were referring where and it had been discovered that this was not just influenced by geography but was often due to historical referral practices. Work would be undertaken to try to improve our 'share' where possible. The presentation included how the Trust might determine what services to 'drive' and which services to 'hold' or even 'exit' from in future. Key influences such as cost and competitors were discussed.

Managing the Practice based commissioning consortia was also discussed with the potential for unmanaged risk regarding pathway reconfiguration.

The Board agreed that the presentation had been extremely useful and Ms Fletcher agreed to circulate copies of the slides and presentation following the meeting. Ms Fletcher explained how this work would be progressed over the coming months and agreed to return an update paper in about 6 months time.

Professor Costeloe, Non Executive Director emphasised the need to develop clinical champions within particular service areas within the Trust.

9.0 Clinical Governance

9.1 SUI Report

Guy Young, Director Nursing & Quality presented the SUI report. There were four current SUIs with one report delayed but almost complete.

9.2 Infection Control Report

Mr Young presented the summary Infection Control Report in relation to hospital acquired infection. The purpose was to assure the Board that infection control was being managed effectively within the Trust. Mr Young reported that there was a strong infection control team within the hospital and that targets for MRSA and clostridium difficile were on track.

The geography of the hospital was discussed and in particular Professor Costeloe enquired about available side rooms. Mr Young reported that the infection control policy meant that staff were able to make clear decisions about when patients required barrier nursing within side rooms. To date finding a side room had not been an issue.

Mr Young also explained that the Trust had a Flu Pandemic Plan and understood what facilities were available within the Trust in such circumstances.

10.0 Human Resources Governance

10.1 Ratification of Consultant Appointments

There were no consultant appointments to ratify

10.2 Significant HR Issues***

This item was reported under reserved business.

11.0 Policy, Strategy and Innovation

11.1 Forecourt Scheme Update

Andrew Panniker, Director of HR & Environment described the risks and problems with the current forecourt and how the planned changes would reduce these risks. Mr Panniker explained that the plan for improvements was in four phases:

- The police building which is due for completion in July – police officer would then include the hospital buildings as part of their beats
- Ambulances would be able to come off the main road sooner to park and drop off and a one way road across the front of the hospital would mean ambulances would not need to reverse
- Pedestrian routes would be clearly defined which avoided the roads
- Boundary walls would be taken down to improve visibility onto the road which would improve safety and integrate the hospital more into the community

As a result of the forecourt changes parking would be increased from 17 to 35 visitor spaces. Mr Panniker also reported that there had been 3 robberies at the train station in the last 8 days.

11.2 Update on Strategic Issues ***

This was discussed under Reserved Business.

12.0 Papers for Information Only

None.

13.0 Any Other Business

Michael Cassidy, Chairman reported that he had presented to the postgraduate meeting this week and had also been invited to attend some departmental visits. Mr Cassidy also explained that he was exploring the possibility of using a call centre to help raise funds for the hospital.

Improving the gardens around the hospital was also discussed. Mr Panniker reported that plans had already been drawn up in the past but were awaiting release of the garden areas following the completion of building work. The use of volunteers to help upkeep of the gardens was also discussed.

Mr Cassidy also reported that he was in discussion with Paul Deighton regarding the possibility of GE who are sponsoring the Olympics also donating equipment to the hospital in future.

14.1 Updated dates for 2007 Meetings

The dates were noted by the Board.

Dates of forthcoming meetings

Wednesday 28 February
Wednesday 28 March
Wednesday 25 April

AGREED ACTIONS FOR NEXT MEETING	BY WHOM
Response to Bigger, Brighter Better	PB