

BOARD OF DIRECTORS

Meeting date: 28 March 2007

Agenda Item: 4
Paper: 07/46

Title: Minutes of the Meeting held on 28 March 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 28 March 2007**

Present

Michael Cassidy	-	Chairman
Nancy Hallett	-	Chief Executive
Tracey Fletcher	-	Director of Planning and Service Development
Pauline Brown	-	Director of Corporate Development
Dr 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
Jessica Crowe	-	Non Executive Director
Stephen Hay	-	Non Executive Director
Kate Costeloe	-	Non Executive Director
Michael Keith	-	Non Executive Director
Sallie Rumbold	-	Minute taker

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

None.

4.0 Minutes of the previous meeting held on 28 February 2007 and matters arising

The minutes were agreed as an accurate record of the previous meeting.

5.0 Chairman's Report

Michael Cassidy, Chairman, fed back to the Board regarding his recent meeting with Meg Hillier MP.

Pauline Brown, Director of Corporate Development, provided feedback on the recent Members' Meeting. There had been low attendance but despite this good feedback on the content of the meeting had been received. The public governors meeting later in the day had been better attended

6.0 Chief Executive's Report

Publicity: C. Difficile

John Coakley, Medical Director, described the progress so far which included a new cleaning regime and staff education. Most importantly the Trust's antibiotic policy had been changed which had led a clear reduction in C. Diff rates. This had been instigated by Alleyna Claxton, Consultant Microbiologist, to whom the Board extended their thanks.

Controlled Parking Zone Update

Nancy Hallett reported that a letter had now been received confirming that parking controls had been proposed and accepted. The details of these were still undecided in terms of the extent and times of the restrictions. The method of implementation was therefore the area which the Trust would now seek to try and influence. The planned implementation date was reported to be September 2007. Ms Hallett agreed to alert the Governors to this issue. Andrew Panniker, Director HR & Environment, reported on the staff travel survey which had highlighted that around 600 members of staff travelled by car to work and did not have a parking space within the hospital. The Board understood and discussed the risks to the Trust in retaining and recruiting staff and also the potential to jeopardise elective work. The Board expressed their disappointment that the introduction of a controlled parking zone would occur before any improvements to the North London line had been implemented. Mr Panniker agreed to investigate short term availability of nearby sites for parking.

Legionella Update

Andrew Panniker presented a verbal update to the Board. Mr Panniker confirmed that all water samples had been negative and the 2 cases of Legionella had not been contracted at the Homerton. Work was continuing to improve the hot water return flow and reduce further Legionella risk by increasing water temperature, carrying out a chlorination programme and introducing a tap flushing regime through Medirest. Mr Panniker confirmed that a risk assessment was carried out every 2 years and an action plan was in place to work towards an

ever higher standard. Further improvements could include introducing a new boiler into the system and adding more pumps. The Board were keen to reduce risk further if at all possible. Mr Panniker agreed to investigate the costs and practicalities of this urgently and report back to the Board.

7. Corporate Governance and Hospital Secretary's Report

7.1 Disability Equality Scheme

Pauline Brown, Director of Corporate Development presented the Disability Equality Scheme to the Board for approval. Mrs Brown explained that this version had been published but consultation would now take place and amendments made in future versions. The first stakeholder meeting would take place this week. Mrs Brown explained that the Equalities Steering Group would agree any changes.

Michael Cassidy noted that learning disabilities were often not covered by such schemes and the Trust should be aware of the need to consider this. Mr Cassidy also suggested that a disabled person should ideally be included on the Equalities Steering Group. The Board gave their approval to the scheme whilst understanding that further consultation would now take place.

7.2 Private Practice and Fee Paying Work Policy

Mrs Brown presented the new policy to cover arrangements for fee paying work within the Trust. The Board gave their comments on the wording of the policy and considered the practicalities of implementation. The Board also considered the learning from a recent investigation and confirmed that the policy should reflect the reality of the situation which was that writing a report may require the need to carry out diagnostics such as x-ray. Ms Brown explained that Clinical Board had been clear that diagnostics should not be included.

It was agreed that for point 24 the word 'should' would be replaced by 'must' and the paragraph 11 should explain how secretarial support could be accessed. The Board also agreed that the policy needed re-ordering to further clarify the practicalities within the policy.

7.3 Constitutional Amendments

The Board noted the amendments which had been agreed at a joint meeting of the Board of Governors and Board of Directors on the 21st March and approved by a majority vote at the Members' Meeting.

7.4 Monitor Q3 Report

The Board noted this report which members had already received by email.

7.5 Board Reporting Schedule

The Board noted the reporting schedule and key dates.

7.6 Use of the Seal

This was noted by the Board

8.0 Business Planning and Performance Management

8.1 Finance & Performance Report – Month 11

Caroline Clarke, Director Finance & Information, presented the February report which detailed the Trust's performance. Ms Clarke reported that a break even position was anticipated largely as a result of the release of part of the general provision for PCT non payment and additional PCT income. Ms Clarke reported on private patients' income which was capped at approximately £250k. If this was exceeded the Trust would be in breach of the terms of authorization. Ms Clarke confirmed that the private patient's income position was being tightly managed to ensure the Trust did not breach.

Nancy Hallett, Chief Executive reported on performance against the 62 day cancer target which was unlikely now to be achieved due to a recent breach. Ms Hallett also reported that 3 additional MRSA cases had occurred unexpectedly and that these new cases could also put this target at risk. It was also reported that the A&E target was near to being achieved for Q4 with current levels at 98.17%.

8.2 Financial Recovery Plan Update 2006/07 & 2007/08

Tracey Fletcher, Director Planning & Service Development, presented a paper which summarised the current position of the financial recovery plan and associated projects. Ms Fletcher confirmed that the Trust was only 1% short of the original target for 06/07 which was a significant achievement. £4.7m of savings were already identified for 2007/08 and most were safe and secure. The FRP team was continuing to focus on five or six areas of concern to reduce risk. Ms Fletcher also confirmed that any potential savings from the Day Stay or the Taking Care 24/7 project had not been accounted for within the £4.7m.

Ms Fletcher reported that the financial recovery programme would be closing at the end of this week with James McQuillan continuing on as Programme Manager. Ms Fletcher asked the Board to note the huge contribution of both Christine Blanshard and Louise Olley, along with all the directorate leads, in ensuring the success of the recovery programme for the Trust. The Board extended their thanks to all concerned.

8.3 Financial Position 2007/08 – To receive Budget***

This item was recorded under reserved business.

8.4 Clinicentre Proposal***

This item was recorded under reserved business.

8.5 PACS and Connecting for Health Contract Issues***

This item was recorded under reserved business.

9.0 Clinical Governance

9.1 Health Care Commission (HCC) Inspection

Guy Young, Director Nursing & Quality gave a verbal update on the recent HCC Inspection. The Trust had been given only two weeks warning and had been one of 23 trusts highlighted by the HCC as a risk to dignity and privacy. Mr Young explained that the HCC used a method of assessing risk which includes the results of the Patient Survey and the number of 2nd stage complaints.

Mr Young reported that on the 15 March two assessors had visited the Trust and spent 3 hours each on two wards observing care and interviewing staff. The HCC inspection had found no evidence to support the identified risk and the Trust had received confirmation that the quality of care was good. In particular, praise had been given about the essence of care project, protected mealtimes, middle management leadership and the strong commitment at all levels of the organisation towards dignity and privacy.

Mr Young went on to explain the problems with the inpatient survey and how this was a particular issue for North East London which meant that the Trust benchmarked poorly against other areas of the country. Mr Young confirmed that the Trust would continue working with the local HCC lead on this particular issue.

Nancy Hallett reported that there had also been a recent unannounced inspection of Mary Seacole Nursing Home which had also resulted in the Trust being exonerated.

9.2 Inpatient Survey Results

Mr Young presented the 2006 Inpatient Survey results and explained how the survey was undertaken. The Trust was showing year on year improvement but response rates continued to be poor. The survey by Picker is only available in English despite the need for it to be available in other languages being

highlighted to Picker and the HCC in the past. Picker has acknowledged this fact but have no plans to make changes.

9.3 SUI Report

Mr Young informed the Board about a recent SUI which was currently under investigation.

10.0 Human Resources Governance

10.1 Ratification of Consultant Appointments

The Board of Directors ratified the appointment of Miss Sandra Watson, Consultant in Obstetrics & Gynaecology.

10.2 Significant HR Issues***

This item was reported under reserved business.

11. Policy, Strategy and Innovation

11.1 HIV Fundraising Campaign

Nancy Hallett gave an update on the planned fundraising campaign to support a research programme, a professorial post and also a capital build. An outline case would be returned to the Board at the end of May.

12.0 Papers for Information

None

13.0 Any Other Business

None

14.0 Dates of forthcoming meetings

Wednesday 28 March

Wednesday 25 April

Wednesday 30 May

ACTIONS AGREED FOR NEXT MEETING	BY WHOM
Update the governors on the implementation of the CPZ	NH
Investigate availability of short term parking sites	AP
Update on reducing risk of Legionella (May)	AP
Outline business case for HIV Fundraising Campaign (May)	NH