

**BOARD OF DIRECTORS**

**Meeting date: 20 December 2006**

**Agenda Item: 4**

**Paper: 06/128**

**Title: Minutes of the Meeting held on 29 November 2006**

**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 29 November 2006**

**Present**

Andy Windross	-	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
Jessica Crowe	-	Non Executive Director (from 1.50pm)
Sallie Rumbold	-	Minute taker

**1.0 Chairman's Welcome and Introduction**

Andy Windross, Chairman, opened the meeting and welcomed everyone noting that this was shortened meeting for essential business items only to allow for the Board Seminar which would follow.

**2.0 Apologies for Absence**

Apologies were received from Kate Costeloe, Non Executive Director.

**3.0 Declaration of interests regarding items on the agenda**

Ian Luder, Non Executive Director, declared an interest in an item discussed under point 5. One of the Trust's solicitors was a client of Mr Luder's firm.

**4.0 Minutes of the previous meeting held on 25 October 2006 and matters arising**

The minutes of the previous meeting were agreed as a true record subject to the following amendments:

Pauline Brown, Director of Corporate Development, and Guy Young, Director of Nursing & Quality, were not in attendance at the last meeting and had sent their apologies.

Minute 9.1 should be 'Council' for Healthcare Regulatory Excellence.

In Minute 10.1 the first paragraph should specify that this related to the Outer North East London Strategic Review. Paragraph 3 should specify that the consultation also only related to Outer North East London Strategic Review. It should be noted that the references to A&E and Maternity services are also linked to the overall whole London Strategic Review.

Minute 10.2 should record that only five bids were successful and not four.

Caroline Clarke, Director of Finance & Information updated the Board on the outstanding action on patient length of stay data and reported that length of stay data analysis would follow at future meetings.

## **5.0 Chairman's Report**

Nothing was reported under this item.

## **6.0 Chief Executive's Report**

On behalf of the Board, Nancy Hallett, Chief Executive thanked Andy Windross, Chairman, for all his support and hard work with the Trust over the past years. The Board wished him well for the future.

Ms Hallett summarised the proposed directorate restructure which aligned emergency services in one directorate and elective services in another. The four directorates would reduce to three, with Children, Women and Sexual Health Directorate remaining unchanged.

Ms Hallett highlighted the impact the Financial Recovery Plan (FRP) was now having on individual staff members. The working lives of many were being affected and opportunities for re-deployment for those whose posts were being lost were diminishing. Clearly this was causing some anxiety within the hospital.

## **7.0 Business Planning & Performance Management**

### **7.1 KPMG Review Report**

Caroline Clarke, Director of Finance & Information presented the draft KPMG report to the Board. The final version was still awaited. Ms Clarke reported that

KPMG had met with Monitor last Friday ahead of the Trust's meeting with Monitor on Monday 27 November. Monitor would take their findings and views from the KPMG report to their own Board later this week.

Ms Clarke explained the report and the Board agreed that KPMG appeared to have tested all assumptions and that the report was a reasonable assessment of the current Trust position.

Ms Clarke explained that Monitor were concerned about the Trust's usage of the overdraft facility which was higher than any other Foundation Trust. However this usage was now decreasing and this plan had been presented to Monitor this week.

Ian Luder, Non Executive Director, emphasised that the figures showed that the Trust's borrowing was vastly improving.

Eric Sorensen, Non Executive Director, commented that the report was generally good and had not highlighted any additional causes for concern. It was emphasised however that the process recommendations within the report must be incorporated as soon as possible.

## **7.2 Month 7, Finance and Performance Report**

Caroline Clarke presented the month 7 finance and performance report and explained that November should be a turning point for the Trust. Ms Clarke reported an improved forecast position of the FRP and also that two bids for project funding had been successful.

Ms Clarke reported to the Board that a solution had been found to ensure that the Trust could receive funding from Connecting for Health for PACS (Picture Archiving & Communication System). This solution would require a renegotiation of the current Trust loan.

Ms Clarke summarised the Balance Scorecard report which was now in its second iteration. Ms Clarke explained that page 4, presentation of targets, would be expanded further in future. Ian Luder asked whether the four patients waiting longer than 22 weeks meant that this target was a risk. Tracey Fletcher, Director of Planning & Service Development, explained that the Inpatient Target was not a current risk and that good operational processes were in place to prevent breaches of this target.

Nancy Hallett reported to the Board that the target most at risk at present was the Cancer 62 Day Target. Ms Hallett summarised the position in North East London on the 62 day cancer target where other Trusts were also struggling. Ms Hallett reported that a fortnightly cancer action meeting had now been set up and current focus was on the Urology service and setting up a one-stop model for the

Haematuria clinic. This was discussed and it was agreed that a report and action plan for avoidance of cancer breaches in 2007/08 would be brought to the Board in January.

Ian Luder highlighted that the risk of non-achievement of the cancer target was very high. Clearly, all measures would be taken to ensure there were no further breaches. However, given this it was important that the Trust did not breach any other key targets and the use of additional resource to do so would be considered. The Board accepted that the A&E target was also at risk currently and agreed that additional resources be allocated to ensure A&E did not breach the 98% four hour target.

### **7.3 Financial Recovery Plan Update and Key Issues**

Tracey Fletcher, Director of Planning & Service Development presented an update paper on the FRP position as at 27 November, as reported to Monitor. Ms Fletcher highlighted that some projects had not yet been closed but were in the process of being completed. Such projects were identified as running projects in the table on page 1 of the report and were not defined as closed off until fully completed. Ms Fletcher also reported that a number of new projects had been introduced with consultation documents being issued this week. The FRP team was now also concentrating on identifying savings for 2007/08.

Jessica Crowe, Non Executive Director, enquired about the Maternity Length of Stay Review Project and how the Trust compared to other maternity units. Guy Young, Director Nursing & Quality, explained that the Trust's length of stay for maternity episodes appeared to be at variance with other similar trusts. The Trust was now working towards increasing the percentage of women transferred home directly from the Delivery Suite which would directly reduce length of stay and increase efficiency.

### **7.4 Feedback from Monitor Meeting 27th November and preparation for 21 December meeting**

Eric Sorensen, Non Executive Director summarised the Monitor meeting attended earlier this week. Debtor/Creditor balance issues had been highlighted during the meeting, as was progress with the Financial Recovery Programme.

The Board reviewed the reasons why the Trust was in the financial position it was in now and identified that the following were factors:

- Emergency driven hospital – much more so than any other Foundation Trust and therefore particularly affected by tariff changes
- Historically the cash position has always been a problem for the Trust and liquidity was an issue at authorisation

- Concentration of management resource on sorting out data quality and reporting issues

### **7.5 Informatics Related Issues**

This item was recorded under reserved business.

### **7.6 PACS Business**

This item was recorded under reserved business.

### **7.7 Variation to Perinatal Business Case**

This item was recorded under reserved business.

### **8.0 Any Other Business**

Andy Windross, as departing Chairman, thanked the Board and wished the Trust and the Board well for the future.

### **9.0 Dates of forthcoming meetings**

Wednesday 20 December

Wednesday 24 January

Wednesday 28 February