

**MINUTES OF THE BOARD OF DIRECTORS MEETING  
HELD ON WEDNESDAY 5<sup>th</sup> October 2005**

<b>Present:</b>	Andy Windross	Chairman
	Nancy Hallett	Chief Executive
	Pauline Brown	Director of Corporate Development
	Caroline Clarke	Director of Finance & Information
	John Coakley	Medical Director
	Tracey Fletcher	Director of Planning & Service Development
	Ian Luder	Non Executive Director
	Eric Sorensen	Non Executive Director
	Kate Costeloe	Non Executive Director
	Jessica Crowe	Non Executive Director
	Guy Young	Director of Nursing & Quality
	Andrew Panniker	Director of Environment.
<b>Minutes:</b>	Asha Kaur	Minutes Secretary
<b>In attendance:</b>	Kim Hutchings	Board Secretary

**1.0 CHAIRMAN'S WELCOME AND INTRODUCTION**

Mr. Windross welcomed Mr. Sorensen as a now ratified non Executive Director. The Council of Governors ratified his appointment for three years on 14/09/2005.

**2.0 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Irving Mellor, Non Executive Director.

**3.0 DECLARATIONS OF INTERESTS REGARDING ITEMS ON THE AGENDA**

None noted.

**4.0 MINUTES OF THE PREVIOUS MEETING AND MATTERS ARISING**

The minutes of the meeting held on 7<sup>th</sup> September 2005 were agreed and signed as a true record of the meeting, save that an 'Action' point ought to have been included at the end of Point 7.4 (paragraph 3). It was agreed that this would be amended.

Mr Luder asked for the minutes to be amended to note that he had returned to the room after item 7.2.

## **5.0 CHAIRMAN'S REPORT**

### **5.1 Board Appraisal**

Mr. Windross again requested the required appraisal documentation from Board members.

## **6.0 CHIEF EXECUTIVE'S REPORT**

### **6.1 Amended Programme for Board Away Day (02/11/2005)**

This was discussed under item 10.2.

### **6.2 Improving Working Lives**

Ms. Hallett formally advised the Board that the Trust had been awarded 'Practice Plus' accreditation.

### **6.3 VIP Visits**

Ms. Hallett advised the Board that the Trust had hosted some recent high level visits. Guests to the Hospital included Sir Liam Donaldson, Chief Medical Officer, and Sue Osbourne of the National Patient Safety Agency (NPSA).

### **6.4 Employment Tribunal**

Discussed under reserved business.

## **7.0 HOSPITAL SECRETARY'S REPORT**

Pauline Brown, Hospital Secretary, reported on the following:

### **7.1 Report from Annual Members Meeting**

Approximately 250 members were present at this meeting held on 14<sup>th</sup> September 2005.

A newsletter which will summarise the issues raised in this meeting along with a summary of the outcomes of the three Members Forums preceding the AMM on the topics of:

- Communications
- Hygiene, and
- No Smoking

is currently being distributed.

The meeting in general went well. Further consideration will be given to an alternative venue for forthcoming meetings.

## **7.2 Amended Corporate Meetings Schedule 2006/07**

Mrs Brown advised the Board that the required amendments had now been made and the schedule is now correct.

Ms. Crowe reminded the Board members that she has involvement with the Audit Commission. Therefore, to avoid a possible conflict of interest, she wished to be removed from the membership of the Audit Committee.

## **8.0 Business Planning & Performance Management**

### **8.1 Finance Report**

The Trust's financial position at the end of August 2005 showed a financial worsening of £93,000. Ms Clarke advised the Board that a risk rating of 2 had been allocated to the Trust by Monitor. Actions were discussed in respect of the corporate recovery plan. Ms Clarke advised the Board that agency and bank staff usage was lower in comparison to previous months, in part due to the price reduction gained through the London Agency Project. However the full effects of the recovery plan could not be assessed until the September figures were produced.

Mr. Young also advised the Board that systems regarding the allocation of staff to various departments had now been reviewed. The new system now required senior management to authorise bank/agency staff temporary cover. Any potential risks as regards to staff cover were being monitored via the 'Adverse Incident Reporting' system.

Ms Clarke reported that a total reserve (£300,000) had been allocated to the Agenda for Change project (included back pay and arrears).

### **8.2 Performance and Data Quality Report**

Part of this section was discussed under reserved business.

Ms. Fletcher reported that the Trust was doing well with A&E performance and this is predicted as sustainable. Four waiting time breaches had been reported within outpatient services which was partly as a consequence of EPR recording issues, although progress was being made in respect of staff training.

She reported that waiting list times were on the whole reducing in number and cancer reporting systems were in place.

Clinical data sets had been updated and now contain both in and out-patients information. This information has provided the baseline from which the statutory required reports may be produced. This database is now updated each week and supports the Trust's contract requirements with PCTs.

Work was continuing within the area of clinical coding. All consultants at the hospital have now been advised of the requirements and support for this is present. Contract reports would be circulated to members of the Board as soon as possible after this meeting.

### **8.3 Human Resources Performance Report**

Mr. Panniker advised the Board that the HR Directorate had recently merged with the Environment Directorate.

He highlighted the sickness report and advised that costs associated with lost work days due to staff sickness and other leave amounted to £2 million. This figure took into account the costs associated with agency and bank cover.

As stated above by Ms Hallett, the Trust had been accredited with 'Practice Plus' accreditation, as part of the work undertaken by the 'Improving Working Lives' initiative. A further accreditation entitled 'Model Employer' may be applied for, subject to further discussions and agreement.

Mr. Panniker advised that the Agenda for Change (AFC) project had been a substantial change which had required the hard work and focus of a number of staff. 23 requests for review had been received and some group reviews (pathology, medical electronics and works). It is hoped that these reviews will be complete by the end of November 2005.

He also reported that the Trust's Occupational Health Department will be reviewed, with a new pilot to be taken forward in due course. He advised that the Trust Nursery had done very well over the last financial year, with continued good budget management.

Mr. Panniker advised that the focus on the actual costs expenditure within each directorate is being made clearer. This in turn has led to firm action points being taken forward in regards to budget control and proposed recovery. The Board welcomed this approach

Ms Clarke advised the Board that HR financial reports will form part of the Trust's financial report from December 2005.

### **8.4 Race Equality Scheme (RES)**

Mrs. Brown advised the Board on the Trust's statutory and specific duties in respect of the RES. She reported that the action plan has a three year timescale. An equality training package would be implemented over the next two years as this was a legal requirement, and the Equality Steering Group would be publicised further at the forthcoming Celebration of Diversity Day in November 2005.

The Board approved the action plan.

## **9.0 Governance & Risk Management**

### **9.1 Information Governance**

Dr. Coakley, as Caldicott Guardian, presented the Information Governance report.

He advised the members that requests for information under the Freedom of Information Act were increasing but it appeared that most of these were for commercial purposes. Mr Luder suggested that the costs associated with compiling with DPA or FOI requests ought to be highlighted within the Trust's Annual Report.

Dr. Coakley advised the Board that the Trust's information governance compliance (at 72%) against the standards was favourable in comparison with neighbouring Trusts.

Dr. Coakley explained that a 'Self Assessment Tool Kit', which was a nationally used system in use. The Trust is locally audited on the use of this system. Evidence to support the 25 core standards is a requirement. A plan to ensure that the Trust gathers the required evidence in line with the requirements will be taken forward by Dr. Coakley.

The Board noted the report and Dr Coakley agreed to report back to the Board in March 2006.

## **9.2 Clinical Governance**

### **9.2.1 Draft Annual Health Check for signature**

Mr. Young reported that the draft declaration was not yet ready for signature due to some information transfer issues at the Health Care Commission. However he assured the Board that the Trust was compliant with the Health Care Commission requirements.

The Board agreed to Chairman's action signing the declaration.

### **9.2.2 Child Protection Report**

Mr. Young further stated that the Trust's Child Protection self assessment questionnaire had been completed, and advised that the Trust had a robust and workable Child Protection Procedure.

### **9.2.3 Serious Untoward Incident Update**

There had been no changes since the previous report. SUI reports were noted.

## **10.0 ANY OTHER BUSINESS**

### **10.1 Board Secretary**

Ms Hallett formally thanked Kim Hutchings for her support and work as Board Secretary.

### **10.2 Away Day**

Details of the programme for the Board Away Day were noted.

### **10.3 Commissioning a Patient Led NHS**

Ms. Hallett advised the Board that she had compiled a response to this document. Ms Hallett took the Board members through her draft response, and invited comments.

The Board agreed to her response being submitted, following the amendments discussed, to North East London Strategic Health Authority.

### **11. DATE OF NEXT MEETING**

- Wednesday 2<sup>nd</sup> November 2005 (Awayday) Canonbury Academy
- Wednesday 7<sup>th</sup> December 2005