SUMMARY MINUTES OF THE BOARD OF DIRECTORS MEETING HELD ON THURSDAY, 22ND JANUARY 2009 IN THE BOARDROOM LEVEL D

Present:
Mrs M Oldfield, Chairman
Prof. W Al-Wali, Chief of Division for Medicine/Medical Director/Director of Infection Prevention and Control
Mrs J Bird, Chief of Quality & Standards/Chief Nurse
Mr R J G Bloomer, Non Executive Director
Mr A Hercock, Non Executive Director
Mrs J Hickton, Non Executive Director
Mr B James, Chief Executive
Mr M Lowry, Chief Financial Officer
Mr N MacDonald, Non Executive Director (up to minute 2009/06)
Mr M Pinkerton, Chief of Business Development
Mrs J Roberts, DPSSM for Clinical Support Services (representing Chief of Division from minute 2009/07v to 2009/13v)
Mrs K Rogers, Company Secretary
Mr N Ruff, Non-executive Director
Dr M Withers, Chief of Division for Clinical Support Services (up to minute 2009/06iii)
Mrs J Wilson, Chief Operating Officer

Apologies:
None

In attendance:
Mr R Abdul-Karim, Director of Informatics (minute 2009/05i only)
Ms L Horley, Ubiquity Healthcare Limited (minute 2009/05i only)
Mr D Kwo, Managing Director, Ubiquity Healthcare Limited (minute 2009/05i only)
Dr J Okwera, Clinical Director (minute 2009/05i only)
Miss D Stewart, General Management Assistant

2009/01 ANNOUNCEMENTS

i. The Draft Carbon Management Plan (agenda item 12i) was withdrawn due to the release of new national guidance, which would require the Trust’s Plan to be reviewed and resubmitted to the Board of Directors in due course.

ii. The Chairman confirmed that the Board Strategy/Briefing sessions would continue as planned for February and March 2009. From April 2009 any items would be incorporated into the Board of Directors agenda.

iii. The Chairman announced that at the February 2009 Board meeting the lunchtime refreshments would be a selection from the menu of the food to be provided to patients on that day. The catering department would not be informed that the food was intended for Board in order that the quality and presentation of the food was a true reflection of that being served to patients.
iv. The Chairman and Chief Executive had attended the Chairman and Chief Executive Conference on 21st January 2009. There had been a number of presentations including one from the Chief Executive of the NHS and Lord Carter of Cole the new Chair of the Competition and Co-operation Board. Copies of the presentation material had been requested, and would be circulated to members.

2009/02 DECLARATIONS OF INTERESTS

There were no declarations of interest.

2009/03 MINUTES OF THE PREVIOUS MEETING

The minutes of the previous meeting held on Thursday, 18th December 2008, having been previously circulated were AGREED as a correct record, subject to a number of amendments.

2009/04 MATTERS ARISING

Matters arising from the previous meeting were discussed.

2009/05 STRATEGIC MONITORING AND IMPLEMENTATION

i. EPR Business Case

The Board of Directors welcomed to the meeting the Director of Informatics, Dr Okwera, Clinical Director and Ms Horley and Mr Kwo from Ubiquity Healthcare Limited to discuss the full business case for the Electronic Patient Record (EPR) System.

The business case as presented now addressed and/or resolved any outstanding issues particularly those raised by the Non-executive Directors. The procurement and selection process had been assessed both internally and externally through a robust system. Plans for deployment and engagement within the Trust had been supported by front line staff in order to transform the delivery of care and improve the patient experience.

The Chief Financial Officer confirmed that Internal Audit had indicated that the process undertaken by the Trust had been robust and wished to use some areas as examples of best practice.

Colleagues who had been directly involved in the process and site visits outlined their experiences of the technology.

The Board of Directors ENDORSED the recommendation that the Trust implement an Electronic Patient Record system.

The Chairman on behalf of the Board thanked the Director of IT and colleagues involved in the development and assessment process for ensuring that the Trust achieved a satisfactory conclusion to the procurement of the EPR.
ii. Monthly Update

The Chief Executive presented the monthly strategy report which had been circulated prior to the meeting.

iii. Service Development Strategy 2

The Chief Executive indicated that the draft SDS2 would be finalised by the end of January 2009. It would be circulated to members for consideration prior to formal approval being sought at the February 2009 meeting.

iv. Business Development Quarterly Report

The Board of Directors RECEIVED and NOTED the Business Development quarterly report for the period October to December 2008.

v. Operating Framework

The Board of Directors RECEIVED and NOTED the report which outlined the content of the NHS Operating Framework which was published in December 2008.

The framework had the following key elements:

- The health and service priorities for 2009/10
- A system designed to deliver quality
- The financial regime
- The business processes

The framework continued to use the three tier vital signs and the five national must dos remained the same as last year:

- Health care associated infections
- Waiting times
- Maintaining health and reducing health inequalities
- Experience, satisfaction and engagement
- Emergency preparedness.

vi. Business Planning - Development of 2009/10 Corporate Objectives

The Board of Directors RECEIVED the report which outlined the broad areas for consideration as part of the 2009/10 Corporate Objectives.

The corporate objectives would be further discussed at the various meetings in February prior to formal sign off at the March 2009 Board of Directors meeting.

vii. SUDP

The Chief Operating Officer provided an update on the Site Utilisation Development Plan in the form of a presentation.
The presentation outlined the phases of the plan and the next steps in relation to:

- appointment of ProCure 21 Principal Supply Chain Partners (PSCP) by 3rd February 2009
- appointment of a Project Director on 5th February 2009
- appointment of an independent cost advisor by March 2009
- reviewing the site utilisation development plan by 31st March 2009
- Preparation of individual business cases for the first ProCure 21 schemes by 30th June 2009
- Learning the lessons from other ProCure 21 sites
- Commencing training for trust staff in February 2009
- Individual project teams in place by 31st March 2009
- Business case approval for schemes by September 2009
- Commencement on site by October 2009

The Board of Directors NOTED the current position and action being taken in relation to addressing the findings of the Internal Audit review and the recommendations from the Audit and Assurance Committee.

2009/06 PERFORMANCE

i. Monthly Report

The Board of Directors RECEIVED and NOTED the finance and performance reports and any specific action being taken in relation to any of the targets.

ii. Update on A&E Position

Members were provided with an update on the position with regard to A&E.

Members were informed that three quarters of hospitals were facing difficulties in achieving the 98% target.

The Trust and NHS Rotherham had jointly commissioned an external review of the services.

The Trust continued to implement its action plan and would take forward the comments from the external review, however the position remained challenging.

Members NOTED the current position and action being taken.

iii. Going Further on Cancer Waits

The Board of Directors RECEIVED for information the report which would act as a reference document to highlight the changes in relation to the cancer targets and the measures to be put into place to monitor performance.
RISK, HEALTH/SAFETY & GOVERNANCE

i. BAF

The Company Secretary confirmed that the Governance Committees continued to scrutinise the controls and review the risks on the BAF. In month there had been recommendations to the Audit and Assurance Committee from the Governance Committees to remove a number of BAF risks. These recommendations had been approved, with the risks now to be monitored and performance managed by other committees.

ii. Health and Safety Quarterly Report

The Board of Directors RECEIVED the Health and Safety quarterly report for the period October to December 2008.

Regulatory

iii. Registration with Care Quality Commission – Self Certification

Tabled at the meeting was a report which provided information to support completion of the application to register with the Care Quality Commission in relation to Healthcare Associated Infection as discussed at the December 2008 meeting.

The Trust had received the formal inspection report from the Healthcare Commission following their unannounced visit to look at compliance against the hygiene code. This formal report had identified two minor breaches of the hygiene code in relation to:

- Duty 2 (sub duty d) – ensuring relevant staff, contractors and other persons whose normal duties are directly or indirectly concerned with patient care receive suitable and sufficient training, information and supervision on the measures required to prevent and control risks of infection.
- Duty 4 (sub duty c) – all parts of the premises in which it provides healthcare are suitable for the purpose, kept clean and maintained in good physical care and condition

The Chief of Division for Medicine/Medical Director/Director of Infection Prevention and Control and Chief Operating Officer would be required to develop an action plan to support the application to the Care Quality Commission by the end of January 2009 in relation to the two breaches.

The Chairman and Non-executives indicated that the Trust’s ability to provide robust internal assurance needed to be stronger and it was disappointing that lessons had not been learnt from other issues in relation to the recording of mandatory training.

The Board of Directors NOTED the report and gave their approval for the Chief of Quality and Standards/Chief Nurse to electronically submit the
registration form following formal approval from the Chief Executive in relation to the action plan. In relation to further action the Clinical Effectiveness department and Internal Audit would be charged with auditing the robustness of the mandatory training process and the Hospital Management Board would performance manage the action plan.

iv. Monitor Compliance

The Board of Directors RECEIVED the quarterly Monitor governance compliance document, with the Company Secretary reminding members of their regulatory obligations in approving the self certification and therefore the importance of debating the declaration and feeling assured of compliance against targets.

The Board AGREED the recommendation that the Trust sign declaration 2 due to the thrombolysis target not being achieved and the pressures in A&E. Members AGREED that for completeness the outcome of the unannounced visit by the Healthcare Commission to review the Hygiene Code should be documented as part of the declaration.

v. FT FReM 2009/10

The Board of Directors RECEIVED the report which summarised the changes made to the balance sheet as at 1st April 2008 as part of the transition to complying with International Financial Reporting Standards (IFRS). Monitor had requested that all Foundation Trusts submit their unaudited submission by 31st December 2008.

The Board confirmed their satisfaction, that to the best of its knowledge, the Trust’s balance sheet as at 1st April 2008 had been materially restated in accordance with the requirements of the NHS Foundation Trust Financial Reporting Manual 2009/10.

2009/08 FOR APPROVAL / TO NOTE

i. Draft Carbon Management Plan

As previously indicated this item had been withdrawn due to the release of further information from the Department of Health. The plan would be re-submitted in due course.

2009/10 ESCALATION OF ISSUES

i. HMB

There were no items escalated from the Hospital Management Board.

ii. Audit and Assurance Committee

The issue of mandatory training and the site utilisation development plan had been escalated by Audit and Assurance Committee and had been covered in earlier items.
2009/11  GOVERNOR ISSUES

The next Council of Governors meeting would be held on Wednesday, 28th January 2009 and would be chaired by Mr Hercock, Non-executive Director and Vice Chair of the Council of Governors, in the absence of the Chairman.

The Chairman requested that any reports should be concise to allow the opportunity for discussion. Information on the position with regards to A&E and the outcome of the unannounced HCC visit should be reported to the Governors.

2009/12  LIBRARY INFORMATION ITEMS

The Board of Directors RECEIVED a number of items for information.

2009/13  ANY OTHER BUSINESS

i.  Email from a member of staff

   The Chairman read out an e-mail which had been received from a member of staff complimenting the Trust on the care which had been provided to a close relative and family

iii.  Burdett Trust

   It was NOTED that the Burdett Trust would be attending the February 2009 Board of Directors meeting.

iv.  NHS Rotherham Strategic Plan (Tabled)

   Tabled at the meeting was a copy of NHS Rotherham’s Strategic Plan Summary 2008 -2012 “Better Health, Better Lives”.

2009/14  DATE OF NEXT MEETING

The next meeting of the Board of Directors would be held on Thursday, 26th February 2009 commencing at 10.30am in the Boardroom level D.