

NHS Foundation Trust

Minutes of the meeting of Trust Board on Wednesday 24th July 2013

Present

Baroness Tessa Blackstone Chairman Mr Jan Filochowski Chief Executive Ms Mary MacLeod Non-Executive Director Ms Yvonne Brown Non-Executive Director Mr John Ripley Non-Executive Director Mr David Lomas Non-Executive Director Mr Charles Tilley Non-Executive Director **Prof Rosalind Smyth** Non-Executive Director

Mr Robert Burns Director of Planning and Information

Professor Martin Elliott Co-Medical Director

Mrs Liz Morgan Chief Nurse and Families' Champion

Dr Barbara Buckley Co-Medical Director
Mrs Claire Newton Chief Finance Officer

Mr Ali Mohammed Director of Human Resources and OD

Ms Rachel Williams Chief Operating Officer

In attendance

Dr Anna Ferrant Company Secretary

Ms Victoria Goddard Trust Board Administrator (minutes)

Dr Melanie Hiorns Divisional Director, MDTS
Dr Elizabeth Jackson Divisional Director, Surgery

^{*}Denotes a person who was present for part of the meeting

55	Apologies for absence
55.1	No apologies were received.
56	Declarations of interest
56.1	No declarations of interest were received.
57	Minutes of previous meetings
57.1	It was noted that Professor Rosalind Smyth, Non Executive Director and Mr David Lomas were present at both the Trust Board meeting on 24 th May 2013 and 26 th June 2013.
57.2	The minutes of both meetings were approved subject to the above amendment.
58	Action checklist
58.1	Minute 28.3: Mrs Claire Newton, Chief Finance Officer reported that all off payroll individuals had been reviewed and the correct paperwork was in place. She confirmed that she did not believe there to be a risk to the organisation. She added that a process was in place to review new appointments.

59	Chief Executive's Report
59.1	The Chief Executive reported that GOSH won a Patient Safety Award for Patient Safety in Paediatrics. The Board congratulated those involved.
59.2	Mr Filochowski reported that a letter had been sent to all participants from the Listening Event including a list of actions which had arisen from the event.
59.3	It was confirmed that the Trust had been allocation £1.7m of Clinical Research funding from the Life Course Research Network (LCRN) which was a 20% increase on the previous year.
59.4	It was reported that a letter had been received from the newly in post Chief Inspector of Hospitals at CQC. It was confirmed that GOSH would not be inspected as part of the first round in 2013. Dr Buckley suggested that there should be Trust wide agreement on managing staff who would take part in inspections of other hospitals as they could last 10 days.
59.5	The Board noted that the Senior Information Risk Owner (SIRO) was now Mr Robert Burns, Director of Planning and Information.
59.6	The Board noted the verbal report.
60	Trust Board Terms of Reference and Work Plan
60.1	The Company Secretary presented the reviewed Trust Board Terms of Reference and workplan.
60.2	Action: It was agreed that the workplan would be reformatted to fit onto one page.
60.3	Action: Mr Charles Tilley, Non-Executive Director suggested that the importance of learning from mistakes should be emphasised. It was agreed that he would provide further comments outside the meeting.
60.4	Professor Elliott suggested that it was important to ensure that a Non Executive Director with a medical background was part of the Board to ensure a clinical challenge.
60.5	The Board approved the documents subject to the above amendments.
61	Members' Council Update June 2013
61.1	The Board noted the update.
62	Offering more elective activity outside traditional hours
62.1	Mr Robert Burns, Director of Planning and Information reported that a detailed look at extending elective working outside traditional hours had focused on theatres, MRI scanners and Outpatients as they were areas with excess demand.
62.2	Mr Burns confirmed that the Trust was keen to expand these services and constraints were around workforce and financial issues.

64	Update on response to the report of the public enquiry into Mid Staffordshire NHS Foundation Trust
	The Board noted the report.
63.563.6	Professor Rosalind Smyth, Non-Executive Director cautioned the difficulty of attributing changes in results to the completion of the Morgan Stanley Clinical Building alone.
63.4	Action: Mrs Mary MacLeod, Non-Executive Director queried whether there had been a change in the number of crash calls outside of ICU. Mr Burns said that he believed there had been a small reduction. It was agreed that this would be confirmed at the next meeting.
63.3	Action: The Board asked the Chief Executive to develop a list of benefits which were rated as red due to timing which would be considered under matters arising at the next meeting.
63.2	Mr John Ripley, Non-Executive Director stressed the importance of measuring baselines accurately. He asked for a steer on the number of benefits which had not yet been achieved due to timescales.
63.1	Mr Robert Burns, Director of Planning and Information reported that the paper had been presented to GOSHCC Special Trustees on 23 rd July.
63	Assessment of 2A benefits realisation
62.9	Action: A paper to be considered at the November Trust Board meeting to consider how further progress could be made in implementing more evening and Saturday working.
62.8	The Trust Board agreed that work would continue to begin the processes set out in the paper in relation to the services which had been deemed as high demand.
62.7	Baroness Blackstone, Chair thanked those who had worked on the paper.
62.6	Non-Executive Directors stressed that capacity must be increased as fewer Trusts carried out particular procedures and that this increase took time to achieve.
62.5	The Chief Executive stressed that executives and others had taken part in in-depth discussions to ensure that all feasible options had been considered. Mr Filochowski added that there was not additional demand in all areas and that work had taken place to ensure clarity around areas of high demand.
62.4	Mr Charles Tilley, Non Executive Director stressed the importance of having a vision and developing an action plan to achieve that. He added that the Trust had extremely expensive assets and it was vital to ensure that they were being used efficiently.
62.3	Action: Non Executive Directors expressed some concern that the paper presented a slightly negative point of view and suggested that it would be helpful to engage with hospitals who already offered activity outside traditional hours.

64.1	Professor Martin Elliott, Co-Medical Director confirmed that the Trust was drawing together the themes of the report. He added that a number of recommendations had implications for Boards and health as a whole.
64.2	The Board acknowledged the importance of working with consultants as team managers to ensure that Doctors were encouraged to speak up when mistakes had been made.
64.3	Action: It was agreed that the Trust Board would receive an update on actions which had been taken as a result of the Francis Report. It was agreed that this would also be considered at Audit and Clinical Governance Committees.
64.4	The Board thanked Ms Sarah Dobbing, Divisional Manager of Neurosciences for her work in this area.
64.5	The Board approved the proposed action plan and response to recommendations and noted the update.
65	Summary of performance for the period
65.1	Targets and Indicators
65.2	The Board congratulated the MDTS and CCCR division on their increased rate of discharge summary completeness.
65.3	Finance and Activity
65.4	Mrs Claire Newton, Chief Finance Officer reported that activity growth and clinical income was at a higher level than at the same point in 2012/13 although was still below plan.
65.5	Mrs Newton added that there were still significant gaps in risk adjusted CRES values and that an independent consultant was looking at the Trust's CRES plans overall.
65.6	Quality and Safety
65.7	Professor Martin Elliott, Co-Medical Director reported that there had been no statistical change in the number of incidents despite an increase in activity. He added that the number of complaints remained low when compared with other Trusts.
65.8	The Board noted the update.
66	Patient Experience and PALS Annual Report 2012/13
66.1	This item was deferred to the next meeting.
67	Annual Health and Safety Report
67.1	This item was deferred to the next meeting.
68	Quarter 1 Monitor Return

68.1	The Board approved the governance statement for submission to Monitor.
69	2013 Annual Infection Prevention and Control Report
69.1	Dr John Hartley, Director of Infection Prevention and Control reported that responsibility for surgical site infection prevention and surveillance (SSIP&S) had been handed back to divisions as funding had ceased. He added that this had been slow to establish.
69.2	Dr Hartley said that following the resignation of a practice educator in July 2012 there had been significant restraints to the activities of the team and it had not been possible to undertake all planned activities.
69.3	It was confirmed that the Trust did not achieve its MRSA target as 3 cases were reported against a target of 0. Dr Hartley confirmed that there was a low rate of serious infection overall at 6%.
69.4	Action: Mrs Liz Morgan, Chief Nurse stressed that the additional post would be extremely valuable to the team and agreed to discuss funding with the Director of Planning and Information.
69.5	The Board approved the report for public access and noted its content.
70	Summary reports from Board committees
70.1	Audit Committee June 2012
70.1	Audit Committee June 2013
70.1	The Board noted the report.
70.2	The Board noted the report.
70.2 70.3	The Board noted the report. Clinical Governance Committee June 2013
70.2 70.3 70.4	The Board noted the report. Clinical Governance Committee June 2013 The Board noted the report.
70.2 70.3 70.4 70.5	The Board noted the report. Clinical Governance Committee June 2013 The Board noted the report. Finance and Investment Committee May 2013
70.2 70.3 70.4 70.5 70.6	The Board noted the report. Clinical Governance Committee June 2013 The Board noted the report. Finance and Investment Committee May 2013 The Board noted the report.
70.2 70.3 70.4 70.5 70.6	The Board noted the report. Clinical Governance Committee June 2013 The Board noted the report. Finance and Investment Committee May 2013 The Board noted the report. Any Other Business
70.2 70.3 70.4 70.5 70.6 71	The Board noted the report. Clinical Governance Committee June 2013 The Board noted the report. Finance and Investment Committee May 2013 The Board noted the report. Any Other Business There were no other items of business.