

**Minutes of the meeting of Trust Board on  
 25<sup>th</sup> March 2015**

**Present**

Baroness Tessa Blackstone	Chairman
Dr Peter Steer	Chief Executive
Ms Mary MacLeod	Non-Executive Director
Ms Yvonne Brown	Non-Executive Director
Mr John Ripley	Non-Executive Director
Professor Rosalind Smyth	Non-Executive Director
Mr David Lomas	Non-Executive Director
Mr Charles Tilley*	Non-Executive Director
Dr Catherine Cale	Interim Co-Medical Director
Professor Martin Elliott	Co-Medical Director
Mr Ali Mohammed	Director of Human Resources and OD
Mrs Liz Morgan	Chief Nurse and Families' Champion
Mrs Claire Newton	Chief Finance Officer
Ms Rachel Williams	Chief Operating Officer

**In attendance**

Mr Robert Burns	Director of Planning and Information
Mr Matthew Tulley	Director of Redevelopment
Ms Cymbeline Moore	Director of Communications
Dr John Hartley*	Director of Infection Prevention and Control
Dr Anna Ferrant	Company Secretary
Ms Victoria Goddard	Trust Board Administrator (minutes)
1 member of public	

*\*Denotes a person who was present for part of the meeting*

<b>205</b>	<b>Apologies for absence</b>
205.1	No apologies for absence were received.
<b>206</b>	<b>Minutes of Meeting held on 28th January 2015</b>
206.1	The minutes of the meeting of 28 <sup>th</sup> January 2015 were <b>approved</b> .
<b>207</b>	<b>Matters Arising/ Action Checklist</b>
207.1	The actions taken were <b>noted</b> .
<b>208</b>	<b>Chief Executive Report</b>
208.1	Dr Peter Steer, Chief Executive gave an update on the following items: <ul style="list-style-type: none"> <li>• CQC inspection: Dr Steer said that a lot of work was being done in preparation for the CQC inspection in April, including responding to large data requests and conducting mock inspections in clinical areas. Dr Steer said that there had been positive feedback from staff involved.</li> <li>• Information Technology: Work is being led by the Chief Operating Officer and another iteration of the business plan will be considered by the Trust</li> </ul>

	<p>Board in June 2015. The importance of this work to the Trust was emphasised.</p> <ul style="list-style-type: none"> <li>• Centre for Research into Rare Diseases in Children (CRRDC): It was reported that representatives of the Donor had visited GOSH on 24<sup>th</sup> March. They had met with the Chief Executive and visited the site following planning approval which had been granted by Camden Council on 2<sup>nd</sup> March 2015.</li> <li>• Always Values launch: The well-attended launch of the Always Values took place on 24<sup>th</sup> March. Speakers included members of staff and Claudia Fisher, Lead Councillor. Dr Steer said that there had been significant investment from leadership in embedding the Always Values into operations and HR processes.</li> <li>• Staff open forums: Dr Steer told the Board that he had led open forum sessions which were open to all staff and had been well attended. Dr Steer had also attended a positive GMSC meeting at which all attendees had demonstrated good levels of engagement.</li> </ul>
208.2	Ms Rachel Williams, Chief Operating Officer said that the digital strategy had been discussed at the Trust Board strategy day in February and it had been agreed that the next steps would test some current assumptions underlying the transformation project. Ms Williams said that the Board discussed whether the digital strategy should be implemented through a phased approach or at one time. It was noted that the proposed staffing structure would be brought to Board for approval prior to recruitment starting.
208.3	Baroness Blackstone, Chairman told the Board that she and Matthew Tulley would be meeting with Stanton Williams, the architects involved in the CRRDC project in the coming days following the approval of planning permission by Camden Council.
208.4	The Board <b>noted</b> the update.
<b>209</b>	<b>Board Assurance Framework Summary</b>
209.1	Mr Robert Burns, Director of Planning and Information presented the Board Assurance Framework summary and took the Board through the analysis of the risk of: “all patients at all times receive safe medical cover”.
209.2	<b>Action:</b> The Board discussed whether a likelihood score of four was appropriate for this risk and agreed that the score should be reduced to three.
209.3	Mr Charles Tilley, Non-Executive Director expressed some concern that the acceptance score for the risk ‘provide sufficient capacity to meet existing and future demands’ was 12. Mr Burns said that this was as a result of the current excess demand across services. He said it was unlikely that a plan could be put in place to create capacity to meet this demand.
209.4	Mr John Ripley, Non-Executive Director emphasised that providing out of hours medical cover and having capacity to treat the patients who required GOSH input was key and said that it was important for the Trust to push itself in these areas.
209.5	Mr Tilley emphasised the importance of good project management to the success of the digital transformation programme.
209.6	The Board <b>noted</b> the update.

<b>210</b>	<b>Nurse Revalidation</b>
210.1	Mrs Liz Morgan, Chief Nurse said from 1 <sup>st</sup> April 2015, the Nursing and Midwifery Council (NMC) would require nurses to undergo a revalidation process. She added that it was an individual's professional responsibility to ensure that they fulfilled the areas required however the Trust was required to have robust systems in place to monitor completion.
210.2	Ms Yvonne Brown, Non-Executive Director asked for assurance that the Trust had sufficiently robust systems in place. Mrs Morgan said the nurse re-registration dates were already monitored and the Trust was able to ensure that no one was able to work as a registered nurse with a lapsed registration. She said that the monitoring of revalidation would build on that system.
210.3	The Board <b>noted</b> the update.
<b>211</b>	<b>Quality and Safety and Targets and Activity Summary Report</b>
211.1	Professor Martin Elliott, Co-Medical Director said that GOSH continued to have no instances of MRSA and although there had been an increase in the number of cases of MSSA, it was noted that this did not become a problem unless it became resistant. Professor Elliott told the Board that this continued to be closely monitored.
211.2	Mr John Ripley, Non-Executive Director noted that a number of indicators continued to be persistently rated red and asked for a steer on the priorities and the ways in which the issues were being managed.
211.3	Ms Williams said that a lot of work had been done on the 18 weeks to referral target and there had been particular challenges in surgery related to historic waits and how those cases were managed taking into account the target.
211.4	It was reported that although discharge summary performance did not appear as red for the Trust as a whole, there were areas where performance had improved and was rated green. Ms Williams added that the average length of time taken to produce discharge summaries had significantly improved across the Trust and further measures were being introduced to continue that improvement.
211.5	Ms Williams told the Board that work on the central booking office and outpatients in 2015/16 would allow focus on clinic letter turnaround times. She said that work would aim to develop a consistent process for 'cashing up' clinics, ensuring that the actions which must be completed following each clinic were done.
211.6	Baroness Blackstone queried whether a five day target was achievable and whether or not a review was required in order to assess this.
211.7	Ms Williams said that further work should be done to improve performance before a review would be required however there were explanations in some specialties where a 5 day target for clinic letter turnaround was not appropriate.
211.8	<b>Action:</b> It was agreed that both a prevalence rate and an incidence rate for discharge summary and clinic letter turnaround times would be considered as part of the targets and activity report as it was recognised that activity and spells were increasing.

211.9	The Board <b>noted</b> the update.
<b>212</b>	<b>Workforce Summary Report</b>
212.1	Mr Ali Mohammed, Director of HR and OD presented the report and highlighted that the workforce had continued to grow in recent months. Discussion had taken place at the Senior Management Team meeting about the controls which should be put in place to constrain further growth where appropriate.
212.2	Mr Mohammed said that following comments at previous Trust Board meetings, the staff turnover resulting from the expiry of fixed term contracts had been separated from the turnover rate which could be benchmarked with other London Trusts. Mr Mohammed said that it was important that the Trust continued to focus on this. He added that additional focus was likely to reduce the disparity between turnover, which was relatively high in comparison to very low sick leave and engagement rates.
212.3	Professor Rosalind Smyth, Non-Executive Director acknowledged the complex issues in nursing turnover which stood at 12.3% but asked for assurance that exit interviews were conducted and the information gained from this was analysed to assess the drivers for turnover.
212.4	Mrs Liz Morgan, Chief Nurse said that all leavers were offered an exit interview however not all took this up.
212.5	The Board congratulated the estates team for the significant improvement in PDR completion rates.
212.6	The Board <b>noted</b> the update.
<b>213</b>	<b>Finance Summary Report</b>
213.1	Mrs Claire Newton, Chief Finance Officer said that following nine months of consistent financial performance, February's performance had been worse than trend. Mrs Newton said that this was due in part to lower Critical Care utilisation than in previous months, which had been significantly higher than previously. Mrs Newton said that February's performance had resulted in adverse variance to budget in revenue of £2.8m.
213.2	Mrs Newton told the Board that work was on-going to reduce agency usage which was at a peak predominantly in highly technical areas such as IT however it was added that GOSH did not experience the same significant issues with nursing agency usage as other Trusts.
213.3	Mr Ripley asked if the Trust would be in a better position in terms of debtors at year end. Mrs Newton said that this was likely and debt levels were being tracked daily. She said that the trend in debt was difficult to understand and following good progress earlier in the year when significant progress had been made, there had been some slippage. Mrs Newton added that a large proportion of the debt was from long term customers with no record of bad debt.
213.4	Mr Ripley suggested that IPP growth although vital had an attached burden because of the associated debt levels.

213.5	The Board <b>noted</b> the update.
<b>214</b>	<b>CQC Update</b>
214.1	Ms Rachel Williams, Chief Operating Officer presented a paper which provided an update on progress with the preparations for the forthcoming CQC inspection in April 2015 along with initial findings from mock inspections and a listening event.
214.2	Ms Williams told the Board that following the inspection, GOSH would have the opportunity to comment on the factual accuracy of the report with the release of the final report anticipated to be around July 2015.
214.3	It was reported that feedback from the mock inspections had provided a number of positive comments about care and leadership however some issues had been noted, primarily due to limitations of space in clinical areas.
214.4	The Board <b>noted</b> the update.
<b>215</b>	<b>Infection Control Report</b>
215.1	Dr John Hartley, Director of Infection Prevention and Control told the Board that it had been twenty months since a case of MRSA was reported at the Trust and central venous line (CVL) infections had reached the lowest level that the Trust had experienced which was an excellent achievement. Dr Hartley said that the team continued to speak to staff about personal responsibility for IPC and continuing to always use standard IPC precautions.
215.2	Dr Hartley said that there had been an outbreak of a Carbapenemase producing enterobacteriaceae including cross transmission to three other children however work to prevent further cross contamination had been successful.
215.3	The Board <b>noted</b> the update and welcomed the reduction in CVL infections; they thanked the nursing staff.
<b>216</b>	<b>Safe Nurse Staffing Report</b>
216.1	Mrs Liz Morgan, Chief Nurse told the Board that there had been no reports of unsafely staffed shifts in the previous two months. She added that two issues related to staffing levels had been reported on Datix and both had been investigated with learning.
216.2	The Board <b>noted</b> the update.
<b>217</b>	<b>Staff Survey Results 2014</b>
217.1	Mr Ali Mohammed, Director of HR and OD said that analysis of staff survey responses for 2014 had shown that GOSH was eighth in the ranking of teaching hospitals which was a good improvement on the scores for 2013.
217.2	Mr David Lomas, Non-Executive Director noted that the Trust was not well ranked in staff reporting good communication between senior management and staff. He asked what the Trust's aspirations were in this area.

217.3	Mr Mohammed said that the Trust was aspiring to be in the top quartile which would require a score of 40% or above. He added that it would be important to ask staff what they would envisage as good communication.
217.4	Ms Yvonne Brown, Non-Executive Director expressed some concern that only 69% of staff who responded to the survey said that they had received health and safety training in the previous 12 months. She noted that the Trust's internal auditors had provided significant assurance with minor areas for improvement on a recent health and safety audit.
217.5	Mr Mohammed said that there were good levels of training within the Trust and it was possible that there were issues with staff perception.
217.6	The Board <b>noted</b> the update.
<b>218</b>	<b>Register of interests and gifts and hospitality</b>
218.1	Mr Lomas noted that several staff conducted private practice at the Portland Hospital rather than GOSH. He asked why this was and if the Trust had plans in place to capture this work.
218.2	Dr Catherine Cale, Co-Medical Director said that in many cases there was not sufficient capacity at to carry out all additional private practice work of GOSH consultants and it was important to manage consultants' expectations in this area.
218.3	Professor Rosalind Smyth, Non-Executive Director expressed some concern that the Trust was not capturing the declarations of all staff particularly those who held honorary contracts with GOSH.
218.4	Dr Anna Ferrant, Company Secretary said that communication was through the all staff newsletter and emails to individuals who had declared an interest in the previous year. She said that declaring interests was a requirement of staff as set out in the Declaration of Interest and Gifts and Hospitality Policy.
218.5	<b>Action:</b> It was agreed that an update would be received with thoughts about how registering a declaration of interest could be included in individuals' appraisals and how best to capture the interests of honorary contract holders.
218.6	The Board <b>noted</b> the update.
<b>219</b>	<b>Members' Council Update – January 2015</b>
219.1	Dr Anna Ferrant, Company Secretary reported that at the last meeting of the Members' Council in January 2015, the Council had approved the appointment of Mr Akhter Mateen to the post of Non-Executive Director and Claudia Fisher had been appointed Lead Councillor.
219.2	The update was <b>noted</b> .
<b>220</b>	<b>Update from the Audit Committee in January 2015</b>
220.1	Mr David Lomas, Member of the Audit Committee said that Committee had expressed concern about the Trust's business continuity plan which had not been tested since 2012. The Committee requested a table top exercise took place by

	April 2015.
220.2	Ms Rachel Williams, Chief Operating Officer said that plans were in place to conduct the table top exercise and staff training. She added that a new business continuity lead had been appointed and he was being proactive in this area.
220.3	The Board <b>noted</b> the update.
<b>221</b>	<b>Update from the Clinical Governance Committee in January 2015</b>
221.1	Mrs Mary MacLeod, Chair of the Clinical Governance Committee said that the committee had noted that two productivity and efficiency programmes which had been reviewed were found not to have adversely affected quality and safety. Mrs MacLeod added that she and the Chair of the Audit Committee had met with KPMG to discuss the internal audit plan for 2015/16.
221.2	The Board <b>noted</b> the update.
<b>222</b>	<b>Update from the Finance &amp; Investment Committee</b>
222.1	Mr David Lomas, Chair of the Finance and Investment Committee provided an update which was <b>noted</b> .
<b>223</b>	<b>Register of Seals</b>
223.1	The Board <b>endorsed</b> the use of the company seal.
<b>224</b>	<b>Any Other Business</b>
224.1	Baroness Blackstone, Chairman told the Board that it would be Mrs Liz Morgan and Mr John Ripley's last Trust Board meeting as they would be retiring at the end of March 2015.
224.2	Baroness Blackstone thanked Mrs Morgan for her work with the Trust and noted that a farewell gathering had already taken place.
224.3	Baroness Blackstone thanked Mr Ripley for his excellent service to the Trust particularly in the areas of strategy and the finance and investment committee.