

**Minutes of the meeting of Trust Board on
Friday 24th May 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
Professor Rosalind Smyth	Non-Executive Director
Mr Charles Tilley	Non-Executive Director
Mr Robert Burns	Acting Chief Operating Officer
Dr Barbara Buckley	Co-Medical Director
Professor Martin Elliott	Co-Medical Director
Mrs Liz Morgan	Chief Nurse and Director of Education
Mrs Claire Newton	Chief Finance Officer
Mr Ali Mohammed	Director of Human Resources and OD

In attendance

Dr Anna Ferrant	Company Secretary
Mr Matthew Tulley	Director of Redevelopment
Ms Rachel Williams	Newly appointed COO (from July 2013)

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

*** Denotes a person who was joined the meeting by telephone*

25.	Apologies for absence
25.1	Apologies were received from Professor Rosalind Smyth, Non-Executive Director.
26.	Declarations of interest
26.1	No declarations of interest were received.
27	Minutes of the meeting held on 24th April 2013
27.1	The minutes of the meeting of 24 th April 2013 were approved with no amendments.
28.	Matters Arising/Action Checklist
28.1	Minute 12.2: The Chief Executive reported that a letter had been received from Monitor asking what action the Trust had taken in response to members of staff being paid through a company.
28.2	Mrs Claire Newton, Chief Finance Officer confirmed that the Annual Report included a disclosure about individuals who were paid in this way. She reported that this referred to five members of staff throughout the year, mainly in the corporate area.
28.3	Action: It was agreed that Mrs Newton would follow up individuals to ensure that there would be no adverse reputational affects.

28.4	Minute 12.4: Dr Anna Ferrant, Company Secretary confirmed that she was working with the Head of Operational HR to follow this up.
28.5	Minute 9.4: Action: It was agreed that this action would become part of the 2A project.
28.6	Minute 14.4: Action: The paper on why Trusts fail to be circulated to the Board prior to the next meeting.
28.7	Action: Mr David Lomas, Non-Executive Director expressed some concern that there had been no actions carried over from previous meetings. It was agreed that he would confirm with Dr Ferrant if any actions had been omitted.
29.	Chief Executive Report
29.1	The Chief Executive reported that nationally there was pressure on acute services which would indirectly affect GOSH when patients are not able to be discharged due to a shortage of ICU beds in local hospitals.
29.2	Mr Filochowski confirmed that the themes from the Francis report had been mapped and actions were being developed.
29.3	It was reported that the Trust had been shortlisted for two HSJ National Patient Safety awards along with around six other Trusts.
29.4	Action: It was agreed that the Board would be notified if the awards were won and a note of congratulations would be sent to those involved on behalf of the Board.
29.5	Mr Filochowski confirmed that the Muscular Dystrophy Campaign had designated the Trust a paediatric centre for research and clinical excellence. He reported that the Trust was the only centre in the country which had received both designations.
29.6	The Board noted a number of other successes by members of staff at GOSH
29.7	Action: The Chairman to send a note of congratulations to the teams involved.
29.8	Mr Ripley stressed the importance of a distribution strategy to enable the good work innovated by GOSH to be used in other Trusts.
29.9	The Board noted the verbal report.
30.	Electronic Document and Record Management System (EDRMS) Business Case
30.1	Professor Martin Elliott reported that the EDRMS was the first stage in moving towards Electronic Patient Records. He confirmed that the preferred supplier would be Kainos with a system called Evolve.
30.2	It was reported that initial capital investment would be £4.3m which was projected to be returned over 5 years. Non cash benefits were anticipated to be over £1m. Mr Lomas confirmed that the business case had been discussed at Finance and

30.3	Investment Committee and that the proposal had been recommended for Board approval. Mr John Ripley, Non-Executive Director stressed that many of the benefits delivered by the project were 'soft' and therefore a project team would be required to ensure they were delivered. He added that the project would place further demands on existing infrastructure so it was vital to ensure the network was fast and reliable.
30.4	Ms Newton confirmed that work was ongoing with Kainos to gain an understanding of what optimal infrastructure would look like and compare it to what was currently in place. She added that changes would be made as a result of this comparison.
30.5	Professor Elliott confirmed that site visits had provided assurance that the system was working well and was well supported.
30.6	The Trust Board approved the business case.
31	Chief Executive's Report
31.1	Summary of performance for the period:
31.2	Targets and indicators including update on workstreams for quarter 4 2012/13
31.3	Mr Robert Burns reported that the Trust had met the waiting time target for April but cautioned that long waits would need careful management. He added that 24hour discharge summary rate had gone above 80% for the first time for a year.
31.4	Mr Burns said that a team had visited Chelsea and Westminster Hospital NHS Foundation Trust who achieved 80% compliance against the Clinic Letter Turnaround sent within 5 working days. He reported that the target at Chelsea and Westminster was measured differently and confirmed that GOSH would not be redefining the target.
31.5	The Board was informed that Meridian would be employed to work with the Outpatient department to identify efficiencies. It was confirmed that the cost for this service was £160,000.
31.6	The Chairman asked whether a tender process had been used to appoint Meridian in view of the costs involved.
31.7	The Chief Executive reported that a tender process had not gone ahead however Meridian were part of a national framework and theirs was a specialist skill.
31.8	Action: It was agreed that Meridian would be asked to present their findings to the Board when the project was more advanced.
31.9	Mr Burns confirmed that the Trust had reported a 99.3% return against CQUIN targets which was an excellent result.
31.10	Action: This information to be used in hospital publicity and to be given to GOSH Children's Charity for their use.

31.11	Mr Lomas asked for an update around capacity constraint in terms of nurses in intensive care.
31.12	The Chief Nurse said that she was anticipating nurses from Ireland and Portugal starting employment at the Trust in June. She reported that there had been delays due to a lengthy process to confirm compliance with national standards in their home countries. Mrs Morgan reported that a programme was in place to induct the nurses once they arrived.
31.13	Mr Lomas asked for a steer on the level of patient refusals.
31.14	Mr Burns said that of the current refusals (43) almost all were Children's Acute Transport Service (CATS) patients and it would be difficult to reduce this number without increasing the number of intensive care beds.
31.15	Baroness Blackstone, Chairman asked whether, given the delay in Safe and Sustainable, the Trust would be increasing the number of cardiac beds.
31.16	Mrs Morgan reported that she would be meeting with the newly appointed Head of Nursing to discuss how further beds could be filled through an increase in nursing staff.
31.17	The Board stressed the importance of being innovative whilst remaining objective.
31.18	Action: It was agreed that trends in mortality rates would be included in future updates.
31.19	Finance and Activity
31.20	The Chief Finance Officer reported that she was still yet to receive clinical activity fully priced and there were no indicators on CRES delivery. She confirmed that this information would be available in the coming weeks.
31.21	Action: A full update to be provided at the next meeting.
31.22	Quality and Safety
31.23	Professor Martin Elliott, Co-Medical Director highlighted that no red complaints had been received for 65 days. He added that there had been an increase in the number of complaints which were being referred to the Ombudsman but this was likely to be as a result of change in reporting criteria. Analysis had shown that there had been no changes to the type or severity of complaints received.
31.24	Professor Elliott highlighted the spinal and Arvind Jain pathways which had been well received and successful and the International Health Improvement conference hosted by the Trust which had been well attended and reviewed.
31.25	Action: It was agreed that the transformation document which summarised the work of the team would be circulated to the Board.
31.25	The Board noted the report.

32	Compliance with Monitor's Code of Governance
32.1	Dr Anna Ferrant, Company Secretary said that work was ongoing on a schedule of matters and reported a number of actions which were being taken for three other criteria.
32.2	The Board confirmed that the actions reported were sufficient to determine compliance with Monitor's Code of Governance.
33	Corporate Governance Statement
33.1	Mrs Claire Newton, Chief Finance Officer explained that the Corporate Governance Statement would be submitted to Monitor alongside the annual plan,
33.2	Mrs Newton recommended to the Board that confirmation be given on each point of the Governance Statement.
33.3	Mrs Newton highlighted that representatives from the Members' Council had asked the Board whether there was sufficient evidence to be able to confirm each point. She added that the Deloitte review had made recommendations which the Trust had followed up and a report had been submitted to the Board confirming progress that had been made.
33.4	The Board approved the confirmation of each point of the Corporate Governance Statement.
34	Annual Risk Report 2012-13
34.1	Mr Robert Burns, Acting Chief Operating Officer reported that the number of incidents had increased by 14% on the previous year which was due to an increased culture of reporting. He added that there was a downward trend of harm causing incidents but an increase in serious harm which would be investigated further.
34.2	Action: It was agreed that a paper would come to the Board in September about the timeliness of reviews of risks.
34.3	Action: It was agreed that the percentages of incidents when split by level of harm would be rounded to one decimal place rather than integers.
34.4	The Board noted the report.
35	Safeguarding Annual Report 2012-13
35.1	The Chief Nurse reported that the safeguarding team had been restructured to ensure there was an appropriate skills mix. She reported that the Trust had achieved all national and North Central London training requirements at all levels and had received positive Camden Ofsted inspections. It was confirmed that priorities for the year had been identified.
35.1	The Board noted the update.

36	CQC Compliance Update
36.1	The Company Secretary reported that an initial review against the CQC essential standards had indicated that the Trust was fully compliant.
36.2	Dr Ferrant confirmed that a new process and dashboard was in place for documenting compliance. She added that CQC standards were reviewed at the Clinical Governance Committee and were monitored by the Risk, Assurance and Compliance Group.
36.3	Mr Burns reported that outcome 6 which was rated high yellow was caused by the Trust being marked against a national specialty database. He confirmed that he would be writing to the CQC who would determine if this was an appropriate standard.
36.4	Action: Dr Ferrant to provide an update following the June CGC meeting.
37	Update on local action planning in response to 2012 national Staff Survey
37.1	Mr Ali Mohammed, Director of Human Resources and Organisational Development reported that a more detailed paper had been discussed at the Overall Management Group (OMG). He confirmed that the majority of divisions and directorate management teams had succinct action plans in place.
37.2	The Board noted the update.
38	Any Other Business
38.1	Dr Ferrant provided an update on advice received from Deloitte around the Quality Account.
39	Next meeting
39.1	The next Trust Board meeting will be held on Wednesday 24 th July 2013 in the Charles West Room, Level 2, Paul O’Gorman Building, Great Ormond Street, London WC1N 3JH
39.2	The Trust’s Staff awards will be held on 6 th June in the Kennedy Lecture Theatre, Institute of Child Health.