

# BOARD OF DIRECTORS

Minutes of the Meeting of 29 April 2010  
Board Room, Trust HQ, QEMC

Present: Sir Albert Bore, Chairman  
Ms Julie Moore, Chief Executive  
Prof David Bailey, Non-Executive Director ("DB")  
Mr Kevin Bolger, Chief Operating Officer ("COO")  
Mr Stewart Dobson, Non-Executive Director ("SD")  
Mrs Kay Fawcett, Chief Nurse ("CN")  
Mr Tim Jones, Executive Director of Delivery ("EDD")  
Ms Angela Maxwell, Non-Executive Director ("AM")  
Mr David Ritchie, Non-Executive Director ("DR")  
Ms Clare Robinson, Non-Executive Director ("CR")  
Dr Dave Rosser, Medical Director ("DR")  
Mr Mike Sexton, Director of Finance ("FD")

In Attendance: Mr David Burbidge, Director of Corporate Affairs ("DCA")  
Ms Morag Jackson, New Hospitals Project Director ("NHPD")  
Ms Fiona Alexander, Director of Communications ("DComms") (from item D10/86)  
Mrs Viv Tsesmelis, Director of Partnerships

## **D10/76 Welcome and Apologies for Absence**

The Chairman welcomed everyone present to the meeting. Apologies were received from Mrs Gurjeet Bains and Prof Michael Sheppard, both Non Executive Directors.

## **D10/77 Quorum**

The Chairman noted that:

- i) a quorum of the Board was present and
- ii) the Directors had been given formal written notice of this meeting in accordance with the Trust's Standing Orders.

## **D10/78 Minutes of the previous meetings**

The minutes of the meeting of 26 March 2010 were accepted as a true record, as amended and initialled by the Chairman.

## **D10/79 Matters Arising**

**D10/54** – The Chief Executive reported that she had received a letter from Birmingham City Council regarding the delay in signing off the Special Planning Guidance for the Selly Oak site.

D10/64 – The Medical Director reported that the Commercial Director had reviewed the proposed name “Birmingham Systems” with CSE, who felt that the name was strong and that the addition of a reference to healthcare would only lead to confusion with their own branding, which already included that word. The Trust therefore intended to proceed with the use of that brand name and the Director of Corporate Affairs explained that he would wish to take some steps to protect the brand, such as registering a trade mark and, in particular, forming a company incorporating the words “Birmingham Systems” in its name. The company would be wholly owned by the Trust and there was no intention at present to use it as a trading entity.

**Resolved: That the Director of Corporate Affairs and the Executive Directors be authorised to take all such actions as are necessary to procure the acquisition of a limited company as a wholly owned, non-trading subsidiary of the Trust, for the purposes of protecting the brand “Birmingham Systems” and that the Trust shall subscribe for the entire issued share capital of such a company.**

**D10/80 Actions List**

The actions list was reviewed and updated.

**ACTION: DCA**

**D10/81 Chairman’s Report and Emerging Issues Review**

[paragraph redacted]

The Chairman reported that Andrew Corbett–Nolan had been approached to undertake some work with the Board regarding board development. This would take place on the afternoon of 13 July. In order to prepare for this, Andrew Corbett–Nolan wished to speak to some non-executive and executive directors and the date that had been set for a seminar would be used to facilitate this.

**D10/82 BNHP Monthly Programme Status Report**

The Directors considered the report presented by the New Hospital Project Director, who further reported that practical completion had been achieved on 15 April and that planning was going well for the phase 1 move to take place commencing 16 June.

**Resolved to: Accept the progress reported in the New Hospitals Project Director’s report**

**D10/83 Performance Management and Monitoring Regime for the New Hospital**

The Directors considered the paper presented by the New Hospital Project Director, who reminded the Board that this subject had previously been discussed at the seminar held on 9 March 2010. Under the PFI agreement, the Trust had three mechanisms to manage the performance of the contractor, two which affected the amount of the Trust paid to the contractor and one which led to the accumulation of points which ultimately could entitle the Trust to terminate the agreement. The financial deductions from the unitary payment were meant as an incentive and not as compensation to the Trust for the service failure. The NHPD also emphasised the difference in the way the new building and the retained estate was treated.

Experience gained from studying PFI projects in other trusts indicated that the correct use of the helpdesk by trust staff is key to the operation of the contract. The Trust would have an individual observing the consort staff in the helpdesk initially and had developed a toolkit that had been tested in the mental health trust.

There was discussion regarding procurement of energy and it was confirmed that these arrangements were reviewed annually and the Trust was advised by Dalkia in relation to energy procurement.

The dispute resolution procedure was clarified, as was the position regarding the reconfiguration of resources.

**Resolved to:**

- 1. Approve that the New Hospital Project Director is the Trust's authorising officer responsible for authorising monthly invoices relating to the PFI Contract.**
- 2. Note that the Trust has a performance framework in place for managing the PFI Contract.**

**D10/84 Draft Monitor Annual Plan 2010/11**

The Directors considered the draft Monitor Annual Plan presented by the Executive Director of Delivery, reported that Monitor had substantially changed the format of the annual plan for this year. The financial template was still outstanding and an additional template regarding membership had been added at a later stage.

The final plan was due to be submitted to Monitor by 31 May and the EDOD would circulate the final draft prior to that date for comment and approval by the Chairman and Chief Executive, as previously agreed (see minute D10/51).

The EDOD noted amendments relating to specific parts of the annual plan.

**Resolved: to accept a revised version of the Monitor Annual Plan for 2010/11 fully incorporating the updated guidance and financial figures in May 2010.**

**D10/85 Annual Plan Quarter 4 Update 2009/10**

The Directors considered the paper presented by the Executive Director of Delivery and agreed the good progress had been made against the objectives.

**Resolved to: Accept the quarter 4 2009/10 performance update against the Trust Annual Plan.**

**D10/86 Financial Plan 2010/11**

The Board considered the financial plan for 2010/11 presented by the Director of Finance. The FD reported that the plan built on the report considered by the Board in February. Since then, the Trust had improved its position regarding surplus and there was greater clarity around income. The plan would result in the Trust achieving a financial risk rating of three which was acceptable. The Trust is currently in discussions with Monitor regarding a technical accounting issue regarding the value at which the PFI will be brought on to the books under international reporting standards.

The plan set out the impact on the Trust of the impairments and other adjustments. An allowance of £4.5 million had been included to take account of performance penalties etc. There was discussion regarding the efficiency savings set out in the plan. The FD reported that the Board should be encouraged by the Trust's performance to date on efficiency savings. Regular meetings were held whereby CIPs were reviewed by the EDOD and the FD. This year the requirements for CIPs had been allocated differently and the FD was confident that strong plans were in place to achieve the required savings or to increase performance to compensate for reductions in income. The Board reviewed the plan and discussed the various provisions and reserves.

**Resolved to:**

- 1. Approve the detailed Financial Plan for 2010/11; and**
- 2. Approve the summary 3 year Financial Plan set out in section 7 as the basis of the Monitor Annual Plan to be submitted by the end of May.**

**D10/87 Draft Quality Report/Account for 2009/10**

(Imogen Gray, Head of Quality Monitoring, joined the meeting for this

item)

The Directors considered the paper presented by the Medical Director, who explained that the draft report follows the Department of Health/Monitor requirements. Unfortunately, this meant it was not such a concise and clear document as last year's report. The draft report is to be sent to South Birmingham PCT tomorrow for their comment following which it may be changed, but the process of the changes is somewhat onerous.

The MD further reported that it is the intention to continue with quarterly updates and to produce a more user-friendly version of the quality report in the form of a quality review.

There was discussion regarding the requirement at section 2.2 .1 of the report for the Trust to state that it has reviewed all the data available to it on the quality of care in its services. As this was a mandatory statement, it was agreed that a qualifying note should be added explaining that, because of the Trust's information systems, the amount of data available to the Trust on the quality of care of its services was considerable and that therefore the Trust had put systems in place to ensure that it reviewed sufficient data to assure itself of the quality of care for each service.

**Resolved: to approve the content of the Trust's 2009/10 Quality Report for review by NHS South Birmingham and Birmingham LINK.**

**D10/88 External Standards – Achievement of Targets – Quarterly Board Certification**

The Board of Directors considered the report presented by the Executive Director of Delivery and Director of Corporate Affairs.

**Resolved to :**

- 1. Agree that the Monitor governance declaration should be signed on behalf of the Board for Quarter 4 2009/10; and**
- 2. Accept that the declaration will result in the Trust being rates as 'Amber' for governance.**

**D10/89 Trust Capital Programme Report**

The Directors considered the report presented by the New Hospitals Project Director. It was noted that the second heading "2011/12" in Tables 3 and 4 should be "2012/13".

The NHPD confirmed that none of the slippage in the capital programme has affected the Trust's delivery of its clinical services. She further reported that the Trust was now considering provision for a faith centre within the new hospital building and a paper regarding this would be brought to the Board in May. The Chairman was

making arrangements to discuss this proposal with the chaplaincy.

**ACTION: NHPD**

**Resolved to :**

- 1. Note the £18 million capital expenditure incurred in 2009/10; and**
- 2. Approve the proposed capital budget of £23.79 million for 2010/11; and**
- 3. Note the indicative capital budgets for future years; and**
- 4. Note the additional areas of cash expenditure which will be reported to future Board of Directors.**

**D10/90 Performance Indicators Report**

The Board considered the report presented by the Executive Director of Delivery. There remain some uncertainties regarding the Trust's achievement of national priorities as uncertainty remains as to what the targets for PPCI, stroke and the patient survey threshold will be.

With regard to the Trust's internal targets, the accident and emergency target was achieved for the year, despite performance in March being below trajectory. Short term sick rates have decreased and the PDRS target of 90% was missed with an achievement of 87.3%. It was noted that although this target was missed a significant improvement on last year's performance had been made.

There was discussion regarding DNAs and theatre list utilisation.

**Resolved to: Accept the report on progress made towards achieving performance targets and associated actions**

**D10/91 Clinical Quality Monitoring Report**

The Board considered the report presented by the Executive Medical Director. There was discussion regarding the clinical governance visit to dermatology outpatients. Those directors who conducted the visit reported that they had been very impressed at the way in which the staff had tried to make best use of the available space. Clinicians had raised the issue of the organisation of large clinics. This was recognized by the Department and actions were being implemented to improve the situation. A new consultant has now been appointed. Recruitment has taken over two years due to a shortage of suitable consultants. This shortage has been part of what has led to some of the issues experienced by dermatology as it was necessary to bring clinics that were provided in the community back in to Selly Oak.

It was also reported that KPIs had now been developed for outpatients which would drive further improvements in areas such as dermatology.

**Resolved to: Discuss the contents of this report and approve the actions identified**

**D10/92 Report on Infection Prevention and Control up to 31 March 2010**

The Board considered the report presented by the Chief Nurse, a reported that rates of MRSA and C. difficile both remained under the Trust' trajectory. The Trust's trajectory for MRSA this year is like to be 11 or less post 48-hour bacteraemias. The Trust has received verbal confirmation that the PCT will take into account that the Trust does not undertake gynaecology and paediatric work. The Department of Health has accepted this and will adjust the Trust's figures to take account of the performance of the Children's Hospital, the Women's hospital and ROH.

The Trust trajectory for C.difficile will be 164 for the year. The Chief Nurse reported that she considers this to be a stretching target and the Trust will need to improve performance to achieve it.

**Resolved to: Accept this final report on infection prevention and control progress during 2009/10**

**D10/93 Annual Infection Prevention & Control Report April 2009 – March 2010**

The Directors considered the report presented by the Chief Nurse, who further reported that the Trust had received assessments of good for both aspects of the annual PEAT inspection and that audits, aseptic techniques and training were all being achieved in accordance with the previous year' s plan.

The action plan for the current year aims for further improvements and will target other bacteraemia that could impact on patient care.

**Resolved to:**

- 1. Receive the 2009/10 Infection Control Annual Report;**
- 2. Agree the Infection Prevention and Control Action plan 2010/11;**
- 3. Agree to receive quarterly updates on the plan; and**
- 4. Agree to receive the next Annual Report in April 2011.**

**D10/94 Patient Care Quality Report**

The Directors considered the report presented by the Chief Nurse. There was discussion regarding the Trust's CQUINN for falls. This presented a challenge to the Trust and it is essential that appropriate assessment of patients is undertaken. The CN reported that the Trust had participated in the CQC study regarding learning disabilities and health. This had been a challenging task as it involved a review of 60 sets of notes.

**Resolved to: Receive the report on the progress with Care Quality**

**D10/95 Finance and Activity Performance Report for the Period ending 31 March 2010**

The Directors considered the report presented by the Executive Director of Finance, who reported that the surplus achieved by the Trust for 0910, whilst consistent with the Trust's long term plan, was below last year's level due mainly to costs associated with the new hospital and the commencement of the payment of the unitary payment.

**Resolved to: Receive the contents of this report**

**D10/96 Update on Emergency Preparedness**

The Directors considered the report presented by the Chief Nurse, who further reported that the Trust had now tested its callout procedures and undertaken a tabletop emergency preparedness exercise. The business continuity plan was now in place and a review of the influenza and heatwave plans would take place in May.

**Resolved: to accept the report and agree to receive another update in 6 months.**

**D10/96a Patient Food Provision**

The Directors considered the report presented by the Chief Nurse.

**Resolved to: Accept the report**

**D10/97 Membership Recruitment and Engagement Report**

The Directors considered the paper presented by the Director of Communications, who reported that, whilst the Trust had not achieved its target of 35,000 members, it had achieved a net increase of 31%. It was noted that 2000 members are lost from the register each year, either as a result of death or because they had gone away. The proposal now was to maintain the trust's membership at its current



level.

**Resolved to:**

- 1. Note the progress made; and**
- 2. Accept the recruitment and engagement plan for 2010/11**

**D10/98 Appointment of a Substantive Consultant in Diabetes**

The Directors considered the paper presented by the Chief Operating Officer.

**Resolved to: Approve the appointment of a substantive Consultant in Diabetes**

**D10/99 Appointment of Replacement Consultant Haematologist**

The Directors considered the report presented by the Chief Operating Officer.

**Resolved to: Approve the appointment of a substantive Consultant in Haematology**

**D10/100 Information Governance Toolkit Assessment Sign Off**

The Directors considered the report presented by the Director of Corporate Affairs.

**Resolved to: Approve the submission of the self-assessment**

**D10/101 Annual Cycle of Business – Board of Directors**

The Directors considered the paper as presented by the Director of Corporate Affairs.

**Resolved to:**

- 1. Approve the annual cycle of business;**
- 2. Agree that the Chairman may approve amendments to the Annual Cycle during the course of the year**

**D10/102 Declaration of Interest – Members of the Board of Directors as at 1 April 2010**

The Directors considered the report as presented by the Director of Corporate Affairs.

**Resolved to:**

- 1. Accept the Declaration of Interests;**

2. To record their acceptance in the minutes of this meeting;  
and
3. Enter them in the Register of Interests

**D10/103 Minutes of the Audit Committee Meeting on 11 February 2010**

The Directors considered the minutes as presented by the Director of Corporate Affairs.

**Resolved to: Receive the minutes**

**D10/104 Use of Trust Seal**

**Resolved to:**

1. Agree that any two of the officers from the list attached to the paper, acting together are authorised to use the Trust seal on their behalf; and
2. Note the register of sealing and record its receipt in the minutes of this meeting.

**D10/105 The approval of a Lease Agreement between the Trust and Heart of England NHS Foundation Trust for premises at the Medical Innovation Development and Research Unit (MIDRU)**

The Directors considered the paper as presented by the Director of Corporate Affairs.

**Resolved to: authorise any one or more Executive Directors of the Trust and the Foundation Secretary severally to exercise the powers of the Trust in relation to all matters arising in connection with the Lease, without limitation save that such authority may only be exercised to the extent that the Lease is materially as described in this paper, including authority to negotiate, approve, amend, sign, execute and deliver the Lease, execution to be by any to Executive Directors or an Executive Director and the Foundation Secretary**

**D10/106 Traffic Management Policy**

This policy was considered by the Directors as presented by the Director of Corporate Affairs.

**Resolved to: approve the Traffic Management Policy**

**D10/107 Any other business**

None

**D10/108 Date of Next Meeting:**

**Thursday 3 June 2010 Board Room Trust HQ**

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**Chairman**