

BOARD OF DIRECTORS

Minutes of the Meeting of 28 February 2013
Board Room, Trust HQ, QEMC

Present: Sir Albert Bore, Chairman
Dame Julie Moore, Chief Executive. ("CE")
Prof David Bailey, Non-Executive Director
Mrs Gurjeet Bains, Non Executive Director ("GB")
Mr Kevin Bolger, Executive Director of Strategic Operations ("DSO")
Mrs Kay Fawcett, Chief Nurse
Mr David Hamlett, Non-Executive Director ("DWH")
Mr Tim Jones, Executive Director of Delivery ("EDOD")
Ms Angela Maxwell, Non-Executive Director ("AM")
Mr Andrew McKirgan, Interim Chief Operating Officer ("COO")
Mr David Ritchie, Non-Executive Director ("DR")
Dr Dave Rosser, Medical Director ("MD")
Mr Mike Sexton, Chief Financial Officer ("CFO")
Prof. Michael Sheppard, Non-Executive Director ("MS")

In Attendance: Mrs Fiona Alexander, Director of Communications ("DComms")
Mr David Burbridge, Director of Corporate Affairs ("DCA")
Ms Morag Jackson, Director of Projects ("DoProj")
Mrs Viv Tsesmelis, Director of Partnerships ("DoP")

D12/269 Welcome and Apologies for Absence

Sir Albert Bore, Chairman, welcomed everyone present to the meeting. Apologies were received from Mr David Waller, Non Executive Director.

D12/270 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.

D12/271 Declaration of Interests

None.

D12/272 Minutes of the previous meeting

The minutes of the meeting of 24 January 2013 were accepted as a true record, amended as initialled by the Chairman.

**D12/273 Matters Arising
[Redacted]**

D12/258 - The Chief Executive reported that levels of emergency admissions at the Trust had continued at unprecedented levels,. At present, any specific cause of the level of activity is uncertain but factors may include the aging population and issues in primary care, commissioning and neighbouring providers.

The Chief Operating Officer reported that increases had been seen in both emergency surgery and medicine, with GP admissions increasing by 25%. The Trust usually expects to accommodate between 25 and 30 elective admissions each day. The present level of emergency admissions is impacting on elective work, including tertiary specialties. The Trust has already opened additional capacity and is pro-actively engaging the private sector in appropriate elective work, which is of assistance to a limited extent. Currently, levels of elective admissions in excess of 23 hours are down by about 60%.

Plans are in place to increase surgical capacity in the West block of retained estate, with scope for, initially two medical wards and a third if necessary. These wards will not be upgraded in any significant way and the reputational risk of using retained estate in this way has been recognised. A pro-active approach to publicity is proposed so that the public and patients understand the reasons for this course of action.

The wards would be staffed with a mix of current Trust staff and agency, with additional agency used to back-fill into the QEHB. Nursing education and support staff would be deployed. The Medical Director reported that the wards would not have the support of PICs and would use paper-based records.

There was discussion regarding the proposal to use the retained estate. It was recognised that, whilst there were some reputational and clinical risks involved, these were outweighed by the risks to patients of doing nothing, as present level of occupancy and the number of outliers necessitated by the current position created much greater risk to clinical quality and patient safety. The Deputy Chief Nurse had been specifically tasked to ensure that privacy and dignity arrangements were adequate.

There was discussion regarding the financial impact, particularly with regard to the 30% cap on A&E activity above 2006/07 levels

and the impact of undertaking elective work in the private sector. The CFO was currently in negotiations with commissioners regarding additional funding.

The Board discussed the long term position, including the potential impact of the City and Sandwell PFI plan, which involved the closure of the City A&E department. It was agreed this should be opposed. The Chief Executive reported that she was attending an emergency care summit with the SHA/Local Area Team next week.

It was agreed that the correct course of action should be to open up the additional capacity (up to three wards) in the retained estate and conduct an active publicity campaign regarding these measures.

D12/274 Actions List

The actions list was reviewed and updated.

D12/275 Chairman's Report & Emerging Issues Review

The Chairman had nothing to report further to the items covered under Matters Arising.

D12/276 CLINICAL QUALITY MONITORING REPORT

The Directors considered the paper presented by the Executive Medical Director, who provided an update regarding the investigations referred to in section 2 of the report and then further reported that :

An incident had occurred with regard to the Trust's Myhealth patient information system, whereby test result showing positive indicator for prostate cancer had been incorrectly attributed to a patient. No identification information about the original patient had been disclosed and there was no risk to that patient as the test result was historical.

The patient to whom the test result had been wrongly attributed had received an explanation and assurance. The MyHealth system had been taken down while an investigation was carried out. The issue has been traced back to a 24 hour period last Autumn, when changes were made to data tables. Change control processes have been reviewed and a more stringent process used for clinical processes will be used for all future changes to this system. The system will be back up later today.

The Trust has been experiencing difficulties with the current Patient Administration System (PAS), provided by CSC. No feeds have been received for two days so far, which is impacting on the management of waiting lists. The issue is outside of the Trust's control as it emanates from a CSD data centre and CSC are not providing any information regarding the issue and the timetable for

resolution. On a short term basis, Trust managers are endeavouring to work round the problem.

The Board reviewed the SIRIs set out in the report. There was discussion regarding the additional risks caused by the current pressure on admissions and the resulting number of outliers.

Resolved: to receive the report and approve the actions identified.

D12/277 QUALITY ACCOUNT UPDATE FOR Q3 2012/13

The Board considered the report presented by the Executive Medical Director. It was confirmed that the fall in the proportion of no harm incidents being reported was due to the increase in awareness and reporting of pressure ulcers.

Resolved to: approve the content of the Quality Account Update for Quarter 3 2012/13 for external publication.

D12/278 PERFORMANCE INDICATORS REPORT

The Directors considered the paper presented by the Executive Director of Delivery. Performance against the MRSA and C.Difficile trajectories remained a risk to the Trust.

The Trust had achieved the A&E 4 hour target in January, but the level of activity had continued to be at an unprecedented level, making achievement in February challenging.

An amber-green rating had been set against the CQC's Essential Standard 7 as a result of a review of the assurance available regarding patients being detained under the Mental Health Act. A response from the CQC regarding the monitoring of the use of the WHO checklist is awaited, with regard to compliance with Essential Standard 16.

The Trust's achievement of the CQUIN relating to home dialysis had been affected by the successful transplants of the patients involved.

Resolved: to accept the report on progress made towards achieving performance targets and

D12/279 BUSINESS CASE OUTCOMES PERFORMANCE REPORT

The Directors considered the report presented by the Executive Director of Delivery. Five of the 11 business cases had fully delivered against their objectives. Of the remaining six, three were making progress and would be reviewed again in six months, and exception reports for the other three were set out in the paper. Two of those cases related to Oncology and, overall, these were meeting

the income targets, albeit in a different way than originally envisaged. A further review of these cases would take place in eighteen months.

Resolved to:

1. **Accept the report on progress against business case outcomes and action taken for exception items; and**
2. **Agree that cases that has been assessed as achieved (risk assessment score of 1) should be removed from the outcome monitoring process.**

D12/280 REPORT ON INFECTION PREVENTION AND CONTROL UNTIL 31 JANUARY 2013

The Directors considered the paper presented by the Executive Chief Nurse, who confirmed that the Trust remained at its annual trajectory ceiling for MRSA.

With regard to C. Difficile, the Trust had seen an improvement in performance, with two cases to date for February, making the current position two cases below trajectory pro rata.

There was discussion regarding the four cases of mycobacterium chelonae and the Chief Nurse reported that the investigation was considering the possibility of a clinical product as source.

Resolved: to accept the report on infection prevention and control progress.

D12/281 PATIENT CARE QUALITY REPORT

The Directors considered the report presented by the Executive Chief Nurse, who further reported that the Trust had now received the results of the National Inpatient survey. Overall, it appears that the performance has been relatively good when comparing against the scores for the previous year, but information regarding national comparators is yet to be made available.

The CN reported that the work being undertaken with regard to the treatment of children within the Trust reflected the increasing number of services who were seeing older children, where in the past this had not been a common occurrence.

There was discussion regarding the Trust's Friends and Family score, which had again increased to 72%. It was noted that the score had held up in spite of the pressures caused by the levels of emergency attendances and admissions. Angela Maxwell reported that she had received very complimentary reports from two friends who had recently experienced the care offered by the Trust.

The Chairman reported that the Board would be considering the Francis report at its seminar on March 15.

Resolved: to receive the report on the progress with Care Quality

D12/282 DRAFT FINANCIAL PLAN 2013/14

The Board considered the report presented by the Chief Financial Officer, who reported that, as was usually the case at this stage, there was greater certainty over expenditure than income. This year, the position has been exacerbated by protracted negotiations with commissioners, a process further complicated by the shifts between commissioners and the Local Area Team of responsibility for commissioning certain services. The outcome of these negotiations is likely to be between a shortfall of £5 million and a surplus of similar magnitude.

The plan is currently based on two key assumptions, one being a CIP requirement of £16.7 million, revised downwards from the £22.6 million in the long term forecast. The CFO considered that this level of CIP was reasonable, taking into account the likelihood of an increased burden of regulation following the outcome of the Francis Report. The second assumption related to the release of transition funding.

There was discussion regarding the impact of the proposed changes to Monitor's regulatory framework. Although Monitor regarded the proposals as a simplification of its approach, the framework had the effect of a bias against Foundation Trusts with PFI schemes. This has been raised with Monitor, but it is felt to be significant enough to warrant a direct approach to the Chairman of Monitor.

Resolved to:

- 1. Receive the contents of the report; and**
- 2. Note the potential impact of Monitor's new Risk Assessment Framework and approve the Trust's response as set out in the report.**

D12/283 FINANCE AND ACTIVITY PERFORMANCE REPORT FOR THE PERIOD ENDING 31 JANUARY 2013

The Board considered the report presented by the Chief Financial Officer.

Resolved to: receive the contents of this report;

D12/284 AUDIT COMMITTEE UPDATE REPORT

David Ritchie, Chair of the Audit Committee, reported that the Committee had met on 7 February and received the standing updates from the External Auditor and Internal Audit team. The Committee had approved six reports from internal audit and approved the programme for next year's internal audit, with the addition of a review of the Trust's sickness management processes.

The annual accounts template had been improved and the Committee had considered an integrated report regarding complaints, claims and incidents. Additional comparator data for this report will be sought.

The Committee considered the Board Assurance Framework and was broadly satisfied with the work being undertaken with regard to assurance.

D12/285 INVESTMENT COMMITTEE VERBAL REPORT

There was no report as the Committee had not met since the last meeting of the Board.

D12/286 ANNUAL CYCLE OF BUSINESS

The Board considered the report by the Director of Corporate Affairs.

Resolved: To approve the Annual Cycle of Business and agree that the Chairman may make amendments during the year.

D12/287 THE SEALING & SIGNING OF A LEASE AGREEMENT BETWEEN BOOTS PLC AND THE TRUST FOR PREMISES IN BIRMINGHAM FOR THE PROVISION OF SEXUAL HEALTH SERVICES ADVICE CENTRE

The Board considered the report by the Director of Corporate Affairs.

RESOLVED To Authorise:

The Director of Corporate Affairs and the Land and Property Manager severally to exercise the powers of the Trust in relation to negotiating, approving and amending the Lease and any associated documents, without limitation save that such authority may only be exercised to the extent that the Lease is materially as described in the Report, and to do all such acts and things as may be required in order to give effect to the Resolution(s) resulting from the Report and implement the Lease including the finalising and delivery of all such notices, confirmations, applications, letters, transfers, appointments, certificates, powers of attorney, deeds, forms, notice of

drawing, notice of withdrawal or notice of utilisation and any other documents as required; and

any one or more Directors of the Trust and, in the case of any documents that are Deeds, the Foundation Secretary, severally to sign, execute and deliver the Lease and any associated documents save that, where any such other documents are Deeds, execution will be by any two Directors or a Director and the Foundation Secretary.

THE TRANSFER OF THE FREEHOLD TITLE OF WHITTALL STREET CLINIC FROM HEART OF BIRMINGHAM TEACHING PCT TO UHB NHS FT

The Board considered the report by the Director of Corporate Affairs.

RESOLVED To Authorise:

The Director of Corporate Affairs and the Land and Property Manager severally to exercise the powers of the Trust in relation to negotiating, approving and amending the Agreement and any associated documents, without limitation save that such authority may only be exercised to the extent that the Agreement is materially as described in the Report, and to do all such acts and things as may be required in order to give effect to the Resolution(s) resulting from the Report and implement the Agreement including the finalising and delivery of all such notices, confirmations, applications, letters, transfers, appointments, certificates, powers of attorney, deeds, forms, notice of drawing, notice of withdrawal or notice of utilisation and any other documents as required; and

any one or more Directors of the Trust and, in the case of any documents that are Deeds, the Foundation Secretary, severally to sign, execute and deliver the Agreement and any associated documents save that, where any such other documents are Deeds, execution will be by any two Directors or a Director and the Foundation Secretary.

THE SEALING AND SIGNING OF A LEASE AGREEMENT BETWEEN THE HEART OF BIRMINGHAM TEACHING PCT AND THE TRUST FOR PREMISES IN COLSTON HEALTH CENTRE, ATTWOOD GREEN, BIRMINGHAM

The Board considered the report by the Director of Corporate Affairs.

RESOLVED To Authorise:

The Director of Corporate Affairs and the Land and Property Manager severally to exercise the powers of the Trust in relation to negotiating, approving and amending the Lease and any associated documents, without limitation save that such

authority may only be exercised to the extent that the Lease is materially as described in the Report, and to do all such acts and things as may be required in order to give effect to the Resolution(s) resulting from the Report and implement the Lease including the finalising and delivery of all such notices, confirmations, applications, letters, transfers, appointments, certificates, powers of attorney, deeds, forms, notice of drawing, notice of withdrawal or notice of utilisation and any other documents as required; and

any one or more Directors of the Trust and, in the case of any documents that are Deeds, the Foundation Secretary, severally to sign, execute and deliver the Lease and any associated documents save that, where any such other documents are Deeds, execution will be by any two Directors or a Director and the Foundation Secretary.

D12/288 APPOINTMENT OF A NEW SUBSTANTIVE CONSULTANT IN DERMATOLOGY (SKIN LYUMPHOMA)

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

RESOLVED:

To APPROVE the appointment of a new substantive consultant In Dermatology (Skin Lymphoma)

D12/289 APPOINTMENT OF A CONSULTANT GERIATRICIAN WITH AN INTEREST IN STROKE MEDICINE

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

RESOLVED:

To APPROVE the appointment of a Consultant Geriatrician with an interest in Stroke Medicine

D12/290 RE-TENDERING FOR THE PROVISION OF HAEMODIALYSIS SATELLITE UNITS

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

RESOLVED:

To APPROVE the proposed tender process for the provision of haemodialysis satellite units.

D12/291 RESEARCH AND DEVELOPMENT SIR JULES THORN CHARITABLE TRUST BID

The Board considered the paper presented by the EDoD.

RESOLVED: to RECEIVE the update regarding the Sir Jules Thorn Charitable Trust research bid, as part of the ITM strategy

D12/292 TRANSFER OF HOSTING ARRANGEMENTS FOR PAN BIRMINGHAM CANCER RESEARCH NETWORK

The Board considered the paper presented by the EDoD.

RESOLVED: to AGREE the Pan Birmingham Cancer Research Network financial plans for 2013/14

D12/293 APPROVAL OF POLICY

The Board considered the paper presented by the DCA.

RESOLVED: to APPROVE the amendments to the Policy for the Development and Management of Controlled Documents.

D12/294 Any Other Business

[Redacted]

D12/295 Date of Next Meeting:

Thursday 28 March 2012 1.00pm Board Room Trust HQ QEMC

.....

Chairman

.....

Date