

BOARD OF GOVERNORS

Minutes of a Meeting of the
University Hospital Birmingham NHS Foundation Trust
Board of Governors held on 18 March 2008
The Morris Centre Club QEMC

Present: Sir Albert Bore (Trust Chairman)
Caroline Badley
Rita Bayley
Margaret Burdett
Paul Darby
Hazel Flinn
Marie Greer
Brian Hanson
Gwyneth Harbun
James Hutchings
Rosanna Penn
Martin Straker Welds
Anne Waller
David Ward
Erica Perkins

In attendance: David Burbridge (Director of Corporate Affairs & Foundation Secretary)
Mike Sexton (Director of Finance)
Fiona Alexander (Director of Communications)
Kay Fawcett (Chief Nurse)
Tim Jones (Chief Operating Officer)
Mike Sharon (Director of Planning and Performance)
Morag Jackson (New Hospital Project Director)

G08/01 Welcome and Apologies for Absence

The Chairman welcomed everyone present to the meeting. Apologies for absence were received from Kadeer Arif, Alan Bailey, Paul Brettle, John Buckels, Norman Cave, Michael Clarke, David Cox, Ruth Harker, Lt Gen Louis Lillywhite, Vincent Nichols, Geoffrey Oates, Bridget Pearce, David Spilsbury, Gisela Stuart, Barbara Tassa, David Tidmarsh, Joan Walker and Shazad Zaman.

G08/02 Quorum

The Chairman noted that a quorum was present and accordingly the meeting could proceed to business.

G08/03 Minutes of the previous meeting (5 December 2007)

The Minutes of the meeting of 5 December 2007 were accepted as an accurate record.

G08/04 Matters Arising

None

G08/05 Declarations of Interest

None

G08/06 Chairman's Report

The Chairman updated the meeting with regard to certain matters covered in his written report on the activities of the Board of Directors. With regard to the joint meeting of the Board of Governors and Board of Directors held on 5 March, the Chairman had been compiling a summary of the main points arising from that meeting. However this summary was not yet completed and he had not yet received feedback from all the groups. He asked Governors to let him have any further comments in relation to the subjects discussed at this meeting and said that he would follow up the outstanding feedback and then consider how the issues discussed at that meeting can be taken forward.

As regards item 2.3 concerning the UHB/Xchanging Payroll Bureau, the Chairman acknowledged that this had been a difficult time for the Trust. The quality of delivery varies considerably between the Stoke-on-Trent and Birmingham Bureau and the entire NHS had experienced difficulties with the McKesson software. Whilst it did appear that things were now improving and there were possibilities that other customers of this business will withdraw from their contracts and the Trust was looking at how these issues could be taken forward. There was discussion about the particular problems with the Stoke-on-Trent Bureau and the various factors that had contributed to the failures. The Chairman confirmed that the Executive Team were now closely monitoring payroll bureau activities in order to minimise damage to the Trust's reputation. With regard to the impact of the issues on the Trust's business plan for the future the Director of Finance said that whilst the risk to revenue contribution was acknowledged the amount allowed in the future business plans of the Trust in relation to the Bureau was so small that the size of the risk would not pose any significant consequences to the financial standing of the Trust.

Moving on to item 2.7, the Chairman informed the Board of Governors that the Associate Non-Executive Director who had chaired this Committee, Mary Thomas, had now resigned and the Board of Directors were currently reviewing the role of the Committee. One proposal under consideration was the amalgamation of the two sub-Committees of the Choosing Health Group into one group to focus generally on health issues.

The Chairman announced that the Board of Directors Task & Finish Group on Infection Control had now been stood down having added momentum to the Trust's Infection Control and Prevention Strategy. The new Chief Nurse was now in post and a new strategy had now been adopted.

The Board of Directors had proposed that a new Task & Finish Group consisting of three Non-Executive Directors and the Chief Nurse plus a number of Governors be set up to focus on the care agenda on more general terms. It may be that this group should include the role previously played by the Choosing Health Group.

There was discussion about this proposal and it was resolved that the Choosing Health Committee should be stood down and that Governors from the Public and Patient Governor sections should be invited to join the Patient Care Task & Finish Group. The Chairman said he would agree the numbers of Governors with the Chief Nurse once he had expressions of interest.

Finally the Chairman mentioned the Report of the Defence Select Committee mentioned in Section 2.10 of his report. This dealt with a number of issues and was a very positive outcome for the Trust.

The Chairman reported the resignation of Roy Green as Public Governor Northfield, due to his increasing work commitments. The Board of Governors acknowledged their thanks to Roy for his commitment to the Trust.

The Chairman continued that he had been talking to Governors about the future size and composition of the Board of Governors and intended to look at the size and role of the Stakeholder Governors in the future.

G08/07 Result of By-elections – Sutton Coldfield & Perry Barr

The Director of Corporate Affairs announced the result of the recent by-elections for the Sutton Coldfield and Perry Barr. Both seats had been contested and Hazel Flinn had been elected as Governor for Sutton Coldfield and Joan Walker elected to Perry Barr.

G08/08 Update on Cancellations

Tim Jones, Chief Operating Officer, updated the Board of Governors on the progress made in improving the situation regarding cancellations. There had been substantive improvements and the focus of the Board of Governors on this issue was appreciated.

G08/09 Appraisal of Non-executive Directors

At this point the Chairman and members of the Board of Directors present left the meeting. The Vice-Chair of the Board of Governors, Brian Hanson, reported that the Remuneration Committee of the Board of Governors had overseen the assessment and performance of the Chairman and the Non-Executive Directors. The Senior Independent Director, Mark Santer, had carried out the appraisal of the Chairman and had reported back to the Committee. It was considered that the Chairman had developed an excellent working relationship with the Board of Governors and had

performed well in relation to other bodies and in supporting the work in relation to Clinical Governance. The Board of Governors acknowledged that there had been a significant change in their involvement in the governance structure of the Trust. The Board of Governors endorsed the report from the Committee.

At this point, Mark Santer left the meeting and the Chairman returned. The Board of Governors meeting heard that the Chair had carried out appraisals of all the Non-Executive Directors, focussing on their particular duty to scrutinise and monitor the performance of the Trust. He reported that the attendance of all the Non-Executive Directors had been very good and that generally their performance was either acceptable or more than acceptable.

The Board of Governors accepted the report.

G08/10 Quarterly Infection Control Report

The Chief Nurse presented the Quarterly Infection Control Report to the Board of Governors. This was her first report to the Board of Governors since taking up her post and it covered the period up to the end of February. For the year to date the Trust have experienced 73 MRSA Bacteraemia which is a reduction on the previous year's figure for this period of 93. However there is still more work to be done and the Trust needed to move quickly to bring this figure down to below the target of 49. With regard to C.Diff the Trust had experienced 811 cases of this which meant that it had achieved its reduction target. The year to date it had experienced 138 cases so again there was further work to be done in this area. The Chief Nurse explained that everybody throughout the Trust was expected to challenge poor practice and the Trust would be focussing on the enforcement of policies with disciplinary action if necessary.

The Chairman confirmed that a letter had been received from Monitor regarding infection control. Following that, the Board of Directors had met with the Chief Operating Officer of Monitor, Stephen Hay and had set out what the Trust is doing in relation to this and why they have particular difficulties for example the size and the type of activity undertaken by the Trust. The Chairman considered that Stephen Hay had been satisfied with the actions being undertaken by the Trust. It was confirmed that deep cleansing would be an annual programme and that the interim strategy would be provided in detail to the Board of Governors. There was some discussion about the use of comparative figures for C.Diff and it was confirmed that the Health Care Commission did publish comparative data for C.Diff and MRSA looking at absolute figures and trend data based on bed days. With regard to C.Diff, the Trust was at the expected level for both indicators where as with MRSA the Trust was above the indicator for numbers per 1000 bed days but was doing better than the indicated figures for its trend of reductions. There was discussion about how to make public aware of the need to use gel and the use of volunteers to remind the public. There was also some discussion about the amount of

MRSA bacteraemia that are acquired outside the Trust and the difficulties in identifying these situations. The work being undertaken by the Trust in order to take forward this agenda with Community Trusts was discussed. In particular it was noted that there didn't seem to be much information available in GP surgeries about Infection Control. The possibility of other infectious diseases spreading through the Trust was discussed and the Chief Nurse confirmed that although the high profile given to MRSA and C.Diff may give the public a perception that these were the only two that the Trust was concerned about, the Trust did monitor other infectious diseases and she also explained that the infection control measures taken in relation to MRSA and C.Diff should also help in dealing with most other infectious diseases.

Resolved: To accept the report

G08/11 Draft Medium Term Plan

Mike Sharon, Director of Planning and Performance, presented the draft Medium Term Plan to the Board of Governors. He explained that this draft plan had not yet been considered by the Board of Directors who may well reconsider the strategic aims of the Trust. He asked the Board of Governors to note that the target for reductions in hospital acquired infection would probably be 25% higher. There were a number of amendments to the plan such as item 1.1.4 with reference to elective admissions should read non-elective admissions as the Trust was already screening all elective admissions for MRSA. There was some discussion about the hospital at night programme and it was confirmed that this was included in the scope of item 1.2. The Chief Operating Officer confirmed that there were two other projects being undertaken in relation to this, one of which was concerning electronic messaging and the other, the inclusion of the RASP chart on the PICS prescribing system.

G08/12 Draft Monitor Annual Plan 2008/9

The Director of Planning and Performance presented the draft annual plan to be submitted to Monitor for the coming financial year. He explained that the Board of Governors was seeing this document at an even earlier stage of production that it had last year and that the document was due to be submitted to Monitor at the end of May. However, at this stage Monitor has not yet issued its guidance as to what it wants to see in the actual plan. Additionally, the financial elements of the annual plan cannot be finalised until the end of the current financial year. One of the things the Board of Directors has to do is to assess any risks to Trust meeting its targets at the beginning of the year and declare these to Monitor. These are then revisited quarterly. The Financial Director confirmed that any variation in land values would not affect the financial plan as it was possible the financial position of the Trust allowed it to delay the disposal if market conditions dictated that being necessary.

G08/13 Core Standards Compliance

The Director of Planning and Performance presented the report to the Board of Governors. He confirmed that the Audit Committee had reviewed four of the core standards before their review had been selected where there were concerns about the Trust performance (three areas) for example, infection control, mandatory training and the condition of current buildings and one area where the Trust was comfortable that it met the standard. The Audit Committee had expressed its satisfaction with the evidence presented for the three areas where there were potential concerns about the Trust performance. However, in relation to Standard C13a the Audit Committee requested more up to date evidence be presented to the Board of Directors next week. Overall the Trust intended to declare that it was compliant with all core standards.

The Healthcare Commission also published benchmark indicators and these have now been received. The Trust was better than expected or at the expected level for most of these benchmark indicators although there were a couple there where the Trust had not performed as well as expected and this related to the incident reporting the proportion of serious incidences in relation to those reported on the ERIC database. Some work was being undertaken to investigate why this was the case.

The Vice-Chair of the Board of Governors asked Governors to let him have any comments they wish to make to be incorporated into a statement from the Board of Governors to accompany the declaration to the Healthcare Commission. The Director of Planning and Performance confirmed that he was still waiting for comments from South Birmingham PCT and the local Safeguarding Children's Board.

G08/14 BNHP Report

Morag Jackson, the New Hospital Project Director, presented the quarterly update to the Board of Governors. She confirmed that the business case for Major Medical Equipment would be considered by the Board of Directors in May and that the Director of Infection and Prevention Control was carrying out a complete review of the infection control measures for the new building. With regard to retained estate, no fixed plans had been made yet except in relation to the Wellcome building. The Trust was currently reviewing the use of additional space identified in the new building and what to do with the rest of the Queen Elizabeth site.

The Mental Health Trust buildings had been completed to a very high standard but it was acknowledged that their opening would have an impact on the Trust's neighbours. The issue of parking on adjacent streets by hospital staff and construction staff was a significant issue and all construction staff had been informed that they would face disciplinary action. It was acknowledged that the Trust needed to police this situation. The New Hospital Project Director explained the access issues as the New Road would not be in place until 2011/12 and therefore construction traffic using Leasow Drive would continue for the foreseeable future. The Balfour Beatty Community Liaison Officer continues to assist the Trust in

managing these issues.

With regard to television reception, the Trust was now working with residents to find a solution and was prepared to make a financial contribution to this. It was acknowledged that the switch-over to digital did make this more of a difficult issue.

Moving on to the Selly Oak site, the Trust was still corresponding with Birmingham City Council regarding the Special Planning Guidance and working with its advisors in looking at the optimum time to go out to the market to find a developer. Following the handover of the Mental Health Trust Buildings, the Healthcare Commission had inspected the new building and had been pleased with the fact that clinical services were at the heart of the design and also the maturity of the relationship between the private and public sector organisations.

Consort was now able to allow small groups of people to visit the New Hospital Site. Health and Safety remained a primary consideration of this so these groups needed to be limited. Where possible, Governors will be invited to take part in these visits. In addition it is proposed to hold two fun days at the end of August, one focussing on engaging with stakeholders and one with the local community.

The NHPD confirmed that the project had enjoyed an extremely good safety record and so far there had only been two reportable incidents, neither of which was a fatality.

There was some discussion about what would happen to equipment in the existing hospitals and it was noted that the equipment which had a useful life would be transferred to the New Hospital. The Trust has operated a deliberate policy of keeping equipment past its normal life provided that it had no clinical implications and it will be reviewing what should happen to this old equipment when the move to the New Hospital takes place. Whilst the Trust appreciated the attractiveness of donating such equipment to developing countries, the issue of liability was one that needed to be dealt with. The issue of construction workers from the Selly Oak Road Works parking on streets near to the Trust was discussed.

Margarett Burdett left the meeting.

G08/15 Quarterly Performance Indicators Report

The Director of Planning & Performance presented the Quarterly Performance Indicators Report to the meeting

Resolved: to receive the report

Caroline Badley left the meeting.

G08/16 Quarterly Finance & Activity Report

The Director of Finance, Mike Sexton, presented the Quarterly Finance & Activity Report to the meeting. He reported that they had been having some discussions regarding provisions for double running costs with the Auditor and had reached the conclusion that full provision could not be made in this year. This meant that there would be a surplus of approximately £12m in the final accounts.

The Finance Department is currently running through a number of scenarios in order to ensure the Hospitals' finances over the next few years. The Director of Finance was also able to report that he had had a discussion with the Chief Operating Officer of Monitor, Stephen Hay, who had expressed comfort in the preparations that the Trust was making for the financial implications of the move into the New Hospital. The proposed surplus was still slightly below that of the national average for Foundation Trusts and the Trust's liquidity was very good which was important for the Trust's ten year projection.

Resolved: to receive the report.

G08/17 Declarations of Interest

The Director of Corporate Affairs presented the report regarding declarations of interest to the Board of Governors.

Resolved: to accept the declaration of interests and approve that they be entered in the Register of Governors Interests.

G08/18 Governors' Feedback

Rosanna Penn asked whether all Governors could be given access to the National Governors' Association website. It was agreed that the Director of Corporate Affairs would look into this and notify Governors how they could have access. It was also agreed that Governors would meet with the Chairman with a view to giving feedback from attendance at this association and other events such as the seminar held by Monitor to the Board of Governors as a whole.

G08/19 Any Other Business

The Schedule of Board of Governors' Seminar was agreed. It was agreed that the seminar in April would not be held and that the Seminar in May would look at the National/Regional Health Economy and how that would impact on the medium and long term positioning of the Trust

G08/18 Date of Next Meeting

Thursday 5 June 2pm The Morris Centre Club QEMC

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Chair

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Date