

BOARD OF GOVERNORS

Minutes of a Meeting of the
University Hospitals Birmingham NHS Foundation Trust
Board of Governors held on 19 September 2011

Trust Headquarters Meeting Rooms 1 & 2 QEMC

- Present:
- Sir Albert Bore (Trust Chairman)
 - Margaret Burdett (Vice Chairman)
 - Kadeer Arif
 - Prof David Cox
 - Edith Davies
 - John Delamere
 - Dr Tom Gallacher
 - Jamie Gardiner
 - Ruth Harker
 - Cllr James Hutchings
 - Rabbi Margaret Jacobi
 - Valerie Jones
 - Colin McAllister
 - Patrick Moore
 - Tony Mullins MBE
 - Erica Perkins
 - Susan Price
 - Surgeon Vice-Admiral Philip Raffaelli
 - David Spilsbury
 - Barbara Tassa
 - Prof Ian Trayer
 - Shirley Turner
- In attendance:
- Julie Moore (Chief Executive)
 - David Burbridge (Director of Corporate Affairs & Foundation Secretary)
 - Gurjeet Bains (Non-Executive Director)
 - Clare Robinson (Non-Executive Director)
 - Sarah Snowden (Corporate Affairs Assistant)
 - Viv Tsesmelis (Director of Partnerships)
 - Kevin Bolger (Chief Operating Officer)
 - Tim Jones (Executive Director of Delivery)
 - Morag Jackson (New Hospital Project Director)
 - Mike Sexton (Executive Director of Finance)
 - Dave Rosser (Medical Director)
 - Michele Morris (Deputy Chief Nurse)

Members of the public in attendance
Geoffrey Salt – Oxford Radcliffe Hospitals
Aprella Fitch – Trust Member and Ambassador
Mohammed Mir – Pfizer Inc.

G11/036

Welcome and Apologies for Absence

The Chairman welcomed everyone present to the meeting.

Apologies for absence were received from
John Coleman
Valerie Jones
Prof Edward Peck
Erica Perkins
Susan Price

G11/037

Quorum

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

G11/038

Minutes of the previous meeting (17 June 2011)

The Minutes of the meeting of 17 June 2011 were accepted as an accurate record, amended to record Kadeer Arif and Surgeon Vice-Admiral Philip Raffaelli as present.

G11/039

Matters Arising

G11/023 – The Chairman reported that the recruitment exercise for the two non-executive director posts had not yet completed, as prior commitments had meant that it had not been possible to interview two of the candidates until 28 September. The chairman had written to Governors, giving notice that the seminar originally scheduled for 29 September would now become a formal meeting of the Board of Governors to consider the recommendations from the Nominations Committee.

G11/025 – The Director of Corporate affairs reported that monitor had not yet approved the proposed constitutional amendments. The proposals, particularly those regarding the appraisal and assessment of governors, were considered to have implications for all FTs and had been referred first to Monitor's Strategy Committee and then to the Board of Monitor, which was due to consider the matter on 28 September. Because of the delay, it may be necessary to further extend the term of those governors extended at the previous meeting.

G11/040 **Declarations of Interest**
None

G11/041 **Chairman's Report**
The Governors considered the report presented by the Chairman.

Resolved: to accept the report

G11/042 **BNHP Progress Report**
The Governors considered the paper presented by the New Hospital Project Director, who further reported that the majority of Outpatients had been moved into QEHB since the last meeting of the Board of Governors. There were three more moves to be made, which were neurosurgery next week, the remainder of outpatients in October and laboratories in the early part of 2012. All moves had proceeded in accordance with the planned timetable and had gone smoothly. The Out Patients Pharmacy was utilising a robot and was achieving waiting times of between eight and 15 minutes, which was a considerable improvement.

Work was now being undertaken with the Trust's design team, English Heritage and the Prince's Regeneration Trust with regard to the retained estate on the QE site. There is no substance to any rumours that the QE site will be used for high density housing; in any event this would be inconsistent with the terms of the lease. Work on the plaza development was due to commence shortly and is scheduled to be completed in early 2012. The NHPD will be undertaking a review of signage from University station.

Some work outside the Emergency Department was taking place, including some work on the canopy and repairs to cracks in the road surface. An improved cleaning regime is being implemented and the temporary fencing around this area would be replaced by thick glass by the end of the year. There was discussion regarding the canopy leading to the main entrance from the visitor car parks. It was confirmed that this was not intended to provide complete protection from inclement weather.

The Trust will submit an application for outline planning consent for the Selly Oak site in November and had commenced public consultation. The Trust's timescale for this site will be driven by the market and this had no implications for the Trust's financial plan. Options for accommodating office staff currently at the Selly Oak site at the QE site or off-site were being considered.

There was discussion regarding smoking, particularly around the atrium entrance to QEHB. The Trust's policy was being reviewed and there was acknowledgement of the difficulties in stopping patients and visitors from smoking on the site. The NHPD was considering where, if at all, an area for smoking could be provided.

Resolved: To accept the progress reported in the New Hospitals Project Director's report.

G11/043

Quarterly Performance Indicators Report

The Board of Governors considered the report presented by the Executive Director of Delivery. The Trust continues to have problems with late referrals, which impacted on its ability to achieve the 62 day cancer targets and is in discussions with poor referrers.

The Chief Operating Officer reported that a new patient management system would be implemented in the Emergency Department in October, which should assist in monitoring achievement of the new A&E targets.

There was discussion about training of junior doctors with regards to drug assessments. It was confirmed that all new starters were reassessed until they achieved the required standard. Training on PICs was part of induction for new doctors and PICs mitigates prescribing risks arising from use of locums. The Medical Director reported that data from PICs had identified that FY2's make most prescribing errors. The PICs system mitigates the risk of this to patients and all Foundation Year doctors undertake online training across the West Midlands.

It was further reported that the Trust provides a special induction programme for doctors from elsewhere in the EU and that such doctors are each mentored by a consultant.

The Trust had over-recruited Junior Specialist Doctors in order to mitigate the risk of unfilled Deanery posts. This policy reduces agency cost and contributed to better quality care as JSDs are trained to use Trust systems.

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

G11/044

Quarterly Care Quality Report

The Board of Governors considered the report presented by the

Deputy Chief Nurse. The results of the National Outpatient survey were expected in Autumn and these would be considered by the Care Quality Group. Falls assessments were now completed electronically, allowing improved monitoring which in turn has led to a better level of assessment and a decrease in serious harm from falls. Other trusts have approached the Trust for advice on this type of system. The care rounds are also having a positive impact on the completion of assessments.

The Trust had undergone a peer review for safeguarding, with a positive outcome. Investigations into the small number of same sex accommodation breaches have shown that the decisions made were justifiable for clinical reasons and the Trust is performing well against this requirement. Comfort care packs are now being provided for patients on End of Life pathways, with assistance from QEHB Charities. Counsellors were also available to assist such patients and their families.

The numbers of complaints continues to fluctuate and the Chief Nurse is reviewing how the Trust handles all negative feedback to ensure that improvements are made where necessary. It was agreed that the Board of Governors would receive an annual report on complaints trends over a longer timescale.

ACTION: Chief Nurse

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

G11/045

Quarterly Infection Control Report

The Governors considered the paper presented by the Deputy Chief Nurse. The Trust was currently on or below trajectory for MRSA and C.Difficile. With regard to the E.Coli bacteraemia, it was confirmed that all bacteraemia are reported but only with regard to the total number, rather than by individual strain.

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

G11/046

Quarterly Finance and Activity Report

The Board of Governors considered the report presented by the Executive Director of Finance. The Trust has generated a surplus of just under £0.5m to date, broadly in line with its plan. Monitor has carried out its Quarter 1 review of the Trust and has no concerns regarding the financial performance.

Significant cost pressures are occurring in some services. Actions are in place regarding use of locum junior doctors. There appear to be several reasons behind nursing agency spend, including a high rate of maternity leave in critical care and staffing for additional beds opened to alleviate pressure caused by Delayed Transfers of Care. The Trust's level of activity remains buoyant in comparison to other local trusts, reflecting the amount of tertiary and trauma work undertaken.

The FD confirmed that the £180,000 adverse variance reflected slippage in the CIP programme for the year. However, he did not consider this a cause for concern as CIPs are phased over the year in equal twelfths, to ensure an early focus on achievement. Whilst it was the case that some reserves were being used, these had been deliberately set aside to encourage tight financial management within the Divisions.

There was discussion about the impact of the 30 day readmission penalties and the 30% reduced tariff for A&E activity above baseline. The FD confirmed that the potential impact of these measures would not result in direct financial pressure on the Emergency Department. Additionally, the SHA has agreed that the 30% tariff will not apply to trauma and neurosurgery cases.

The Governors agreed that the finance team and Trust staff in general should all be congratulated for achieving financial balance for the 13th consecutive year.

Resolved: to receive the contents of this report.

G11/047

Governors' Feedback

None

G11/048

Timetable/process for Appointment of External Auditor

All members of the public others in attendance left the meeting. The Board considered this paper presented by the DCA.

Resolved:

- 1. To approve the proposed process and timetable; and**
- 2. To nominate Tom Gallacher and David Spilsbury, with Ian Trayor as reserve, as representatives to meet with the Audit Committee Task & Finish Group.**

G11/049 **Any Other Business**
None

G11/050 **Date of Next Meeting**
Thursday 29 September 2011
Meeting 10am
Board Room Trust Headquarters QEMC

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Chairman

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Date