

Held on Wednesday 6 January 2009 at
10.00 am in the Board Room

Minutes

Present: Non-Executive Directors Executive Directors
(including Board members)
(‘v’ denoted Voting Executive)

Mr Chris Creswick (Chair)
Dr George Reah
Mr Ian Turner
Mr Grahame Paine

Mrs Lorene Read (v)
Ms Carolyn Moore (v)
Ms Bronwen Bishop (v)
Dr Tricia Woodhead

Apologies: Mrs Alison Kingscott, Mr Mike Lyall, Mr Rob Little, Mrs Sally Calverley, Ms Jude Ferguson, Mr Nick Gallegos, Ms Jules Martin, Mrs Chris Bryant

In Attendance: Mrs Caroline Welch, Mrs Sue Palmer, Mrs Sally Moores, Mr Victor Benson Chantry Vellacott), Mrs Beverley Peacock (Chantry Vellacott), Mr Paul Slade (North Somerset District Council), Mr Jonathan Cook

The meeting commenced at 10.02am.

Actions

Mr Creswick noted the high number of apologies due to the severe weather conditions and congratulated those present.

361.10

Declarations of Interest

There were no declarations of interest.

362.10 Minutes and Matters Arising from the Meeting Held on Wednesday 4 November 2009

The minutes were agreed as a correct record, subject to the following amendments:

Actions

Page 4, 6th line to read:

Mrs Read, Mr Gallegos and Mr Chris **Born** from NHS North Somerset had given a presentation at a Capital Planning Meeting at the Strategic Health Authority.

Page 10, Minute 329.09 Presentation – Safety & Quality, 3rd paragraph to read:

Mr Creswick confirmed that the FT process would incorporate 28 Governors, **of which 21 would be patients, public and staff.** This would enhance the visibility of safety and quality in the Trust's agendas. The Board shared the desire to involve more service users at both a strategic and organisational level.

Page 12, the last bullet point to read:

It was noted that moving from UK to International Standards **would** only **have** an impact of £40k in the accounts.

Table of Matters Arising

Minute 315.09 – Green Travel Plan

A paper is expected to be presented to the Board in March.

JM

Minute 318.09 – Full Business Case for the Emergency Department

The Board agreed that there was a requirement for regular assurance around the ED build process given the critical operational difficulties. With Board meetings currently every other month, Mrs Read will provide a strategic update on a monthly basis by way of a 1 page progress report which will be circulated to all Board members.

LR

Minute 319.09 Report of the Chairman

The League of Friends had confirmed to Mr Creswick that they would welcome some form of commemoration of Mr Colin Dickens, their late Chairman, in the light of the £3 million that had been raised for the Hospital whilst he was in post. The matter would be taken forward in discussion with the league of Friends regarding the form and location of a suitable commemorative feature.

Actions

Minute 321.09 – Standing Orders, Financial Instructions and Scheme of Reservation and Delegation

Work was ongoing and a complete set of the revised documentation would be sent to all Board members in due course.

RL

Minute 332.09 – Quarterly Communications Report

Research was being carried out into the small community newspapers and a paper would be brought to the March Board meeting.

CW

Minute 327.09 - Report of the Director of Nursing and Director of Infection Prevention & Control

Dr Reah asked whether, in relation to Minute 327.09 regarding the NHS Performance Framework Status, the Trust had demonstrated the required evidence by the end of December.

Ms Moore reported that the Performance Framework of the NHS would continue to record the Trust as Under Review for Quarter 3. However this could be improved to 'Performing' at the end of Quarter 4 of the actions taken on the patient experience feedback were accepted.

It was noted that there was a need for a cohesive operational solution to obtaining this feedback which was compatible with information systems and resources available.

363.10 Report of the Chairman

There was no further report for the Board from the Chairman, whose written report was noted.

364.10 Report of the Chief Executive

Mrs Read gave a further update to her written report during which it was noted that:

- With regard to the Foundation Trust application, the Trust will be submitting the 2nd draft of the Integrated Business Plan ('IBP'), to the PCT as feedback was required.
- The Trust requires written formal confirmation from the SHA that formal consultation on the FT Process can begin on 4 March 2010, if it is to proceed this

Spring.

Actions

New Emergency Department

- The SHA have approved the Outline Business Case ('OBC') for the new Emergency Department, and the Full Business Case ('FBC') will be discussed by the SHA Board at the end of January.
- Mrs Read agreed to circulate the Overview & Scrutiny Committee report regarding discharge to all Board members.
- Discharges would be addressed in the context of the report from the Overview and Scrutiny Committee, which had proved very useful.

LR

Further discussion took place on the timings of the decant and Mr Turner requested regular updates and assurances on the timings of the project, together with details of any slippage and difficulties encountered.

LR

It was agreed that Mrs Read would also circulate a copy of the Gateway Report Executive Summary to Board members.

Update on Dr Foster Report

Ms Bishop arrived at the meeting at 11.05am and gave the Board an overview on Dr Foster during which the following was noted:

- Dr Foster had made contact and representatives had visited the Trust.
- It was apparent that the Trust had failed to expand enough on certain information when given the opportunity to do so in the original survey.
- Dr Foster have recognised that 5 months out of 6 months NPSA data could not be uploaded, with the resultant penalty not a fair reflection of the Trust's position.
- Dr Foster have now allowed the Trust to upload data on to the website so patients can view it.
- Details of the problems that led to the Trust's poor standing in the survey have been sent to the Care Quality Commission, the SHA, the PCT, the Overview & Scrutiny Committee and the local MP so that all may have a complete understanding.
- The Trust had received only 2 negative letters as a response to the Dr Foster report. Mrs Read reported that she was still receiving positive letters and some patients had written to the press themselves regarding the positive experiences they had received at the Trust.

Actions

The Board suggested that the Dr Foster Survey quality assurance processes were open to criticism, but also recognised that the Trust had failed to understand the questions in full and the experience had undermined a lot of good work within the Trust. It was agreed that the Trust must develop better systems for completing and signing off returns, based on an informed understanding of the survey's questions and the consequences of errors.

Dr Woodhead arrived at 11.15 am.

The Board noted the report from the Chief Executive.

365.10 Patient Safety Improvement Programme

Dr Woodhead informed the Board of the work stream's progress in relation to the Patient Safety Improvement Programme, during which it was noted that:

- The Trust is now using the 'SBAR' methodology trust-wide (situation, background, assessment, recommendation). The methodology adds a consistency to handovers etc.
- Both Dr Woodhead and Angela Lovell were working hard on the walkabouts and a report will be circulated to Board members.
- The success of the walkabouts has been staff motivation. They have felt 'listened to' and know that the Executive Team and Board members have first hand experience of their issues.
- Issues have been picked up during the walkabouts and a mechanism is required whereby they are analysed by clinicians or relevant personnel and responded to, even where the Trust is unable to do anything about them.
- Thought will be given to the structure of the CQG Patient Safety and the Governance structures and taken to the Care Quality Governance Committee.
- Dr Woodhead agreed to provide details to all Board members so that they would be able to log-in to the website and analyse the data, including the Trust's position in relation to the South West.

PW

PW

The Board noted the report and the increasing number of items appearing in the Patient Safety Improvement Programme.

366.10

NHS Constitution

Actions

Mrs Palmer advised the Board that by the end of February the Trust will need to use the self assessment toolkit to ensure that there are no 'gaps' The data will be analysed and the Trust will be benchmarked.

Mrs Read proposed that Mrs Kingscott act as the designated Director for the NHS Constitution. Dr Reah queried the fact that Mrs Kingscott was not a voting member, however Mrs Read advised that she would be delegating authority in this regard.

All Board members requested a copy of the draft assessment for the seminar on 3 February and then any questions can be addressed, before a sign-off of the Baseline Assessment for the SHA in March.

AK

The Board:

- **received the briefing about the NHS Constitution**
- **nominated Mrs Kingscott to become 'Constitution Champion'**
- **noted the proposed actions to implement the Constitution**

367.10

Care Quality Commission – Registration Process

Ms Bishop updated the Board in relation to the registration process for the Care Quality Commission as follows:

- The Trust must be able to provide evidence to demonstrate its compliance against the Commission's requirements.
- Evidence files need to be developed as the Care Quality Commission could arrive for inspection, unannounced, at any time.
- Responsibility had previously been at Executive level however this was now with the Divisions.
- Evidence files need to be up to date and available at all times, not just the year end.
- Registration will have taken place before the next official Board meeting.

Ms Bishop confirmed that the resources in Divisions were being increased by the appointment of Governance Co-ordinators.

Actions

The Board discussed issues in relation to governance and the need for governance to be integrated within the whole Trust and not just seen as an 'overlay'. Gathering evidence should be seen as an integral part of everyday activities. It was suggested that monitoring the evidence by performance management may be a solution, however an IT based solution would be the preferred option, providing informed access for all those responsible for aspects of governance in their work.

The Board approved the proposed evidence collation and Trust Board assurance process arrangements post April 2010.

368.10 Committee Reports

Audit & Assurance Committee: Approved Minutes of the Meeting held on 21 October 2009 and Summary of the latest Meeting held on 16 December 2009

Mr Turner gave an overview of the Audit & Assurance Committee meetings as follows:

- the Minutes approved on the 21 October were in fact those from August and not as stated.
- There were many good Internal Audit results received at the meeting on 16 December.
- A report was received from on the ALE process and there were now a list of actions which were being tracked. Real progress was being made.
- Mrs Read expressed concern at the Internal Audits and questioned who decided whether the outcomes were satisfactory and whether limited assurance was acceptable. It was agreed there needed to be a 'loop' around actions taken from the internal audit reports on operational actions.
- Mrs Read would now see all internal audit reports and Mr Turner agreed to discuss any issues arising with the Chairman and Chief Executive, and to pick up on any points thereafter.
- Discussion would take place between Mrs Read and Mr Turner as to where audit sat within the Trust.

LR/IT

Care, Quality and Governance Committee: Approved Minutes of the Meetings held on 8 October 2009 and 12 November 2009 and Summary of the Latest Meeting held on 10 December 2009

Actions

Mr Turner observed that there was an issue with the timings between Committee meetings and reporting to the Board meaning that certain Board meetings received more than one set of papers from a Committee.

It was suggested that monthly Board meetings be re-instated.

Mr Paine discussed the child-protection training programme, and it was noted that staff must be compliant with Level 1 by 16 January, the Trust was currently 85% compliant.

Both Mr Creswick and Mrs Read were concerned about the consistency of interpretation and understanding on Minutes and the Summaries of Committee meetings. Issues arise with differing Chairs of Committees. It was agreed that any issue directly relevant to the Board, or which needs Board attention, is flagged appropriately.

The Board noted the summaries.

370.10

2010/2011

Overview Position on Finance

In Mr Little's absence, Mr Jonathan Cook presented the Framework for Business & Operational Planning 2010/2011. During discussion it was noted that:

- Initial plans have not yet been produced.
- There is no uplift this year.
- Provision needs to be made for the approval of the 2010/2011 Budgets.

The Board were advised that the Trust was now in discussion with the SHA and the North Somerset PCT in relation to the year end position.

The Board noted and approved the content of the paper, subject to the point regarding the budget approval process.

370.10

Finance Report

Actions

Discussion took place on the Trust's financial position for Month 8 (April – November 2009) during which the following was noted:

- Clarity is required regarding the outcome of the discussion with the SHA.
- It was noted that a serious increase in medical expenditure had occurred in the previous 2 months amounting to £263k overspend.
- There had been a lack of predictability around figures for October and November.
- The figures show the worst case position if actions taken in December do not result in real savings.
- Mr Paine requested further clarification of the table of page 5 of the report, which Mr Cook will provide.
- It was agreed that the tables 1 – 8 of the report should present a consistent exception report covering trend analysis and variance reporting.
- It was further agreed that pay and non pay expenditure would be split.

RL

RL

RL

Further discussion took place regarding the impairments that the Trust will have to accommodate, in particular with regard the land and buildings which could possibly be up to - £800k.

It was agreed that the trading surplus cash position and net surplus after impairment needs to be clearly spelt out in subsequent reports.

The Board noted the content of this report.

371.10

Audit Commission: Annual Audit Letter 2008/2009

Mr Turner presented the final Annual Audit Letter, the key points of which were to be found on page 5.

Mr Turner will speak to the Audit Commission regarding the position regarding management of consultant productivity.

The Board noted that on the ward staffing the Trust came out better than average but there were differences at ward level. Ms Moore confirmed that she was producing a paper regarding the issue for the next Board meeting.

CM

The Board noted the contents of the Annual Audit Letter.

372.10	Performance Report	<u>Actions</u>
	<p>The Board noted the new style and presentation and appreciated that the document was still under development. During discussion it was noted that:</p>	
	<ul style="list-style-type: none"> ▪ Of the 127 headings there must be a performance target where possible, and where no target exists there must be a performance figure agreed by the Executive Team. 	
	<ul style="list-style-type: none"> ▪ It was agreed that there will be a rolling 13 month figure and the report still needs YTD figures. 	CB
	<ul style="list-style-type: none"> ▪ An exception report is required where the Trust is not delivering on performance. 	CB
	<ul style="list-style-type: none"> ▪ The Board agreed that the website should contain either a pop-up or some other form of explanation of the definitions for each performance target to prevent misunderstandings. 	CB/CW
	<p>The Board received and accepted the Performance Report and agreed the measures being proposed to improve performance.</p>	
373.10	ALE 2009/2010	
	Ms Bishop left the meeting at 13.40pm	
	<p>Discussion took place regarding the Auditors' Local Evaluation during which the following was noted:</p>	
	<ul style="list-style-type: none"> ▪ Mr Turner advised that an excellent presentation had been given to the Audit & Assurance Committee. The Trust now knew exactly what they had to do to move from the Level 2 to a Level 3. Mr Hirst is now in the process of pulling everything together to satisfy the evidence requirements. 	
	<ul style="list-style-type: none"> ▪ Issues have been identified and it is likely that next year the Trust will almost certainly be a Level 2 but will be in a far better position to gain a Level 3 for the following year. 	
	<ul style="list-style-type: none"> ▪ The Estates Strategy requires further definition. Mrs Read requested the finalised Estates Strategy by the end of January. 	AK
	<ul style="list-style-type: none"> ▪ The Accelerator tool does appear to be working and it is excellent. 	
	<ul style="list-style-type: none"> ▪ Mr Turner expressed interest in obtaining the additional module for the Accelerator software which would cover the Care Quality Governance data, as it made sense to have a single data repository for all data regulators. Mr Turner will speak with Executive Directors about obtaining the 	IT

extra module.

Actions

The Board noted the contents of the report.

374.10 Equality & Diversity Report

The Board considered the Equality and Diversity Report prepared by Mrs Kingscott which updated the Board on some of the work undertaken during the last 12 months in delivering against the Trust's Single Equality Scheme and Equality and Diversity Action Plan.

Mr Paine commented that the Trust does this type of work extremely well and he has been very encouraged by what he has heard from people talking about it.

The Board noted the paper and confirmed its support to the Trust in the continuing work to embed Quality and Diversity throughout the organisation.

375.10 Register of Sealed Documents

There were no documents sealed in November and December 2009.

The Board received the Report on the Register of Sealed documents.

376.10 Any Other Business

Mr Creswick moved a motion to exclude the public from the 'Closed' session, and this was approved.

The meeting concluded at 13.50pm

377.10 DATE OF NEXT MEETING

Wednesday 3 March 2010 at 10.00am in the Boardroom