

Public Trust Board Meeting

15.00 – 17.00

5th October 2009

Board Room, Trust Offices

MINUTES

Present:

Name	Initials	Title
Joanna Foster	JF	Chair (in part)
Jan Fowler	JFo	Chief Executive Officer
Michael Rogerson	MR	Non Executive Director (Chair in part)
Chris Goard	CG	Non Executive Director
Andrew Carr	AC	Non Executive Director
Angela Coulter	ACo	Non Executive Director (in part)
Sue Dopson	SD	Board Advisor
Tony Berendt	TB	Medical Director
Sara Randall	SR	Director of Operations and Performance
Bev Edgar	BE	Director of Workforce and Organisational Development
Kevin Davis	KD	Assistant Director of Finance

In attendance: Nicki Sullivan – Minutes
 Kathy Walsh – PALS and Complaints Manager (in part)
 John Marshall – Head of Estates (in part)

Summary of key points/items approved

- Key Point 1: Paediatric Rheumatology Business Case approved**
- Key Point 2: Statement of Readiness in relation to Flu Pandemic approved**
- Key Point 3: Expenses Policy ratified**

Item No.	Action
09/10.54	Welcome and Apologies <ul style="list-style-type: none"> • Apologies were RECEIVED from Jennifer Howells, Dale Haddon and John Adsetts. Geoff Feasey of the NOC Network also sent apologies. • JF noted that this was John Adsett's last official meeting although he would attend the Private Trust Board on 2nd November. The Board officially THANKED John for his invaluable contribution and NOTED the huge debt of appreciation owed to him for his long and active service.
09/10.55	Declaration of Conflicts of Interest <ul style="list-style-type: none"> • No declarations were made.
09/10.56	Minutes of the Public Trust Board Meetings Held on 3rd August 2009 <ul style="list-style-type: none"> • The minutes of the public Trust Board meeting held on 3rd August 2009 were APPROVED as an accurate record.
09/10.57	Matters Arising <ul style="list-style-type: none"> • SR confirmed that a CRS training plan would form part of a project gateway in response to MR's query.

09/10.58 Reports from the Chair and Chief Executive

- JF noted that the Non Executive Directors (NEDS) were continuing to develop relationships with NEDS in other Trusts & to attend AGMs where possible.
- JFo summarised her report and noted the challenge of continued over performance to the Trust's financial position. Discussions with the PCT have reached a point of consensus, the detail of which is currently being confirmed.
- Oxfordshire held a recent system wide planning event to consider the NHS funding challenge post 2011. A range of work streams were identified to optimise cost efficiency and effectiveness.
- **H1N1 Swine flu** – numbers continue to rise with an expected peak in October. The Trust has run a desktop test of its Flu Plan and key staff also attended a Strategic Health Authority (SHA) event designed to stress test cross service readiness. A programme for seasonal flu vaccinations is in place with a similar plan for swine flu vaccines pending a timetable for distribution.
- **Health Innovation and Education Clusters (HIEC)** – The Thames Valley region is preparing a bid for funding for this initiative. This is a relatively late submission due to previous concentration on the Academic Health Science Centre (AHSC) bid. The bid is being led by Oxfordshire and Buckinghamshire Mental Health Trust (OBMH) and the deadline for submission is 30th October 2009. The governance of Board sign off on the bid was discussed and it was **AGREED** that a Memorandum of Understanding should be prepared to provide the basis for the Boards level of engagement. SD noted that the Said Business School is involved in bids for funding for similar initiatives and agreed to liaise with TB to ensure a joined up approach.
- **Care Quality Commission (CQC) Rating** – it was **NOTED** that the Trust's performance for 2008/9 would be published on 15th October 2009. The Trust will receive notification of its results on 13th October 2009. The "Use of Resources" score will be **good** as it is based on the ALE rating which has already been confirmed.
- **NHSLA Standards** – The Trust underwent an informal assessor's visit prior to formal assessment in January 2010.
- **Celebrating Success** – the Trust's event for recognition of staff achievement was confirmed as 23rd November 2009 from 14.00. JF reminded everyone that this is a very good opportunity for the Board to appreciate the hard work and achievement of staff colleagues & hoped NEDS would be able to attend.

09/10.59 Patient Story

- The aim of this exercise is to bring the patient experience to the fore as the context for Board decision making.
- Kathy Walsh presented a case whereby a patient progressed through the system only to be cancelled by the Consultant surgeon on the morning of the proposed operation. The effect on the patient and family were highlighted

09/10.60 Director of Infection Prevention and Control's Annual Report

- TB summarised the report and highlighted the huge improvements in infection control behaviours and procedures noted over the previous year.
- The Board **RECEIVED** the report.

09/10.61 Statement of Readiness – Pandemic Flu and Flu Plan

- SR summarised the statement, which the National Flu Director had asked be presented to each NHS Trust Board in its public session.

- It was **NOTED** that the Trust's Winter Plans had been linked in with the pandemic and surge planning and ensure resilience.
- SR confirmed that the plans had been stress tested. Main concerns remained around workforce planning, pressure on the ambulance service in particular and procurement issues.
- The Board **NOTED** the potential for a change in service if the Trust were required to act as a step down facility for the John Radcliffe (ORH) and Churchill hospitals and a step up facility for those whose community care packages had broken down.
- The Board **APPROVED** the statement of readiness.

09/10.62 Paediatric Rheumatology Business Case

- SR summarised the case which has been prepared following a significant and sustained increase in demand for this service.
- The recommendation to commence a staged implementation with full implementation by April 2010 was **NOTED**.
- It was further **NOTED** that the risk of a drop off in demand was low due to the geographical range covered and that, due to the different skills required, it would not be possible to cover the service with adult rheumatology specialists. Finally the support of the ORH in relation to paediatric inpatient services connected with this proposal was **NOTED**.
- CG queried whether demand would be subject to management programmes in future. JFo confirmed that the specialist commissioners had positively engaged with the proposal and the wide spread of areas covered mitigated the risk of excessive demand management in one area.
- AC queried the long term strategic direction of the service in relation to the Children's Hospital at the ORH site. SR confirmed that a joint appointment with the ORH had been discussed but it was not deemed possible at the time. It was agreed that a long term view for the service was needed but that this appointment was pressing in order to maintain the viability of the service as it stands. It was **AGREED** that the ORH should have involvement in the appointment process and the possibility of an honorary contract underlining the ORH's buy in should be investigated.
- The Board **APPROVED** the business case.

09/10.63 Summary of Patient Safety Visits

- JFo summarised the report which detailed the results of the visit programme covering the last 6 months.
- MR noted that several deadlines had expired and asked for an update. JFo confirmed that the process is for these to be confirmed at the subsequent visit.
- The Board **RECEIVED** the report and **CONFIRMED** that it was a useful mechanism for providing assurance.

09/10.64 Performance Report including Monthly Finance Report

- It was **AGREED** to review the report by exception.
- SR summarised areas of concern within Operations. It was **NOTED** that the targets for hospital cancellations had been breached. It was **NOTED** that the mobile theatre has been recalled to deal with capacity issues. It was **NOTED** that Productive Ward data was being collected quarterly. SR requested that the metric related to discharge summaries be amended to take into account completion of audits. The Board **AGREED** to the request.

- TB summarised the exceptions for safety, quality and standard and requested that the metrics for surgical site infection and post operative catheterisation be amended to improve the quality of data presented. The Board **AGREED** to the request. TB confirmed that the World Health Organisation (WHO) surgical checklist had been implemented and audit data was awaited.
- BE summarised the exception for workforce and organisational development. It was **NOTED** that 8 of the 11 mandatory training courses now have 75%+ attendance and thus comply with the Trust's policy. Efforts are being focused on additional delivery of the remaining 3 courses to ensure compliance by year end. BE requested that attendance be reported by course and not by average in future to give a more meaningful picture. The Board **AGREED** to the request. The number of personal development reviews being completed is improving but work continues to further increase this figure. Staff sickness is currently running at circa 4% (target = 3%) which equates to approximately £300k per annum in costs. Work is ongoing to manage both long term sickness and persistent short term sickness cases.
- KD reported on the financial position at the end of Month 5 which continues the trend seen in previous months of an extremely challenging environment complicated by significant over performance. The Board **NOTED** that the finance metrics had been amended to improve reporting and where referred to the report for the details. The Board **AGREED** the amendments.

09/10.65 Annual Audit Letter

- The Board **RECEIVED** the letter and **THANKED** the Finance team for their efforts in achieving these results.

09/10.66 Audit Committee Annual Report

- MR summarised the report and requested comments on the work plan.
- It was **NOTED** the wording surrounding CRS risks needed to be updated to fall in line with the Trust Risk Register.
- The Board **RECEIVED** the report.

09/10.67 Trust Committee Structure

- The Board **RATIFIED** the new structure which had previously been agreed at the last Board Seminar.
- It was **NOTED** that the inaugural meeting of the Clinical Innovation Board had now taken place.

09/10.68 Charitable Funds Committee Revised Terms of Reference

- MR summarised the need to review the Terms of Reference in relation to guidance from the Charities Commission relating to the charitable status of organisations linked to NHS Trusts.
 - Key points included the reduction of the number of Executive Directors required for the Committee to be quorate and confirmation that the Committee acted independently from the Executive Team of the Trust.
 - BE noted that value for money assessments were not referred to within the document. It was confirmed that payments were considered charitable donations and guidelines for payments in relation to education and training payments were currently being drawn up to ensure reciprocal value was obtained when supporting individuals to study for personal advancement.
- The Board **APPROVED** the Terms of Reference.

09/10.69 Update on NHS Constitution

- JFo summarised the paper which followed on from the Trust's undertaking to prepare a statement of readiness in relation to commitments under the Constitution.
- No risks had been identified in relation the delivery of the rights and principles but a need to embed the principles of the constitution was highlighted.
- The Board **NOTED** the position.

09/10.70 Sustainability Development Management Plan

- John Marshall (JM) attended to present the plan which was prepared in response to the NHS Carbon Reduction Strategy.
- It was **NOTED** that the position was being assessed in terms of the Oxfordshire health economy as a whole using common terms across all agencies.
- The ongoing work around sustainability will be incorporated into the updated Estates Strategy which will be presented to the Board in January 2010.

09/10.71 Register of the Seal

- The Board **NOTED** the use of the seal as per the report.

09/10.72 Register of Interests

- JFo summarised the document which lists all interests and expenses for Directors and Consultants.
- It was **NOTED** that those who had not submitted an entry would be contacted by the Chief Executive to confirm their responsibilities and the consequences for not making a declaration.
- The Board **EXPRESSED** their disappointment that not all qualifying members had returned their declarations, **NOTED** the document and **REQUESTED** a complete copy be circulated in due course.

JF

09/10.73 Expenses Policy

- BE summarised the policy which brings together several documents and updates others.
- It was **NOTED** that the Trust was moving towards online expense claims to ensure complete transparency.
- The Board **APPROVED** the policy.

09/10.74 Board Committee Minutes

The Board **REVIEWED** the minutes of the following committees;

- Audit Committee (9th June 2009)
- Charitable Funds Committee (19th May 2009)
- Executive Committee (20th July 2009 and 24th August 2009)

09/10.75 Any Other Business

- There being no other business the meeting closed at 17.00

**Date of next Public Trust Board meeting: 30th November 2009 – 15.00 – 17.00
in the Board Room, Wingfield Building**

Signed:Joanna Foster

Joanna Foster, Chair