

**EAST AND NORTH HERTFORDSHIRE NHS TRUST**

**Minutes of the Trust Board meeting held in public on Wednesday 26 June 2013  
at 2pm, Rooms 2 and 3, Hertford County Hospital**

<b>Present:</b>	Mr Ian Morfett	Chairman
	Mr Nick Carver	Chief Executive
	Mr Paul Traynor	Director of Finance
	Mr Julian Nicholls	Non-Executive Director
	Mr Stuart Gavurin	Non-Executive Director
	Mr John Watson	Director of Operations
	Mrs Angela Thompson	Director of Nursing
	Ms Jane McCue	Medical Director
<b>In attendance:</b>		
<b>From the Trust:</b>	Mr Stephen Posey	Director of Strategic Development
	Ms Jude Archer	Company Secretary
	Mr Peter Gibson	Associate Director Public Affairs (Item 12)
	Ms Jacqui Evans	Head of Quality and Patient Safety (Item 11c)
	Mrs Christine Cowley	Acting Board Committee Secretary
<b>External:</b>	Mrs Audrey Allaker	Chairman, East Herts NHS Retirement Fellowship
	Mr Donald Allaker	East Herts NHS Retirement Fellowship

**ACTION**

- 13/113 CHAIRMAN'S OPENING REMARKS**
- The Chairman welcomed everyone to the meeting and commented that the Board was pleased to be at Hertford County Hospital once again.
- 13/114 DECLARATIONS OF INTERESTS**
- There were no declarations of interest.
- 13/115 QUESTIONS FROM THE PUBLIC**
- There were no questions from members of the public.
- 13/116 APOLOGIES FOR ABSENCE**
- Apologies were received from Mrs Alison Bexfield, Vice Chair, and Mrs Dyan Crowther, Non-Executive Director.
- 13/117 MINUTES OF THE PREVIOUS MEETING**
- The Board approved the minutes of the meeting held on 22 May 2013 as an accurate record.

**13/118****MATTERS ARISING**

- 13/118.1 The Board reviewed the actions log and was satisfied that all actions were either complete or on track for completion. The Chairman enquired as to whether any progress had been made in relation to the target date of October for the 24/7 Primary Percutaneous Coronary Intervention (PPCI) service. The Chief Executive responded that the Trust is working towards an October target date but this is still to be determined with commissioners.

**13/119****CHIEF EXECUTIVE'S REPORT**

- 13/119.1 The Board reviewed the Chief Executive's monthly report, which captures the major themes of the past month and provides an overview of the issues discussed by the Executive Committee as well as an update on recent developments.
- 13/119.2 The Chief Executive was pleased to report that he would be attending a meeting with the Health Scrutiny Committee which is meeting for the first time on Thursday 27 June 2013 under the new leadership of Councillor Seamus Quilty who is taking over as the Chair. The meeting is designed to serve as an induction for new councillors and is an opportunity to build on the strong and positive relationship the Trust has developed with the committee over the years and he would report back at the next Trust Board meeting.
- 13/119.3 The Board noted that a dedication service of the new Lister Chapel had taken place on 19 June. The service was celebrated by both the Anglican Bishop of St Albans and local Catholic clergy and the chapel and prayer room are available for patients, visitors and staff 24 hours a day. The Chairman described the new coloured glass stained window in the Chapel as 'stunning' and he thanked the benefactor on behalf of the Board.
- 13/119.4 The Chief Executive provided an update on the Eastern Academic Health Science Network (EAHSN) which is now established as a limited company. Negotiations are under way between the NHS Commissioning Board/Department of Health and the Network to establish the terms of the 5-year license. The Director of Strategic Development is the Accountable Officer for the Bedfordshire and Hertfordshire node which meets monthly and he has responsibility for the co-ordination and leadership of the respiratory medicine and patient safety Clinical Study Groups (CSG's). The Chief Executive reported that the EAHSN has received a lot of interest from organisations who consider themselves to be outside of the EAHSN.
- 13/119.5 The Board was delighted to hear that the Trust's new £2.7million power plant has been shortlisted in the energy efficiencies category of the prestigious annual HSJ Efficiency Awards. Final judging is scheduled for 5 July with a presentation awards ceremony due to take place on 25 September.
- 13/119.6 The Chairman informed the Board of the NHS Confederation Conference which took place from 5-7 July and was attended by himself, the Director of Strategic Development, the Director of

Nursing and the Chief Executive. The programme was patient-focused and provided extensive opportunities for networking and meeting stakeholders with discussions concentrated on the new culture of the NHS. The Chairman concluded that the conference provided integration across health service boundaries which was apparent in many of the presentations and should be at the forefront of the Trust's strategy.

- 13/119.7 When considering the Executive Committee report to Board and the Nursing Establishment Review, the Chairman sought clarity on the additional investment in the sum of £2m into front line clinical nursing posts that had already been funded in the current financial year. The Director of Nursing confirmed the level of investment and assured the Board that the number of nurses on the wards is not reducing. A benchmarking exercise is being undertaken against other trusts; and the final establishment review paper will be presented at the Risk and Quality Committee (RAQC).

**13/120 ANNUAL CYCLE**

The Board noted the Trust Board annual cycle for 2013/14 provided for information.

**13/121 STRATEGIC ISSUES**

**Proposal for University Status**

- 13/121.1 The Medical Director introduced the proposal by the University of Hertfordshire (UH) for the recognition of the Trust as a University Trust which had been presented at RAQC two months previously. The proposal outlines the benefits of collaborative working, proposes greater strategic alignment between the Trust and University and summarises the legal actions required.
- 13/121.2 The Board noted the summary of key benefits to establishing a formal university affiliation for the Trust including current staffing and appointments held by trust staff and the mapping of current and future activities across the two organisations which aims to promote a cross-boundary partnership.
- 13/121.3 The Medical Director highlighted the legal implications which would require the University's support in the form of a 'Letter of Support' and a formal Memorandum of Agreement which would set out the responsibilities and liabilities of the two institutions.
- 13/121.4 Mr Nicholls expressed his support for the proposal but sought further assurance on governance arrangements. The Medical Director informed him that both the University and Trust have representation on the main EAHSN Board which will shape governance of the collaborative alliance. This representation will ensure both are well-placed to influence future developments.
- 13/121.5 The Board reviewed the strategic goals of the EAHSN and requested further assurance that the Trust would be able to devote time and energy to facilitate the strategic objectives of both organisations. The Medical Director pointed out the benefits that would be delivered by the EAHSN in particular recruitment of high

calibre staff and the opportunity to extend Trust research and development activity.

- 13/121.6 Mr Nicholls sought further assurance in relation to Mount Vernon and was informed the proposed relationship will be complementary to the existing academic partnership and an additional opportunity for Mount Vernon clinicians.
- 13/121.7 The Board approved the recommendation that the Trust formalise the collaboration with the University of Hertfordshire and adopt the status of East and North Hertfordshire Hospitals University NHS Trust.

#### **Raising Concerns at Work Policy**

- 13/121.8 The Director of Strategic Development presented the revised Raising Concerns at Work Policy which had been considered by the Executive Committee, Audit Committee and Trust Partnership and now reflected the amendments requested.
- 13/121.9 The Board approved the Raising Concerns at Work Policy.

**13/122**

#### **FINANCE AND PERFORMANCE**

##### **Finance and Performance Committee (FPC) Monthly Report and Annual Report**

- 13/122.1 Mr Nicholls presented the key issues discussed at the FPC meeting held on 19 June 2013. Of particular concern to the Committee had been statutory and mandatory training where the Trust has not reached its trajectory however it was noted that this will not be met until implementation of ESR. In this regard the Committee had received a presentation by McKesson Information Solutions who made recommendations on next steps, associated timescales and benefits.
- 13/122.2 Turning to the Month 2 finance report Mr Nicholls highlighted the adverse in-month variance primarily as a result of greater usage of agency staff than the Trust has previously experienced and a detailed analysis of the variance from plan was requested for the next meeting.
- 13/122.3 Mr Nicholls was pleased to report on the detailed nursing review of wards that had taken place providing greater clarity of the factors influencing pay overspends. This information was split into categories of hours worked and other reasons and the FPC had requested an update be presented to the committee on conclusion of the nursing establishment review.
- 13/122.4 Further updates were provided on the CIP programme for 2013/14, Service Line Reporting (SLR), Workforce, Our Changing Hospitals, Performance and Data Quality and in particular the Board was pleased to note the Trust had received a certificate from the Global Green Health Hospitals Network in recognition of its progress in implementing its Sustainable Development Management Plan.

- 13/122.5 The Board considered and ratified the FPC Annual Report and revised Terms of Reference.

### **Finance Report at Month 2**

- 13/122.6 The Board considered a report setting out the financial position of the Trust for the period ending 31 May 2013. The paper had been discussed in detail by the FPC at its meeting on 19 June. The Board noted the Month 2 Financial Risk Rating (FRR) of 2 and the strong start to the year in relation to CIP performance which stands at 91.2%, creating an overall picture of 'cautious optimism'.
- 13/122.7 The Director of Finance reported on the negative variance mainly attributable to pay and expenditure due to additional capacity and an increase in agency expenditure, which had been debated in detail at the FPC. The Director of Operations and Director of Nursing had discussed the mix of pressures on the wards and on the Emergency Department at the beginning of the year which had resulted in increased usage of agency staff; agency bookings were now being reviewed on a daily basis and a specific piece of work to understand how the trajectories for Medicine and Surgery were set and the risks associated with the overspends is to be implemented. The Director of Finance reported that there is a high level of focus on the use of temporary staff and a report is to be presented to the July meeting of FPC.
- 13/122.8 Mr Nicholls expressed his concern at the potential impact the variance will have throughout the course of the year and the Director of Finance informed him that he will undertake a review at the end of Q1 to understand the year end implications.

### **Capital Programme**

- 13/122.9 The Board considered the capital plan for the financial year 2013/14 which is in line with the Trust objectives and the Integrated Business Plan (IBP) and had been previously considered and approved by the FPC on 19 June.
- 13/122.10 The Chairman queried the transfer of land and buildings on the QEII and Lister sites from Hertfordshire Partnership FT (HPFT) to accommodate the disposal of the QEII site in 2015 and future utilisation of the buildings at Lister, in relation to the costs of managing the facilities and was assured that these have been accounted for and are included in the budget. The Director of Finance confirmed that the Public Dividend Capital (PDC) element is still being negotiated and the Trust will be seeking HM Treasury approval; the business case has been approved by the Treasury and Department of Health.
- 13/122.11 The Board unanimously approved the 2013/14 capital plan and the transfer of land and buildings from HPFT in September 2013.

## **Performance Report**

- 13/122.12 The Board considered a report summarising the Trust's operational performance at Month 2. The report included details of progress against the Trust's performance framework standards, including Monitor's Compliance Framework and the DH operating standards, contractual standards and local performance measures which were provided in a data pack and had previously been discussed in detail by the FPC on 19 June.
- 13/122.13 The Director of Operations presented the key headlines for the month and was pleased to inform the Board that the current Emergency Department performance now stands at 99%, a slight improvement to when the report had been written. He informed the meeting that the Urgent Care Board had met for the first time on 21 June, attended by the main emergency care providers. This Board has been established to tackle the main challenges to emergency care systems and develop a system-wide plan to enable, in particular, improved efficiency in ambulance off-loading trajectories.
- 13/122.14 The Board was pleased to note that performance overall has improved since April with all key operational targets met and action plans in place for others. The Chair congratulated the Director of Operations on progress made in relation to the A&E indicator.

## **Workforce Report**

- 13/122.15 The Director of Strategic Development presented the workforce report for Month 2 which had been discussed in detail at the FPC meeting in June.
- 13/122.16 There is a fully operational nursing recruitment campaign in place to address the high vacancy rate issue and the associated support in relation to the induction process for new recruits.
- 13/122.17 The Board noted that the Trust Partnership (management and staff side representatives) has agreed to harmonise notice periods in line with those currently used by other trusts, effective from 1 July. This will enable the Trust to support staff and areas where shorter notice periods impact upon the ability to deliver a first class service whilst awaiting a replacement for a leaver.
- 13/122.18 This positive theme continues in relation to employment relations cases where the original number of cases was 144. This figure has now been reduced to 109 and provides an indication of the progress being made; ongoing work continues to improve this rate further.
- 13/122.19 The Chief Executive highlighted the Month 2 sickness absence report which indicated that sickness rates had reduced from 3.52% in April to 3.36% in May and remain below the average of 3.8% for acute trusts placing the Trust within the top 30% of large acute trusts in England.

**Risk and Quality Committee (RAQC) Report including annual reports on Infection Control, Health and Safety and Adult Safeguarding**

- 13/123.1 The Board reviewed the issues discussed by the RAQC at its meeting held on 19 June 2013.
- 13/123.2 Mr Gavurin presented the RAQC report in the absence of the Chair of RAQC, Mrs Crowther. The Board noted in particular the significant achievement in reducing mortality for fractured neck of femur (#NOF) and surgical site infections as well as the actions taken to support and improve the quality of patient care and experience.
- 13/123.3 The RAQC report included a mortality update from the Medical Director, a report on the outcome of an audit of the Hypoxic Ischemic Encephalopathy (HIE) cases, the monthly infection control report and two reports concerning Mount Vernon; one providing an update on progress in relation to the redevelopment of the MVCC site and proposed associated governance arrangements developed with the Hillingdon Hospital Foundation Trust (HHFT). The second report outlined the operational, safety and financial impact of the power failure that occurred on 5 April 2013 and the on-going risks and mitigations in place to reduce the impact of a recurrence.
- 13/123.4 The Director of Strategic Development provided a further update on the redevelopment of Mount Vernon. HHFT have suggested, as an alternative to a site wide development plan, that the Trust put forward a proposal for separating the Cancer Centre from the remainder of the site. An inspection of the Mount Vernon site is to take place and initial findings will be available by the end of July with a proposal to be presented to HHFT's main board in September.
- 13/123.5 The Chairman thanked the Director of Strategic Development for this update which provided assurance especially in relation to timescales and he suggested that it would be helpful to take the Trust's vision and aspirations for the new ward block to the mini Board-to-Board.

**Infection Prevention and Control Annual Report 2012/13**

- 13/123.6 The Board welcomed this report which highlights continued excellent performance for infection prevention and control within the Trust. The Trust achieved both the Clostridium Difficile (C.diff) and MRSA targets. Currently the Trust has the lowest levels of C.diff in the East of England and the 5<sup>th</sup> lowest in the Midlands and East, whilst the Trust also achieved the lowest number of cases of MRSA bacteraemia in the past decade moving from 86 cases in 2002/03 to 2 cases in 2012/13. The Chairman congratulated the Director of Nursing on the progress made by the infection control team and the Board approved the report for publication.

### Annual Health and Safety Report 2012/13

- 13/123.7 The Director of Nursing was pleased to present this report which informs the Trust of activities relating to health and safety compliance and was previously reviewed at RAQC. The Board noted all 2012/13 targets were achieved and 2012/13 has seen a significant improvement in the Trust's approach to health and safety and is aiming to make further sustainable improvements for 2013/14.
- 13/123.8 The Director of Nursing informed the Board of a change in legislation with regard the Fee for Intervention Scheme (FFI) whereby an HSE inspection will take place over two days and include cost implications.
- 13/123.9 Mr Nicholls expressed his gratitude and thanks to the Director of Nursing for the progress that has been made. The Board adopted the report.

### Safeguarding Adults Annual Report 2012/13

- 13/123.10 The Board welcomed this report which outlines the work undertaken by the Trust since April 2012 to support the framework for safeguarding adults. Significant achievements indicated that the Hertfordshire Safeguarding Adults Board (HSAB) 2012 audit report confirmed the Trust was 'performing well', an improvement from 'adequate' in 2011, and that the Trust has achieved 95.6% effective/excelling in required criteria. The Board noted the work plans and priorities for 2013/14.
- 13/123.11 A further improvement to note was in relation to the Learning Disability Improvement Plan which shows that the Trust has achieved green ratings for 19 out of 23 criteria in April 2013 compared to 2 out of 23 in February 2012. This improvement was attributable to the engagement of a dedicated member of staff, her team, the development of the Learning Disability Patient database and effective liaison with GP's.
- 13/123.12 The Board was pleased to adopt this report.

### **Mortality Update**

- 13/123.13 The Board received a full and comprehensive mortality update report from the Medical Director which confirms that there has been a sustained downward trend in mortality rates within the Trust during 2012/13. The Trust's Hospital Standardised Mortality Ratio (HSMR) position at the end of the year is 8<sup>th</sup> out of 17 acute trusts (excluding Papworth Hospital) in the East of England and stands at 92.7%. The Medical Director highlighted that, at year end, the average HSMR for each division is below 100, with particularly good performance in Cancer and Surgery.
- 13/123.14 The Medical Director presented the Standardised Hospital Mortality Index (SHMI) performance which had not changed since the previous Board meeting and highlighted SHMI versus HSMR October 2011-September 2012 data. The Board noted that the next SHMI data for the period January-December 2012, which is due to be published at the end of July, is likely to be elevated but should fall in October 2013.

- 13/123.15 In summary, the Medical Director reported an overall improvement in HSMR performance within the past 12 months, improvement and monitoring of 5 CQUIN mortality pathways, ongoing mortality monitoring with regular reporting at Divisional Executive Committee, RAQC, FPC and Trust Board, regular meetings with NHS Hertfordshire to improve mortality rates, attendance at East of England NHS Dr Foster User Group meetings and lessons learned through participation in the Keogh Mortality review. The Chief Executive informed the Board that the mortality update would be shared with the Health Scrutiny Committee meeting on 27 June.

### **Quality Account 2012/13 and External Audit Findings**

- 13/123.16 The Head of Quality and Patient Safety attended the meeting to present the final draft of the Quality Account 2012/13 for approval prior to publication. Included with the Quality Account was a statement from the external auditors as well as comments from all stakeholders. The report was produced in line with national regulations/guidance, complies fully with all requirements and was discussed in detail at RAQC on 19 June. It is to be published by 28 June and a copy of the report will be uploaded onto the NHS Choices website with a copy being sent to the Secretary of State.
- 13/123.17 The Board reviewed the unqualified conclusion provided by the external auditors and endorsed the Quality Account 2012/13.

### **13/124 ANNUAL REPORT 2012/13**

- 13/124.1 The Board considered and approved the Trust's annual report and accounts for 2012/13 which were prepared in line with national guidance and had previously been considered by the Audit Committee in May 2013 and the FPC (accounts only) on 19 June 2013.

### **The Board reconvened as trustee for the following item:**

### **13/125 CHARITY**

#### **Charity Trustee Committee Report**

- 13/125.1 Mr Gavurin presented the Charity Trustee Committee (CTC) report to the Board following its meeting on 24 June.
- 13/125.2 In relation to the Annual Charity Report and Accounts, the CTC had requested a higher degree of clarity on the report before further review by the Committee and final approval at Board in September.
- 13/125.3 The report provided an update on the Charity's income activity and performance to date across all areas of the department and the work of the Charity Management Team (CMT).
- 13/125.4 The CTC had reviewed the charity's cash flow analysis for 2012/13 and forecast report for 2013/14 and welcomed a presentation by Investec Wealth and Investment Limited, the

Charity's investment advisers. This update confirmed that the Trust has a low to medium risk of funds.

**13/126**

**ANY OTHER BUSINESS**

No other business was discussed.

**There being no further business, the meeting closed at 4pm.**

**13/127**

**DATE OF NEXT MEETING**

The next meeting will be held on Wednesday 24 July 2013 at 2pm at the QEII hospital.

**Ian Morfett  
Chairman**