EAST AND NORTH HERTFORDSHIRE NHS TRUST

Minutes of the Trust Board meeting held in public on Wednesday 26th February 2014 at 2pm in the Postgraduate Centre, Mount Vernon Cancer Centre.

Present:
Mrs Alison Bexfield  Vice Chairman
Mr Nick Carver  Chief Executive
Mr Paul Traynor  Director of Finance
Mr Julian Nicholls  Non-Executive Director
Mr Bob Niven  Designate Non-Executive Director
Mrs Dyan Crowther  Non-Executive Director
Mr John Watson  Director of Operations
Mrs Angela Thompson  Director of Nursing
Mr Stuart Gavurin  Non-Executive Director
Doctor Jon Baker  Deputy Medical Director

In attendance:
From the Trust:  
Mr Stephen Posey  Director of Strategic Development
Mr Tom Simons  Director of Workforce and OD
Ms Jude Archer  Company Secretary
Mrs Heather Schultz  Regulation and Compliance Manager

External:  
Mrs Joan Davis  Community Voice

14/031  
CHAIRMAN’S OPENING REMARKS

14/031.1 The Vice Chairman welcomed everyone to the meeting, noting that the Board would be watching a short film produced by the Head of Engagement to recruit youth members. Board members watched the film and noted that through various innovative initiatives including this film, the Trust has successfully recruited nearly 500 new members in the 14-18 age group.

14/032  
DECLARATIONS OF INTERESTS

There were no declarations of interest.

14/033  
QUESTIONS FROM THE PUBLIC

14/033.1 Mrs Joan Davis asked the Board two questions:

- Will the Lister Cancer Centre provide both radiotherapy and chemotherapy
- Does the Trust provide access to CT scans 365 days a year for stroke patients

In response, the Chief Executive confirmed that the Lister Cancer Centre will provide chemotherapy only although there are plans to provide radiotherapy in the future and confirmed further that the Trust provides access to CT scans 365 days a year for stroke patients.
14/034 APOLOGIES FOR ABSENCE

Apologies were received from Mr Ian Morfett, the Chairman and Miss McCue, Medical Director.

14/035 MINUTES OF THE PREVIOUS MEETING

14/035.1 The Board approved the minutes of the meeting held on 29 January 2014.

14/036 MATTERS ARISING

14/036.1 The Board reviewed the actions log and noted that some of the actions had been on the log for quite some time and needed to be finalised. The Director of Strategic Development reported that he would be providing an update on TPP in Part II of the meeting.

12/147.6 The Director of Workforce and OD noted that the People and Workforce Development Strategy would be reviewed at FPC in March and presented to Board for final approval at a later date.

14/037 CORPORATE OBJECTIVES 2014/15 AND 2015/16

14/037.1 The Board took this item next on the agenda.

14/037.2 The Director of Strategic Development introduced the Trust’s draft Two Year objectives which had been informed by internal engagement and discussions with CCG and local authority partners. They will form the priorities within the Trust’s Two Year Operating Plan, a draft of which is due for submission to the TDA by 5 March. The objectives had been discussed in detail at FPC and RAQC and some changes had been made following these discussions including changes to the objective relating to cancer services.

14/037.3 Mr Niven commented that there were no financial figures in the objectives or measures and asked if this could be reviewed particularly in relation to objective 4. In addition he asked if financial priorities could be included in the 5 year plan. The Director of Strategic Development agreed that these suggestions would be included. The Board unanimously approved the objectives subject to the inclusion of any minor amendments which were to be submitted to the Director of Strategic Development by 9am on the following Monday.

14/038 CHIEF EXECUTIVE’S REPORT

14/038.1 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. The Floodlight Scorecard with additional detail on how the targets are derived was attached.

14/038.2 The Chief Executive highlighted the CQC inspection of the QEII hospital on 3 February. The unannounced inspection, which formed part of a national review of the quality of dementia care, had been very positive and the final report was awaited. The
Board commended the staff at QEII for their excellent work.

14/038.3 The Chief Executive reported that the Lister Neonatal team had won the ‘Outstanding Neonatal Team of the Year’ award run by the Mother and Baby magazine and the Board extended its congratulations to the team.

14/038.4 The Board noted that members of the Executive team had attended the Health Scrutiny Committee meeting on the 6th February which had gone well and formal feedback was awaited.

14/039

ANNUAL CYCLE

14/039.1 The Board noted the Trust Board annual cycle for 2013/14.

14/040

FINANCE AND PERFORMANCE

Finance and Performance Committee (FPC) Monthly Report

14/040.1 The Board reviewed the issues discussed by the FPC at its meeting held in January. Mr Nicholls, the Chair of FPC presented the report.

14/040.2 The FPC had considered the Finance report for Month 10 and was pleased to note that the Trust had delivered a £1.456k surplus in January against a planned surplus of £1,325k. The committee had reviewed the working capital position for 2014/15 and 2015/16.

14/040.3 In relation to performance the FPC had been pleased to note the achievement of the Emergency Department 4 hour standard in January. The committee considered a paper outlining the outcomes of a governance review of the Health Records business case. Some changes had been made to the business case which were not reported to FPC and the committee made some recommendations regarding future revisions to business cases and requested a review of previous business cases within its delegated authority limits to establish if the original benefits had been achieved.

14/040.4 The FPC had received a quarterly update on data quality metrics as well as a report on options for developing a Business Intelligence Competency Centre (BICC) designed to pool and share expertise, people, processes, technology and culture across the organisation. Mrs Crowther noted that there is currently a red rated action on the RAQC actions log in relation to development of divisional floodlight scorecards and challenged whether the teams responsible for delivery of these projects (IM&T) have the necessary capacity to develop a project such as BICC. The Director of Finance noted that he had commissioned external consultants to support the review of the Trust’s Information Management and Technology (IM&T) Strategy which included reviewing current resources and capability within the team/s.

14/040.5 In relation to the red action on the RAQC actions log, the Board agreed that the Director of Finance and the Head of Information should attend the RAQC meeting in March to address the issue.

Director of Finance

3
In addition, the Director of Finance undertook to present the paper on BICC to both FPC and RAQC in April.

**Finance Report at Month 10**

14/040.7 The Board considered a report setting out the financial position of the Trust at the end of January 2014. The Director of Finance presented the consolidated finance report, the finance report excluding the Treatment Centre and the report for the Treatment Centre. The papers had been discussed in detail at the FPC.

14/040.8 In relation to the consolidated financial position, the Board was pleased to note the Trust had delivered a £1,456k surplus in January against a planned surplus of £1,325k, thereby creating a favourable variance of £131k. The position for January, excluding the Treatment Centre was positive; the Trust delivered a £1,489k surplus in January against a planned surplus of £1,326k creating a positive in month variance of £163k with a year to date surplus of £1,564k which is £711k behind plan. Cumulatively there is a £360k adverse variance from forecast but it is expected that this will be recovered in the final 2 months of the year. The Board noted that work is underway to understand the reasons for the variances in non pay expenditure. In relation to the CIP programme, the Trust had delivered 94% against the target in month and 86% year to date.

14/040.9 Mrs Crowther enquired whether the FPC would be receiving an update on progress being made by the Programme Management office (PMO). The Director of Finance confirmed that progress is monitored via both weekly and bi-weekly meetings and a full progress report is to be presented to FPC in March. The Board discussed the process for sign off of risks, particularly potential risks to patient safety and agreed that the RAQC should receive the progress report as well.

14/040.10 Turning to focus on the finance report for the Treatment Centre, the Board was pleased to note that for the first time since taking over the Treatment Centre, an operational surplus of £60k was delivered. The Director of Finance commended the excellent work being done by the team responsible for managing the Treatment Centre. Referring to a question raised by Mrs Crowther at the last meeting regarding activity and income against forecast for the pain clinic, the Director of Finance explained that there is an issue with classification of some pain procedures as some pain procedures (such as injections) fall under the Orthopaedic specialty and not the pain clinic specialty as assumed in the activity forecast. The adverse variance on pain clinic activity in January was offset by a favourable variance on Orthopaedics, and overall the pain procedures were as forecast.

14/040.11 The Director of Finance reported that the Treatment Centre would not be reported separately from April; this had been discussed and agreed at FPC and the Board endorsed this decision.

**Performance Report**
14/040.12 The Board considered a report summarising the Trust’s operational performance at Month 10. 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 been discussed in detail by the FPC.

14/040.13 The Director of Operations presented the key headlines for the month and reported that the Trust had achieved a Monitor Compliance Framework Quarterly risk rating of amber/green for quarter 3 and a TDA provider management regime monthly governance risk rating of green.

14/040.14 Focussing on the ED 4 hour standard, the Board noted that the Trust achieved 95.7% for January with a year to date performance of 95.9%. The Director of Operations reported that the Trust had seen particularly high levels of activity over the weekend preceding the Board meeting.

Workforce Report

14/040.15 The Director of Workforce and OD presented the workforce report which had been discussed in detail at the FPC meeting.

14/040.16 The Director of Workforce summarised the key headlines which included: the launch of the new appraisal policy and framework with 68% of appraisals completed in month and particularly pleasing compliance rates reported by Cancer, Clinical Support Services, Corporate and Woman’s and Children’s. A significant amount of work had been undertaken in preparation for the TUPE transfer of pathology staff to Cambridge University Hospitals and Public Health England on 1 April 2014. In readiness for the OCH consultations an overarching consultation document, consultation templates and guidance for management had been produced. The Board noted that consultations would launch in corporate areas on 3 March and in clinical divisions on 2 April. The Board had discussed the OCH consultation process in detail in the Part II session of the January meeting of the Board.

14/040.17 In response to a query from the Vice Chairman, the Director of Workforce confirmed that non-pay progression due to non-compliance with statutory training requirements is to be implemented from April 2014 with appraisal dates aligned to increment dates from January 2014 and non-pay progression for non-achievement of performance against values and objectives is to go live on 1 November 2014.

14/040.18 Mr Nicholls noted that the FPC had discussed NHSP performance and agreed that the contract should be reviewed and the outcome of the review is to be reported to FPC in March.

RISK AND QUALITY

Risk and Quality Committee (RAQC) Report

14/041.1 The Board reviewed the issues discussed by the RAQC at its meeting held in February. Mrs Crowther, Chairman of RAQC presented the report.
14/041.2 The RAQC had received an excellent presentation on dementia care in the Trust and with the scale of dementia set to increase over the next 15 years, had recommended that the team approach the Trust’s Charity for some support. The Director of Nursing had requested the support of a non-executive director in relation to dementia and Mr Niven confirmed that he would be pleased to provide that support.

14/041.3 The RAQC had reviewed the detailed Patient Safety and Patient Experience reports. Mrs Crowther commended the Director of Nursing and her team for their analysis and conversion of the numerous patient experience surveys into action plans. The Committee had endorsed the decision taken not to purchase lockable safes for use by patients on wards - a business case had been submitted to purchase lockable safes however in light of the OCH programme it had been agreed that this could not be supported. As the Trust is not able to progress this, and the national inpatient survey no longer asks patients this question, the Patient Experience Committee will be asked to consider replacing this question within the Meridian inpatient survey. In relation to Patient Safety the RAQC had noted the update on prevention of falls and that there had not been a reduction in serious harm falls although assurance had been provided on actions being taken to reduce incidents of inpatient falls.

14/041.4 The committee had welcomed presentations on ‘Breaking the Cycle’ and ‘Discharge to Assess’. The Director of Operations reported that lessons learnt from ‘Breaking the Cycle’ were being discussed with divisions and he would provide a report to the Board at a future date. The Board agreed that both presentations should be circulated to all Board members.

14/041.5 The Board was pleased to note that the Trust had been ranked 5th out of 100 comparator hospitals for performance in relation to C.difficile.

14/042 ANY OTHER BUSINESS

14/042.1 No other business was discussed.

There being no further business, the meeting closed at 3.15pm.

14/043 DATE OF NEXT MEETING

14/043.1 The next meeting will be held on Wednesday 26th March 2014 at 2pm at the Hertford County Hospital.

Ian Morfett
Trust Chairman