ENCLOSURE 1

Birmingham Women's NHS
NHS Foundation Trust

Unconfirmed Minutes of the
MEETING OF THE FOUNDATION TRUST BOARD
HELD IN PUBLIC
in the Seminar Room, Birmingham Women's Hospital,
on Thursday 30 October 2008

PRESENT:	Judith Mackay (in the Chair)	Trust Chairman
	Julie Burgess	Chief Executive
	Jason Burn	Acting Commercial Director
	Prof Ian Booth	Non-Executive Director
	David Draycott	Non-Executive Director
	Nigel Gardner	Non-Executive Director
	Jane Owen	Director of Nursing & Midwifery
	Robin Rison	Non-Executive Director
	Neil Savage	Director of Workforce & Organisational Development
	Peter Thompson	Medical Director
	Tim Woods	Director of Finance
IN ATTENDANCE:	Steve Parsons	Head of Corporate Affairs

ACTION

FTP/1008/1 WELCOME AND APOLOGIES

FTP/1008/1.1 The Chairman welcomed those present to the meeting.

FTP/1008/2 QUESTIONS FROM THE PUBLIC ON MATTERS RELATING TO THE AGENDA

FTP/1008/2.1 No questions relating to the business of the meeting were asked by the members of the public attending.

FTP/1008/3 DECLARATIONS OF INTEREST

FTP/1008/3.1 No interests were declared in any item on the agenda for the meeting.

FTP/1008/4 MINUTES OF MEETING HELD ON 25 SEPTEMBER 2008

FTP/1008/4.1 The minutes of the meeting held on 25 September 2008 were **APPROVED** and signed as a correct record.

FTP/1008/5 MATTERS ARISING FROM THE MINUTES OF THE MEETING HELD ON 25 SEPTEMBER 2008

FTP/1008/5.1 Robin Rison drew attention to an apparent inconsistency in the figures reported in Minute FTP09/08/10.2 relating

to Staff Turnover Rate. Neil Savage undertook to review the underlying data and advise the Board of the correct basis. **NS**

FTP/1008/6 CHAIRMAN'S REPORT

Appointments to Committees

FTP/1008/6.1 The Chair referred to Enclosure 2, which set out proposed appointments of Directors to Board Committees, and also the proposed appointments as non-executive advisers on Committees of the Members' Council. The Board noted that Robin Rison had been identified as the member of the Audit Committee with recent and relevant financial experience.

FTP/1008/6.2 The Board then **APPROVED** the appointments to Committees, and appointments as non-executive advisers on Committees of Members' Council, set out in Enclosure 2.

FTP/1008/7 MEETING OF THE BOARD IN PRIVATE SESSION

FTP/1008/7.1 The Chairman reported that the Board had met in private session earlier that day, and had reviewed and approved updated arrangements for clinical governance in the Trust. The Board had also considered the transfer of the Trust's accounting from UK GAAP to IFRS, and a detailed review into Neo-Natal Services.

The private session would be continued after the public session, and was expected to consider an update on corporate and directorate objectives, a risk gap analysis report, and a business opportunity in primary care.

FTP/1008/8 ORAL REPORT BY THE CHIEF EXECUTIVE

FTP/1008/8.1 The Chief Executive drew attention to the following main issues.

Productive Wards Scheme

FTP/1008/8.2 Julie Burgess confirmed the Trust had been successful in a bid for this project, and Jane Owen advised that this programme, subtitled 'Releasing Time to Care', was designed to streamline procedures, enabling staff to spend more time on care and less on other necessary tasks. The Trust had bid for £120,000 and been awarded £85,000 by the Strategic Health Authority; the entire operation of wards would be reviewed, starting with Ward 8. The next stage was to appoint a Project Manager, which was expected to happen during November. **JO**

Maternity Capacity

FTP/1008/8.3 Julie Burgess reported that a meeting had now been arranged with South Birmingham PCT, in mid-November, to discuss how to develop maternity capacity. The Medical Director of the PCT would be 'shadowing' at the Trust, to increase understanding of the current position. **JB**

External courses

FTP/1008/8.4 It had not been possible to arrange clinical visits during September, as a number of external events had been attended. These included the Breaking Through conference, the regional meeting on Lord Darzi's proposals, and a Foundation Trust Network discussion on taking forward the quality agenda.

Human Fertilisation and Embryology Bill

FTP/1008/8.5 This Bill had now passed the House of Commons, and Julie Burgess advised the Board that she had requested a review of any implications. No major impacts had been identified to date, although there would be some procedural changes.

Quality Care Commission

FTP/1008/8.6 It was also **NOTED** that on 1st April 2009 the Healthcare Commission would be replaced by the new Care Quality Commission, which would have responsibility for the registration of healthcare organisations, including NHS Trusts. The Trust would need to be registered for Healthcare-Acquired Infections from 1st April 2009, and the relevant arrangements for registration would be made shortly. **JO/ JB/ SIP**

NHS 60

FTP/1008/8.7 The Chief Executive reported that two members of staff had been invited to attend a Buckingham Palace event to celebrate the 60th anniversary of the NHS. The Board **CONGRATULATED** Harry Gee and Val Davidson on their invitations.

FTP/1008/8.8 The Chief Executive's report was **NOTED** with thanks.

PATIENT EXPERIENCE AND IMPROVING CLINICAL PERFORMANCE

FTP/1008/9 Red Risk Register and Assurance Framework

FTP/1008/9.1 Presenting Enclosure 3, Jane Owen confirmed that the Board had discussed a new system of risk rating and would be re-scoring all of the red risks in due course. **JO**

She drew the Board's attention to the high level of Maternity staffing incidents, which had been confirmed but could be affected by previous under-reporting of incidents. She clarified that progress was being made with IT for community midwives which would save midwifery time, and that the Delivery Suite held the majority of vacancies for the directorate. She also reported that a recent Root Cause Analysis had identified staffing as an influencing factor, although not a causal one.

FTP/1008/9.2 Robin Rison welcomed the intended recruitment of a further 22 Band 5 midwives, and enquired how close that made the Trust to establishment; Jane Owen confirmed that this would leave a manageable number of vacancies. In response to a question, she also confirmed that some PCT funding was conditional on providing community midwives, but all staff were rotated to ensure that they spent time on the Delivery Suite as well. It was clarified that a 'staffing incident' was recorded when a clinical impact arises from the workload exceeding the available staffing.

FTP/1008/9.3 Ian Booth asked for clarification of the number of corporate objectives, and Julie Burgess confirmed that the 12 objectives considered by the Board had been condensed into the 10, by a process of re-phrasing.

The Chairman noted that the Board would wish to place a marker on staffing issues, and enquired whether the risk would be on-going; Jane Owen confirmed that this would remain a red risk until the establishment met the workload, and that different mitigations were being used. The Chairman also noted that the Board would begin consideration of the 2009/2010 objectives at the November seminar meeting.

FTP/1008/9.4 The Board of Directors:

- **NOTED** the reported changes to the Red Risk Register

ASSURANCE

FTP/1008/10 Matron's Report on Control of Infection

FTP/1008/10.1 Jane Owen presented the report, noting that this was the first time the quarterly report had been presented to the Board. She confirmed that the report had been discussed in full by the Infection Control committee, and would be discussed by the Clinical Governance Committee at its forthcoming meeting. She drew the Board's attention to the varying results across Directorates, particularly regarding hand hygiene audits. It was important for the Board to have the context and **JO**

background, as the Board had approved the policy statement on infection management and control.

FTP/1008/10.2 Ian Booth commented that it was depressing that the Medical staff appeared to be poorly-performing on hand hygiene, and Jane Owen noted that in the previous survey Medical staff had performed well; she was looking in more depth at these changes. She also noted that the Medical Director was leading and championing these matters amongst the medical staff, and thanked him for his input.

FTP1008/10.3 The Board:

- **STRESSED** that it considered infection control an important responsibility;
- **NOTED** that the Board would take appropriate action to effectively promote infection control;
- **SUPPORTED** the proposals in the paper and anticipated improvements as a result; and
- **CONFIRMED** that they approved of the policy statement as set out in the covering paper.

FTP/1008/11 Quarterly Control of Infection Report

FTP/1008/11.1 Jane Owen presented the report to the Board, noting that the key issues were on hand hygiene audits; she drew to the Board's attention that no mandatory report cases had occurred, and that pre-admission MRSA screening had begun in Gynaecology. She confirmed that the inspection visit by the Healthcare Commission was still awaited.

FTP/1008/11.2 Jane Owen also noted that she intended to bring forward, via consideration at the Management Board, a paper to update the Board on environmental improvements undertaken. **JO**

FTP/1008/11.3 The Board:

- **APPLAUDED** the achievements of the staff;
- **CONFIRMED** that it expected the levels of achievement shown to continue; and
- **NOTED** that appropriate action would be taken to address any areas of difficulty.

ORGANISATIONAL PERFORMANCE

FTP/1008/12 Integrated Performance Report (including Finance Report and incorporating 18 Week Project Update)

FTP/1008/12.1 Introducing the Integrated Performance Report, Jane Owen drew the Board's attention to the exception report in respect of stillbirths in the Trust. These had been fully

reviewed and discussed at length by the Management Board; a review was now being undertaken into the reporting of mortality outcomes. Robin Rison commented that he was concerned about this, and asked that a summary of the review was presented to the Board for assurance. **PT**

FTP/1008/12.2 Regarding the possible application of the 13-week target to Genetics, Jane Owen reported that no definitive guidance had been received from the Department for Health. The genetics department were working to reduce waiting times, but there could be detriments to patients if a 13-week requirement was confirmed. Helen Hemberg enquired whether the Department might re-consider the position, and Jane Owen confirmed that she was not aware of a final position. Julie Burgess reported that the Strategic Health Authority was continuing to press for a resolution of the issue; the question had been escalated, and an audit trail was available if required. It was acknowledged that the question needed to be resolved by definitive guidance.

FTP/1008/12.3 Returning to the issue of stillbirths, Allison Garrish (a Governor attending the meeting) enquired whether the risk factors/ staffing affecting the Delivery Suite had been a contributing factor; Jane Owen advised that there had been one case where staffing was considered to be a factor, but not a cause.

Workforce

FTP/1008/12.4 Presenting the workforce-related content of the Integrated Performance Report, Neil Savage drew attention to the following main issues:

- *Sickness absence*: the rate had risen significantly above the benchmark, and recently-advised figures for the West Midlands and national averages showed that effort was required to improve the situation.

- *Employee investigations*: he was concerned that the reported data was not an objective measure, as each employee investigation was different and the complexity of some investigations necessarily took longer to resolve;

- *KSF indicators*: there was significant work to be done, but he was hopeful that the target would be reached. He also noted that KSF was again becoming a nationally-led issue.

FTP/1008/12.5 Robin Rison applauded the work on KSF appraisals, and suggested that comparative figures on sickness absence were obtained for the private sector as well as the NHS.

Peter Thompson drew attention to similar units, which experienced absence rates in the range of 9% to 12%, and asked that comparisons were also provided for those units. The Board noted that the 3.76% national average applied to all NHS units, and questioned whether it was the relevant measure for this Trust; Neil Savage noted that the Trust's performance was measured against this figure. David Draycott enquired whether sickness was concentrated in any areas, and Neil Savage confirmed that detailed analysis was available on request.

FTP/1008/12.6 The Board **REQUESTED** the Director of Workforce and Organisational Development to develop comparative information on both private sector and comparable units' absence levels. **NS**

Finance

FTP/1008/12.7 Presenting the finance-related content of the Integrated Performance Report, Tim Woods commented that the Trust was ahead of the financial plan, and drew attention to the following main issues:

- *Half-year position:* After six months of the financial year, the surplus was almost at the level planned for the full-year; a re-forecasting exercise was being carried out, but the full-year surplus was now anticipated at around £1.5 million. This maintained the Trust's risk rating at 4. **TW**

- *Cost Improvement Plans*: There were no red reports in respect of CIP's, although non-pay costs continued to be the key pressure. The Gynaecology Directorate had met their monthly target.

- *Location of Funds:* The cash funds of the Trust had been moved into the Paymaster-General's Office, following the end of an investment term with a high street bank. The Paymaster-General's Office paid interest at the Bank of England Base Rate, currently 4.5%. Arrangements to ensure small traders who are suppliers to the Trust are paid quickly were also being put into place. **TW**

- *Aged debtors*: the increase in debt over 90 days was in respect of funding for an SHA initiative (Aspirant HRD Programme) for which an invoice had been raised on a control account but which might not proceed.

FTP/1008/12.8 Robin Rison referred to account sheet F1, and enquired whether the favourable full-year movement in pay costs was as a result of vacancies being held, affecting service

quality. Tim Woods agreed that this was possible, but noted that an inability to recruit was likely to be affecting the figures. Helen Hemberg noted that this could have a knock-on effect on staff absence related incidents; there was a need to press the NHS to provide sufficient funding for the service to recruit. It was noted that these points would need to be addressed with commissioners. Bids had been submitted early to assist with the process, and the outcomes were expected shortly. David Draycott suggested that these questions should be raised on the Monitor Quarterly Return; it was noted that the issues were not entirely within our control, and the Monitor Return might not be the appropriate mechanism to resolve the Board's concerns.

FTP/1008/12.9 Nigel Gardner asked for further information regarding the Aspirant HRD Programme, and Tim Woods confirmed that this was still under negotiation with the Strategic Health Authority. Mr Gardner expressed concern that an invoice had been issued when the agreement was still outstanding; Tim Woods acknowledged that it might have been issued too quickly, but as it was held on a control account it did not affect the Income and Expenditure Account. Responding to a question from Mr Gardner, Tim Woods also confirmed that all capital spend orders to date had been planned.

FTP/1008/12.10 Julie Burgess noted that it was inherent in the payment by results system that the Trust would be 'playing catch-up' on funding. It was important that the forthcoming discussions with the PCT's and Specialist Commissioners focussed on providing the funding to assist in meeting the rising workload. David Draycott wondered whether Monitor were able to exercise influence on commissioners, and Julie Burgess noted that as FT Regulator this was not Monitor's area; they would expect the Trust to address this through negotiation with the commissioners. The Trust needed to strongly press South Birmingham PCT as lead commissioner, with the Strategic Health Authority supporting the process overall. Peter Thompson noted that students qualified at two points during the year, which led to a tendency to hold back 5 or 6 vacancies until qualification; Jane Owen also noted that the Trust had increased the number of students that it was training.

FTP/1008/12.11 The Board of Directors:

- **NOTED** the Integrated performance report;
- Expressed **CONCERN** that the questions around 18-week and 13-week targets for genetics were still unresolved;
- **SUPPORTED** the growing emphasis on the implementation of KSF; and

- **SUPPORTED** ongoing negotiation with commissioners regarding improved funding levels to reflect the real costs of services.

FTP/1008/13 **Healthcare Commission Annual Health Check Scores**

FTP/1008/13.1 Julie Burgess presented Enclosure 7, noting that the Trust had improved its score for Use of Resources to Excellent, although the Quality of Service score had reduced to Good, as three areas of concern within Quality of Service had been identified. She confirmed that a technical issue relating to 'Choose and Book' had been identified, and based on this an appeal was being submitted in respect of the Quality of Service score, supported by the Strategic Health Authority. **JB/ JO**

FTP/1008/13.2 Responding to questions from the Board, Julie Burgess confirmed that the issue relating to 'Choose and Book' was such that, if the assessment had looked at an original list of data within the system but now largely de-activated in agreement with the PCT's, it was not possible to meet the required standard. In particular, the Genetics service was not included within the National IT Programme, itself raising issues under the Referral to Treatment requirements; this was now being reviewed by the Department and Connecting for Health. Within the Region, only South Staffordshire Mental Health Trust had been awarded two Excellent grades.

FTP/1008/13.3 Jane Owen drew the Board's attention to the continual raising of standards within the process; performing at the same level in the subsequent year would lead to a lower grade, so the Trust needed to continue to improve.

FTP/1008/13.4 The Board of Directors:

- **CONGRATULATED** the Trust for achieving an Excellent rating for use of resources; and
- **CONFIRMED** its commitment in achieving Excellent for Quality of Service in the 2009 Health check.

FTP/1008/14 **2008/09 Quarter 2 report to Monitor**

FTP/1008/14.1 Introducing Enclosure 8, the Head of Corporate Governance drew the Board's attention to the following points;

- The Board was invited to authorise the signing of Declaration 1, confirming that all targets had been met over the period of 1st July to 30th September 2008;

- the exception reporting mechanism would be used to update Monitor on the situation for 18 week and 13 week referral to treatment targets in Genetics, following on from the report made in the first quarter return;

- a report would be included on recent changes in the membership of the Board of Directors and the Members' Council; and

- An additional part of Appendix 4, relating to the proposed business opportunity that was considered in private session would be part of the return.

FTP/1008/14.2 The Board of Directors:

- **APPROVED** the submission to Monitor of the financial information set out in Appendix 1 of the quarterly report **TW/ SIP**

- **AUTHORISED** the Chair to sign Declaration 1 on behalf of the Board, thus confirming that the Trust had met all applicable targets and had plans in place to ensure that all known targets that came into force would be met **JM**

- **AGREED** that, subject to updating to reflect developments up to the time of submission, an exception report should be submitted to Monitor to draw attention to the ongoing difficulties being encountered in obtaining definitive national guidance on the waiting time targets applicable to clinical genetics **TW/ SIP**

- **APPROVED** the submission to Monitor of the report on recent changes in the membership of the Board of Directors and the Members' Council **TW/ SIP**

FTP/1008/15 Foundation Trust Governance: Progress report on Non-Executive Directors' Job Description, Objectives and Performance Appraisal

FTP/1008/15.1 Neil Savage presented Enclosure 9, which proposed for the Board's endorsement a job description for Non-Executive Directors; it also updated the Board on the development of objectives and performance appraisal criteria for Non-Executive Directors.

FTP/1008/15.2 The Board of Directors:

- **NOTED** progress towards developing objectives and a performance appraisal framework for Non-Executive Directors; and

- **NOTED** that the job description for Non-Executive Directors would be progressed through the appropriate Trust bodies. **NS**

FTP/1008/16 **NHS Constitution: update on consultation and Trust's Response**

FTP/1008/16.1 Neil Savage presented Enclosure 10, which provided the Board with an update on the Trust's response to the recent consultation on the NHS Constitution. He invited the Board to note that the Trust had submitted a response to the consultation; there had been a low level of engagement with the consultation, but this reflected the national experience. Julie Burgess noted that there appeared to be much more enthusiasm for the process at a national level than at a local level.

FTP/1008/16.2 The Board of Directors **NOTED** the Trust's response to the consultation on the NHS Constitution.

FTP/1008/17 **Hosted Organisations- Six Monthly Update from West Midlands Public Health Observatory**

FTP/1008/17.1 The Board considered the written report prepared by Dr Kemm, and Julie Burgess advised the Board that the change to Foundation Trust status had necessitated new contract-based arrangements for hosted units. Proposals from the Department of Health were being reviewed; Tim Woods assured the Board that the arrangements included provision for any redundancy costs to be met by the Department. **TW/ JB/ SIP**

FTP/1008/17.2 Nigel Gardner enquired whether the benefit received by the Trust from the Observatory had been reviewed, and Julie Burgess advised that the use of the Observatory was limited to data for specific projects. The Board requested that this was considered, and it was **AGREED** that Jason Burn would discuss it at the next meeting of the Observatory's Advisory Board. **JaB**

MEMBERS' COUNCIL MATTERS

FTP/1008/18 **Report from Members' Council Chair**

FTP/1008/18.1 The Chairman reported that the round of Committee meetings leading to the December meeting of Council was underway, and that the meeting of Committee Chairs with herself, the Chief Executive and the Head of Corporate Affairs was being arranged; dates for 2009 would also be put into the diary. Work was also underway on Governor induction and development, and working with the Board for mutual benefit. **SIP** **NS**

TRUST POLICIES FOR APPROVAL

FTP/1008/19 Violence and Aggression Policy

FTP/1008/19.1 Jane Owen presented the draft policy, noting that it had been considered and recommended by the Management Board.

FTP/1008/19.2 Robin Rison referred to section 7.3 of the policy, and enquired which groups of staff were trained to provide physical intervention; Jane Owen confirmed that these were front-line staff, particularly community midwives and porters. Peter Thompson noted that the policy did not propose a zero-tolerance approach, and it was confirmed that this was in line with NHS national policy.

FTP/1008/19.3 The Board of Directors **APPROVED** the revised Violence and Aggression Policy subject to review in September 2011.

FTP/1008/20 First Aid Policy

FTP/1008/20.1 Neil Savage presented the policy for approval, noting that this was a new policy drafted by the Trust's Risk Manager. He confirmed that it complied with the legislative requirements, and had been recommended by both the Health and Safety Committee and the Management Board.

FTP/1008/20.2 The Board of Directors **APPROVED** the First Aid Policy subject to review in June 2011.

FTP/1008/21 Display Screen Equipment Policy

FTP/1008/21.1 Neil Savage presented this revised policy, which had been updated to make it more accessible, but contained no significant changes in content. He confirmed that the policy had been recommended by the Health and Safety Committee and the Management Board.

FTP/1008/21.2 The Board of Directors **APPROVED** the Display Screen Equipment Policy subject to review in September 2011.

FTP/1008/22 Policy for the Emergency Protection of a Child following birth

FTP/1008/22.1 Jane Owen presented this policy for approval, which gave important clarification of procedures following recent cases in other organisations that had caused public concern. She confirmed that it had been approved by the legal department and the relevant multi-disciplinary team, and was recommended by the Clinical Governance Committee and the Management Board.

FTP/1008/22.2 The Board of Directors **APPROVED** the Policy for the Emergency Protection of a Child following birth, subject to review in October 2011.

FTP/1008/23 Non-Medical Prescribing Policy

FTP/1008/23.1 Jane Owen presented this policy to the Board, noting that a number of other Trusts had been operating non-medical prescribing for a period. It was currently intended to operate this policy for the neo-natal and transport areas. She confirmed that the policy was in line with Department of Health requirements, and arrangements for support from University Hospitals Birmingham had been made. The Management Board had agreed to recommend the policy.

FTP/1008/23.2 Ian Booth referred to section 4, and enquired how the Trust would identify those who had the ability to study at degree level; Jane Owen confirmed that this assessment would be undertaken by the University partner who provided the training.

FTP/10008/23.3 The Board then **APPROVED** the Non-Medical Prescribing Policy, subject to review in September 2011.

FTP/1008/24 OTHER BUSINESS

Items circulated between Board meetings

FTP/1008/24.1 The Chairman drew attention to the list of items circulated between meetings, and asked Directors to advise her if any had not been received.

November meeting and action notes

FTP/1008/24.2 The Chairman confirmed that the 27th November Board would largely consist of a seminar session, held in private. She confirmed that a public session of the Board would be held at noon on the 27th November.

FTP/1008/24.3 The Chairman also confirmed to the Board that the Head of Corporate Affairs would circulate action notes from the Board meeting by close of play on Friday 31st October.

Presentation on World Class Commissioning

FTP/1008/24.4 Julie Burgess confirmed that Rita Symonds, Director of Strategy and Commissioning at South Birmingham PCT, had not been able to attend today, and this item would be re-arranged.

Dates of next meetings

Thursday 27 November 2008 (Seminar session)
Thursday 18 December 2008