

## BOARD OF DIRECTORS

Minutes of the Meeting of 22 December 2011  
Board Room, Trust HQ, QEMC

Present: Sir Albert Bore Chairman  
Ms Julie Moore, Chief Executive  
Mrs Gurjeet Bains, Non Executive Director (“GB”)  
Mr David Bailey, Non Executive Director (“DBa”)  
Mr Kevin Bolger, Chief Operating Officer (“COO”)  
Mrs Kay Fawcett, Chief Nurse (“CN”)  
Mr David Hamlett, Non-Executive Director (“DHa”)  
Tim Jones, Executive Director of Delivery  
Ms Angela Maxwell, Non-Executive Director (“AM”)  
Mr David Ritchie, Non-Executive Director (“DR”)  
Dr Dave Rosser, Medical Director (“MD”)  
Mr Mike Sexton, Director of Finance (“FD”)  
Prof Michael Sheppard, Non Executive Director (MS”).  
Mr David Waller, Non Executive Director (“DW”)

In Attendance: Mr David Burbridge, Director of Corporate Affairs  
Ms Morag Jackson, New Hospitals Project Director  
 (“NHPD”) Fiona Alexander, Director of Communications  
 (“DoC”) and Mrs Viv Tsesmelis, Director of Partnerships  
 (“DoP”)

Observer: Visiting Researcher

**D11/231 Welcome, Apologies for Absence and Declarations of Interest**  
Sir Albert Bore, Chairman, welcomed everyone present to the meeting

**D11/232 Quorum**  
The Chairman noted that:

- i) a quorum of the Board was present; and
- ii) the Directors had been given formal written notice of this meeting in accordance with the Trust’s Standing Orders.

**D11/233 Minutes of the previous meeting**

The minutes of the meeting of 24 November 2011 were accepted as a true record, amended as initialled by the Chairman.

**D11/234 Matters Arising**

None

**D11/235 Actions List**

The actions list was reviewed.

**D11/236 Chairman's Report and Emerging Issues Review**

The Chairman reported that Monitor had rejected two proposed amendments to the Trust's constitution, regarding the appointment of alternates for stakeholder governors with national commitments and the appointment of an internal returning officer for governor elections.

The outcome of an employment tribunal hearing that took place over the summer had now been handed down. The claim, brought by Karen Hall, a former nurse at the Trust who alleged detrimental treatment following her "whistle-blowing", was unanimously dismissed by the Tribunal.

The Chairman reported that the Trust had had a successful meeting with Sainsbury's and Land Securities regarding their plans for the Birmingham Battery Park site. Discussions included the possibility of the Trust taking a building on the site, which might compare favourably against the costs of re-furbishing Nuffield House. The size of the proposed development has been scaled back, as the City Council have concerns over its impact on the Northfield and City Centre sites. An area on the site has been identified for offices and a surgery etc. Locations of building may be dependent on contamination issues. Submissions of expressions of interest regarding the use of buildings within the site are to be called for in January, in advance of the intended planning application.

It was agreed that there was no requirement to extend either Stewart Dobson or Clare Robinson's engagements as advisors to the Board beyond 31 December. The Chairman would be writing to both Stewart and Clare to thank them.

It was agreed that Gurjeet Bains would be the Non-executive Director with responsibility to promote and champion security management work at Board level, as had been the case with the previous Senior Independent Director.

The Chief Executive reported to the Board regarding the potential outcomes of a visit to the Middle East. The potential for international opportunities currently includes the junior doctor programme with

Pakistan (this has been very successful for both parties, with 18 doctors involved to date), advising on new hospital builds in Australia, collaboration with China over training and education and accrediting nurse training in India. The recent visit involved The Chief Operating Officer and Javid Kayani, Deputy medical Director visiting Oman to discuss a training programme for specialty registrars, and meetings in Abu Dhabi and Kuwait. UKTI and NHS Global are actively seeking opportunities for UK health providers in the Middle East and there is potential for work with Saudi Arabia.

It was agreed that this was a fast moving agenda which could have a major beneficial impact on the Trust. The possible opportunities arising from this will be the subject of a Board of Directors' seminar on 6 March.

#### **D11/237 BNHP MONTHLY PROGRAMME STATUS REPORT**

The Board considered the report presented by the New Hospitals Project Director, who further reported that:

[redacted text]

The planning application for the Selly Oak site has been delayed, but an application will be submitted shortly. Regrettably, the Prince's Regeneration Trust has not been able to support the proposals in totality. However, a good response to the Trust's proposals has been received from the community and the City Council appeared comfortable with the Trust's plan.

It was confirmed that the costs for Variation 250 were within the amount supported by the QEHB Charities.

#### **Resolved:**

- 1. to accept the progress reported in the New Hospitals Project Director's report; and**
- 2. Accept the variations instructed in this month.**

#### **D11/238 CLINICAL QUALITY MONITORING REPORT**

The Directors considered the report presented by the Executive Medical Director, who confirmed that there were no investigations currently being undertaken with regard to doctors' performance.

With regard to delays in results reporting, whilst no single solution had been identified, there was no indication that significant risks were being caused. Work to improve performance was continuing.

Updates were provided for the two investigations in to serious incidents.

Gurjeet Bains reported that the visit to ambulatory care had been very positive. Concerns had recently been raised by a member of staff regarding the competency of staff in this area to care for the patients they were now dealing with. The visiting team felt very assured that the level of support and training for staff was appropriate and had been very satisfied with their findings. A previous visit had noted concerns with the attitude of reception staff and this no longer appeared to be an issue.

There was discussion regarding signage. The DComms confirmed that an internal review of signage had just been completed. A review of signage external to the site had also been undertaken and discussions with Birmingham City Council were to be held regarding this. Information in patient letters now mirrored the signage used in the hospital.

**Resolved: to accept the report and approve the actions identified**

#### **D11/239 PERFORMANCE INDICATORS REPORT**

The Directors considered the report presented by the Executive Director of Delivery, which now included performance against CQUINs, all of which had been met for the last two years.

The Accident & Emergency target had been achieved in November and the COO was confident it would be achieved for December. However, performance over the whole quarter may be just below the required level, in which case a report will have to be made to Monitor. If this was the case and the Trust failed to achieve the 62 day cancer target, a red rating for governance would result.

Achievement of the 62 day target for the quarter looked likely as performance was currently above target.

The follow-up audit of the aseptic unit had not identified any major concerns.

It was agreed that the mortality audit report would not be included in future reports, as the exercise had not identified any material issues.

There was discussion regarding the CQUIN about responsiveness to patients' needs, in particular, noise at night, slot availability in acute medical care clinics and the sharp decline in GP usage of the Choose and Book system, and anti-microbial stewardship.

It was noted that the local authority's efforts to assist with Delayed Transfers of Care were having a positive effect.

The Director of Corporate Affairs reported that the Trust had no red or amber indicators on the latest issue of the CQC's Quality and Risk Profile.

- Resolved:**
- a) **to approve the removal of the Non-Emergency Mortality Audits indicator from future reports;**
  - b) **to accept the report on progress made towards achieving performance targets and associated actions and risk; and**
  - c) **to accept the report on progress with the Trust's CQUIN schemes.**

**D11/240 REPORT ON INFECTION PREVENTION AND CONTROL FOR NOVEMBER 2011**

The Directors considered the paper presented by the Executive Chief Nurse. There was discussion about the introduction of the new Clostridium Difficile ("CDI") test. The microbiology department had confirmed that the new test was more robust and would lead to more instances of CDI being detected. A change trajectory would be agreed with the PCT.

Both MRSA and CDI continued to be below trajectory, with no cases of MRSA and 6 CDI to date for December. One ward is currently closed due to an outbreak of what is suspected to be noro-virus.

The incident regarding MDR Acinetobacter in Critical Care has now been closed. There have been two cases in the burns unit, which are under review.

**Resolved: to accept the report on infection prevention and control progress.**

**D11/241 PATIENT CARE QUALITY REPORT**

The Directors considered the paper presented by the Executive Chief Nurse. Good progress on completion of falls assessments and the management of falls continues, with the completion rate for assessments at 78 – 80%. Work is being undertaken to drive further improvement. The number of falls resulting in harm has reduced.

The Chief Nurse is now confident that reporting of pressure ulcers has now reached a level of consistency which will allow focus to switch to measures to reduce the incidence.

The reference in paragraph 7.1 to a paper presented to the Board meeting was erroneous and should have referred to a paper submitted to the Chief Executive's Advisory Group.

There was discussion about the care rounds and the need to ensure that these were not regarded by staff as an additional tick box exercise to be completed in addition to their normal duties.

**Resolved: to receive this report on the progress with Care Quality.**

**D11/242 FINANCE AND ACTIVITY PERFORMANCE REPORT FOR THE PERIOD ENDING 30 NOVEMBER 2011**

The Directors considered the report presented by the Director of Finance. The current position of the operating surplus of £350,000 being marginally below plan was not considered significant. Cost-effective longer term solutions to deal with increased activity were now being considered.

The Trust was currently holding approximately £70 million in its bank accounts. Following discussion, the Investment Committee had agreed that the Board should consider a paper in January proposing amendments to the Cash Management Policy, so that the Trust's conditions for the length of investments and the ratings reflected the current situation in the financial sector.

**ACTION:FD**

There was discussion regarding aged debtors and the FD confirmed that he considered those aged over 90 days would be collectable as they were mainly due from other NHS organisations and some were set off by monies owed by the Trust to those organisations.

**Resolved: to receive the contents of this report.**

**D11/243 INDUSTRIAL ACTION**

The Directors considered the report as presented by the Executive Director for Delivery. Negotiations with the trade unions had gone very well and there had been minimal disruption to the Trust. Three ambulatory care lists and three theatre lists had been lost and 31 patients had been notified that day before that their operation had had to be cancelled. All had been re-arranged. The impact of the strike on imaging had been managed by cancelling mobile mammography.

In total, 380 trust staff had participated in the action. Physiotherapy had been particularly affected. This was a similar level of participation to that experienced by other Trusts, although the level of disruption appears to have been much higher elsewhere.

It was considered highly unlikely that further action would take place in January. The trade unions were required to give a minimum of seven days' notice of action.

**Resolved to: accept the contents of this report.**

**D11/244 LIVER SERVICES EXPANSION STRATEGY**

**Resolved:** To approve the proposed Liver Services expansion strategy.

**D11/245 APPROVAL OF THE AUDIT COMMITTEE'S TERMS OF REFERENCE**

**Resolved:** to approve the terms of reference

**D11/246 APPROVAL OF POLICIES**

The Board considered the paper presented by the Director of Corporate Affairs

**Resolved:** to consider and if thought fit approve the following policies:

**Risk Management Policy (Appendix A)**

**Security Policy (including The Prevention and Control of Violence & Aggression) (Appendix B)**

**Policy for the Development and Management of Controlled Documents (Appendix C - amended as initialled by the Chairman)**

**D11/247 Date of Next Meeting:**

**Thursday 26 January 2012 1.00pm Board Room Trust HQ QEMC**

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**Chairman**

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**Date**