

## BOARD OF DIRECTORS

Minutes of the Meeting of 26 July 2012  
Board Room, Trust HQ, QEMC

- Present: Sir Albert Bore, Chairman  
Dame Julie Moore, Chief Executive  
Mrs Gurjeet Bains, Non Executive Director (“GB”)  
Mr Kevin Bolger, Chief Operating Officer (“COO”)  
Mrs Kay Fawcett, Chief Nurse (“CN”)  
Mr David Hamlett, Non-Executive Director (“DHa”)  
Mr Tim Jones, Executive Director of Delivery  
Ms Angela Maxwell, Non-Executive Director (“AM”)  
Mr David Ritchie, Non-Executive Director  
Dr Dave Rosser, Medical Director (“MD”)  
Mr Mike Sexton, Executive Finance Director (“FD”)  
Prof Michael Sheppard, Non Executive Director  
Mr David Waller, Non Executive Director (“DW”)
- In Attendance: Mrs Fiona Alexander, Director of Communications (“DoC”)  
Mr David Burbridge, Director of Corporate Affairs  
Ms Morag Jackson, New Hospitals Project Director  
Mrs Viv Tsesmelis, Director of Partnerships (“DoP”)
- Observers: **New Consultants:**  
Mr Ramesh Chelvarajah, Neurosurgery  
Mr Sai Kolli, Ophthalmology  
Mr Umesh Salanke, Emergency Medicine  
Mark Brewster, Hand Surgery

### D12/150 **Welcome and Apologies for Absence**

Sir Albert Bore, Chairman, welcomed everyone present to the meeting. Apologies were received from David Bailey, Non-Executive Director and Tim Jones, Executive Director of Delivery.

**D12/151 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.

**D12/152 Declaration of Interests**

See below

**D12/153 Minutes of the previous meeting**

The minutes of the meeting of 5 July 2012 were accepted as a true record.

**D12/154 Matters Arising**

None

**D12/155 Actions List**

The actions list was reviewed and updated.

**D12/156 Chairman's Report and Emerging Issues Review**

The Chairman had nothing to report.

**D12/157** [redacted text]

**D12/158 TRUST CAPITAL PROGRAMME REPORT**

The Directors considered the report presented by the New Hospital Project Director.

**Resolved: to receive the report regarding expenditure against the 2012/13 capital programme.**

**D12/159 CLINICAL QUALITY MONITORING REPORT**

The Directors considered the report presented by the Executive Medical Director, who provided the Board with an update on the investigations set out in section 2.

The Medical Director reported that Dr Foster had changed their methodology for calculating their HSMR again, once more making the Trust an outlier. Had the changes not been made, the Trust would not have been an outlier.

The Medical Director reported that he was confident that the contingency measures that the Trust had put in place, to address

the issue facing the whole of the NHS regarding Baxter dialysis equipment, would ensure that there was no risk to the Trust's ITU patients. However, there were concerns that the national position could mean that other trusts may seek to send patients to the Trust. Plans were being put in place to manage any such referral requests.

There was discussion about the incidents included in the report. With regard to the first incident, it was confirmed that the medical decision making had been appropriate.

The governance visit to the Dialysis Unit was discussed and it was reported that de-cluttering had already taken place.

**Resolved: to accept the report.**

**D12/160 QUALITY ACCOUNT UPDATE FOR Q1 2012/13**

The Directors considered the paper presented by the Executive Medical Director.

**Resolved: to approve the content of the Quality Account Update for Quarter 1 2012/13 for external publication**

**D12/161 PERFORMANCE INDICATORS REPORT**

The Directors considered the paper presented by the Chief Operating Officer on behalf of the Executive Director of Delivery. Performance against infection control trajectories would be dealt by the Chief Nurse in her subsequent report.

The risk to compliance against CQC essential standards reflected the outcome of an interim report following a review of the medicines code and procedures. Actions are already being implemented to ensure appropriate assurance is met against the standard.

There was discussion regarding the latest results of the friends and family indicator, which were tabled by the Chief Nurse. It was agreed that, although the results still show a degree of inconsistency, more areas were now achieving an appropriate response rate. In comparison with its peers, the Trust impaired favourably. The Chief Nurse reported that additional work was being undertaken in relation to the way in which question is asked as it is apparent that face-to-face engagement is more likely to generate a favourable response.

[redacted text]

**Resolved: to accept the report on progress made towards achieving performance targets and associated actions and risks.**

**D12/162 MONITOR QUARTERLY GOVERNANCE DECLARATION**

The Directors considered the report presented by the Director of Corporate Affairs on behalf of the Executive Director of Delivery.

**Resolved to:**

1. **agree that the statement on governance should be confirmed and signed on behalf of the Board of Director Quarter 1 2012/13;**
2. **accept that this will result in the Trust being rated 'Green' by Monitor for governance for the Quarter; and**
3. **agree that there are no other risks that require notification to Monitor for Quarter 1 2012/13 and that the statement to this effect should be confirmed and signed on behalf of the Board of Directors.**

**D12/163 ANNUAL PLAN 2012/13 PERFORMANCE UPDATE**

The Directors considered the report presented by the Director of Corporate Affairs on behalf of the Executive Director of Delivery.

**Resolved to: accept the year to date 2012/13 performance update against the Trust Annual Plan**

**D12/164 REPORT ON INFECTION PREVENTION AND CONTROL UNTIL 30 JUNE 2012**

The Directors considered the report presented by the Executive Chief Nurse. There have been no MRSA bacteraemia in the Trust for June or July to date. The Trust had five clostridium difficile infections in June which put it back on trajectory. However, it has had seven to date for July and further work is continuing to ensure that the Trust remains below trajectory across the quarter.

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

**D12/165 FINANCE AND ACTIVITY PERFORMANCE REPORT FOR THE PERIOD ENDING 30 JUNE 2012**

The Board considered the report presented by the Executive Director of Finance. A strong performance had been recorded for quarter one, driven by high activity levels and the overspend had been set off against income connected with this additional activity. The Trust's cash position remains strong.

At its previous meeting, the Board approved the Trust arranging an overdraft facility of £50 million, to address the way in which Monitor calculates its financial risk rating. However, Monitor have now said that an application for an approved borrowing limit at that level would need special consideration by Monitor's board. They were able to give approval for a lower limit of £46,600,000 and accordingly, it was proposed that the Trust enter into an arrangement for an overdraft facility in that sum.

The FD remained confident that the Trust would continue to be rated at 3 against Monitor's financial Risk rating over the next twelve months.

**Resolved to:**

1. receive the contents of this report;
2. agree that Monitor's new combined Governance Statement should be signed confirming that the Board expects the Trust to continue to maintain a minimum FRR of 3 for the next 12 months; and

There was produced to the meeting a document containing the commercial terms of a revolving credit facility agreement (the Facility Agreement) from Barclays Bank PLC (the Bank) to the Foundation Trust setting out the terms and conditions upon which the Bank is prepared to make available to the Foundation Trust a facility (the Facility) in the maximum principal sum of £46,600,000.

**IT WAS RESOLVED**

1. That the borrowing by the Foundation Trust of up to the full amount of the Facility on the terms and conditions set out in the Facility Agreement is in the interests of and for the benefit of the Foundation Trust and is in the interest of and for the benefit of the members as a whole and that such terms and conditions be and are approved and accepted.
2. That the Foundation Trust has a prudential borrowing limit, pursuant to section 46 of the National Health Service Act 2006 and schedule 5 of the Foundation Trust's Authorisation, of £46,600,000.
3. That the Foundation Trust has not used any of its borrowing facilities as set out in Schedule 5 of its Authorisation, and has the capacity to enter into a revolving credit facility agreement in the maximum principal sum of £46,600,000, which is equal to or

more than the Facility.

4. That by entering into the Facility, the Foundation Trust will not be in breach of its obligations pursuant to section 44 of the National Health Services Act 2006, and that the Foundation Trust will not use the Facility in such a way that will cause itself to breach its obligations, pursuant to section 44 of the National Health Services Act 2006, or any condition of its Authorisation.
5. That Mike Sexton and David Burbridge are authorised to sign the Facility Agreement on behalf of the Foundation Trust in their capacity as Director and Secretary respectively to indicate acceptance of the terms and conditions.
6. That the Bank is authorised to act in all matters concerning the Facility upon instruction from the Foundation Trust signed in accordance with the Bank's mandate for any of the accounts of the Foundation Trust held with the Bank current from time to time.

**D12/166 INVESTMENT COMMITTEE**

Angela Maxwell, chair of the Investment Committee, reported that the Committee had met on 11 June [redacted text]

**Resolved:** accept the update

**D12/167 COMPLIANCE AND ASSURANCE REPORT**

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

**Resolved to:** receive the report on compliance with CQC Essential Standards, NHSLA Risk Management Standards and NICE guidance.

**D12/168 THE SEALING OF A DEED OF SURRENDER OF THE HAYWARD BUILDING AT SELLY OAK HOSPITAL**

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

**Resolved to:**

1. note that the early vacation of Trust premises by the tenant is to be documented by way of a formal surrender;
2. approve the use of the Trust Seal, pursuant to Standing Order 6.1; and
3. approve the recommendation above.

**D12/169 APPOINTMENT OF ADDITIONAL CONSULTANT RADIOLOGIST POSTS**

The Board considered the paper presented by the Chief Operating Officer.

**Resolved: To approve the case for the appointment of three Consultant Radiologist posts.**

**D12/170 TRANSFER OF HOSTING ARRANGEMENTS FOR PAN BIRMINGHAM CANCER RESEARCH NETWORK**

The Board considered the paper presented by the Executive Director for Delivery.

**Resolved to:**

1. agree to accept Host responsibility and accountability for Pan Birmingham Cancer Research Network from NHS South Birmingham; and
2. authorise the Executive Director of Delivery to act as signatory to the contract, issued by the DH, that will enable the Trust to be the host for PBCRN.

**D12/171 Any Other Business**

None.

**D12/172 Date of Next Meeting:**

**Thursday 27 September 2012 1.00pm Board Room Trust HQ QEMC**

**Chairman**

**Date**