

BOARD OF DIRECTORS

MINUTES OF MEETING

25 April 2012

**BOARDROOM
EDUCATION CENTRE
ARROWE PARK HOSPITAL**

Present:

Michael Carr	Chairman
David Allison	Chief Executive Officer
Gary Doherty	Chief Operating Officer
Cathy Bond	Non-Executive Director
Richard Dutton	Non-Executive Director
Russell Favager	Director of Finance & Performance
Sue Green	Director of HR & Strategic Planning
Jeff Kozer	Non Executive Director
Tina Long	Director of Nursing & Midwifery
Lyn Meadows	Non-Executive Director
Anne Parker	Senior Independent Director & Deputy Chair
Jean Quinn	Non-Executive Director
Luke Readman	Director of Information
David Rowlands	Medical Director
Nick Williams	Non-Executive Director

In attendance:

Angela Wetton	Corporate Secretary (Interim)
---------------	-------------------------------

3 Governors attended

Reference	Minute
Preliminary Business	
BM12-13/001	Apologies for Absence No apologies had been received.
BM12-13/002	Declarations of Interest There were no declarations of interest.
BM12-13/003	Minutes of the Previous Meeting (28 March 2012) The minutes of the previous meeting were approved as a true and accurate record.
BM12-13/004	Matters Arising There were no matters arising that were not covered elsewhere by this meeting's Agenda.

Reference	Minute
<p>BM12-13/005</p>	<p>Chair's Business</p> <p>The Chairman welcomed David Allison to his first Trust Board Meeting.</p> <p>The Chairman proceeded to advise the Board of the following items:</p> <p>Consultant Appointments: Dr Tan Hock Guan Consultant in Respiratory Medicine Dr Mahmoud Mostafa Consultant Breast Radiologist</p> <p>Monitor:</p> <p>Monitor had approved the Governors' request to amend the Trust's Constitution to extend the tenure of office of elected and appointed Governors to a maximum of nine years.</p> <p>The Progress Review Meetings with Monitor would take place on Monday 30th April; 22nd May and 9th July 2012.</p> <p>Update on NED Appointment Process: A provisional interview date of Wednesday 16th May had been arranged for interviews for the replacement Non-Executive Director for Anne Parker.</p> <p>The Board noted the report.</p>
<p>BM12-13/006</p>	<p>Chief Executive's Report</p> <p>The Chief Executive's report for April 2012 was received. The following items were highlighted:</p> <ul style="list-style-type: none"> • Partnership with Countess of Chester NHS FT • Vascular Services Review • CQC Inspection • Staff Satisfaction • Investors in People Report • Leadership <p>The Board noted the report.</p>
<p>Quality & Safety/ Patient Experience</p>	
<p>BM12-13/007</p>	<p>Director of Nursing & Midwifery Quarterly Report</p> <p>The report for Q4 2011-12 was received.</p> <p>The Board noted the progress being made against the following:</p> <ul style="list-style-type: none"> • Patient Quality Assurance Results (Ward Audits) • Medicines Security Spot Checks • Learning with Patient Results • National In-patient Survey 2011 • Nurse Staffing • Equality and Diversity Objectives • Infection Control

Reference	Minute
	<p>The Director of Nursing & Midwifery advised the Board that a CQC audit had taken place on 24 April 2012 to review Compliance with Medication Standards and Ward 20. A further 2-day audit would take place sometime between April and November 2012.</p> <p>The Board noted the report.</p>
BM12-13/008	<p>Draft Quality & Safety Committee Annual Plan The draft Report was received.</p> <p>The Committee had identified the following priorities for review during 2012-13:</p> <ul style="list-style-type: none"> • Identify sources of Clinical benchmarking and outcomes to provide assurance • Action plans, in particular their timeliness, monitoring and evidence of completion(including Clinical Audit) • Sustainable compliance • Evidence of improved learning from Root Cause Analyses • More effective complaints management as a key priority for the Quality Account • Assurance that all these issues are more embedded in Divisional activities. <p>The Board noted the draft report and endorsed the priorities identified for 2012-13.</p>
BM12-13/009	<p>Medicine Storage Audit The Report was received. In discussion the Board commended the Trust on the progress it had made in this area.</p> <p>The Board noted the Report and Action Plan.</p>
BM12-13/010	<p>NHSLA Progress Report The Report was received.</p> <p>The Board was assured by the weekly work programme which would be carried out on the wards and the weekly feedback meetings which would be held with Executive team members.</p> <p>The Board noted the report and emphasised the importance of retaining Level 2 during the official audit in July 2012.</p>
Strategies & Plans	
BM12-13/011	<p>18 Weeks RTT Plan The Report was received.</p> <p>The Chief Operating Officer confirmed the March 2012 figures and the forecast for April 2012.</p> <p>The Board noted that the Trust was in compliance with Monitor targets in March and also noted the unvalidated April figures suggested compliance with the Monitor targets but potential non-compliance with the National Contract at a speciality level for gastroenterology.</p> <p>The Board sought assurance that everything was being done to ensure compliance</p>

Reference	Minute
	<p>in Gastroenterology and agreed that the reduction in waiting times within the Trust should be communicated to local GPs and the general public.</p> <p>The Board requested that a report on GP Engagement be presented at the May Board Meeting.</p>
BM12-13/012	<p>Annual Plan – Final Draft</p> <p>The draft plan was received.</p> <p>The Chief Operating Officer advised that the plan needed to be submitted to Monitor by the end of May 2012. In addition, a Governance Statement would need to be completed and submitted at the same time. The Governance Statement would be discussed at the May meeting of the Quality and Safety Committee.</p> <p>The Board members were asked to submit suggested amendments to the plan outside of the Meeting.</p> <p>The final version would be presented to the Board at the May Meeting.</p> <p>The Board noted the draft plan and the timetable for approval and submission.</p>
BM12-13/013	<p>Board Assurance Framework 11-12 Qtr. 4 Review</p> <p>The Report was received.</p> <p>The Board noted that there were now 45 risks to the 9 Trust goals in the framework as several risks had been separated out to ensure appropriate attention is given to each target and additional risks to the achievement of Trust Goals identified.</p> <p>The Board also noted the following changes from Quarter 3:</p> <ul style="list-style-type: none"> • 1 new risk added to the BAF; ‘Risk of failure to deliver Access targets and expected activity levels sustainably because we do not effectively plan/forecast our capacity and demand’. • 18 risk scores have been reduced; seven in Goal 1, one in Goal 2, two in Goal 3, five in Goal 4, one in Goal 5, one in Goal 7 and one in Goal 9. • 0 risks have had the risk score increased in this quarter • 27 risks remained at the same score. <p>The Board noted that the BAF continued to be reviewed every month and appropriate actions to reduce and control risks as well as addition of newly identified risks to achieving our goals were reflected in the year-end review</p> <p>The Board was advised by the Medical Director that the BAF for 2012-13 was currently in development and would be presented to the Board in May 2012 2012-13. The Board agreed that the BAF for 2012-13 needed to be re-designed and become more focused on key trust goals and indicators.</p> <p>The Board noted the Report and the timeline for presentation of the 2012-13 BAF.</p>

Reference	Minute
Use of Resources /Governance	
BM12-13/014	<p>Intelligent Board Performance Report</p> <p>The Performance Report which provided a summary of the Trust's position against the revised Monitor Governance Framework for 2011-12 was received.</p> <p>The Director of Information advised the Board that the format of the report would be improved and he intended to present the revised format at the May Board Meeting.</p> <p>The Board noted that the Trust had delivered the current 18 week standards in March, as detailed in the performance report along with the 62 day cancer target.</p>
BM12-13/015	<p>Monitor Compliance Qtr. 4 2011-12</p> <p>The report was received.</p> <p>The Director of Finance highlighted the following:</p> <p>Targets & Indicators All met with the exception of 18 weeks (Admitted patients).</p> <p>CQC Standards All met with the exception of medicines management.</p> <p>Compliance rating The Trust was rated red for governance due to the escalation to Significant Breach.</p> <p>Governance information Information relating to Board appointments and any relevant election results would be included.</p> <p>Finance Declaration The Trust had met its planned FRR (financial risk rating) of 3 for the quarter and had achieved an FRR of 3 for the year.</p> <p>The Board was asked to agree that the Chief Executive be authorised to sign to confirm to Monitor that "The Board anticipates that the Trust will continue to maintain a financial risk rating of at least 3 over the next 12 months."</p> <p>The Board noted the report and delegated authority to the Chief Executive to sign the Monitor declaration.</p>
BM12-13/016	<p>Financial Position at 31 March 2012</p> <p>The Report which detailed the financial position for 2011-12 as at 31 March 2012 was received.</p> <p>The Director of Finance highlighted the following key points:</p> <ul style="list-style-type: none"> • At year end the Trust reported a surplus of £2.3m against a planned position of £0.5m which gave a small favourable variance of £1.8m and a Monitor Risk Rating of 3. The additional surplus was generated through year end technical adjustments in respect of lower capital charges and less impairment than planned. The underlying position was in line with expectations. • The final position on CIP for 2011-12 against the £13.75m target was a

Reference	Minute
	<p>recurring shortfall of £0.5m between the Divisions of Surgery and Acute Care; this would be carried forward by the individual Divisions.</p> <ul style="list-style-type: none"> • The final position on Capital Spend was an actual spend of £8.8m against a planned spend of £9m • The audit of the accounts would commence on 30th April 2012. • A final set of accounts including the Auditor's opinion would be presented to the Audit Committee on 23rd May and the Board on 30th May which would allow the accounts to be submitted to Parliament by the 25th June 2012. <p>The Board was asked to:</p> <ul style="list-style-type: none"> • Note the provisional final financial position for the Trust for 2011-12 and the position in respect of 2012-13 CIP. • Note that the financial plan was achieved, subject to audit sign off, which would result in a Monitor financial risk rating for 2011-12 of 3. <p>The Board noted the report and the Monitor Risk Rating of 3.</p>
Items for Noting	
Committee Minutes:	
	<p>Hospital Management Board (9 & 23 March 2012)</p> <p>The Board noted the minutes of the meetings held on the above dates.</p>
	<p>Quality & Safety Committee (March 2012)</p> <p>The Board noted the minutes of the meeting held on the above date.</p>
For Information	
BM12-13/017	<p>Any Other Business</p> <p>There was no other business to discuss.</p>
BM12-13/018	<p>Items for Risk Register</p> <p>No items were identified.</p>
BM12-13/019	<p>Private Business</p> <p>Private business was discussed.</p>
BM12-13/020	<p>Date of Next Meeting (formal)</p> <p>Wednesday 30 May 2012</p>

The meeting closed at 5.30pm

.....
Chair

.....
Date