

## **ROYAL BROMPTON & HAREFIELD NHS TRUST**

### **Minutes of a Meeting of the Trust Board held on 26 May 2004 in the Board Room, Royal Brompton Hospital**

- Present: Lord Newton of Braintree (Chairman)  
Mrs I Boyer: Non Executive Director  
Dr. G Goodier: Chief Executive  
Mrs M Leadbeater: Director of Finance  
Mr P Mitchell: Director of Operations  
Professor A Newman Taylor: Medical and Research  
Director  
Mr C Perrin: Deputy Chairman  
Dr. C Shuldham: Director of Nursing and Quality
- By invitation: Mr R Craig: Director of Governance and Quality  
Professor T Evans: Associate Medical Director RBH  
Mr R Gorlin: Chairman Audit Committee  
Mr N Hunt: Director of Partnership and Service  
Development  
Dr. R Radley-Smith: Associate Medical Director HH  
Mr T Vickers: Director of Human Resources
- Observers: Miss M Greatorex: Chair Royal Brompton and Harefield  
Patient and Public Involvement Forum  
Ms J Ocloo: Co-Chair Royal Brompton and Harefield  
Patient and Public Involvement Forum  
Mr Kenneth Appel: Royal Brompton and Harefield Patient  
and Public Involvement Forum
- In Attendance: Mr J Chapman: Head of Administration  
Mrs L Davies: Head of Performance  
Ms J Thomas: Head of Communications

Apologies for absence were received from Mrs Suzanne McCarthy and Professor Malcolm Green, Non-Executive Directors

The Chairman welcomed Miss Marguerite Greatorex, current Chair and Ms Josephine Ocloo, Co-Chair of the Royal Brompton and Harefield Patient and Public Involvement (PPI) Forum to the meeting. Miss Greatorex said the Forum hoped the Board would be able to meet the Forum at a suitable time in the not too distant future.

2004/49 MINUTES OF BOARD MEETING ON 24 MARCH 2004

The Board received the minutes of the meeting held on 24 March 2004.

Mr John Ross referred to the fourth paragraph of Minute 2004/30 and raised the agreement made by the former Project Director with the Westminster City Council Planners to withdraw the August 2002 planning application, as recorded in the Westminster City Council Planning Officer's letter to the Project Director, dated 13 February 2003 and asked if this application had been withdrawn. Mr Hodson confirmed that the application had not been withdrawn, contrary to the recorded agreement.

The Board accepted Mr Ross's amendment and confirmed the minutes.

2004/50 MINUTES OF BOARD MEETING ON 28 APRIL 2004

The Board received the minutes of the meeting held on 28 April 2004.

Mrs Jean Brett, Chair of Heart of Harefield, referred to the last sentence of Minute 2004/47. This had recorded that Mrs Brett thought it would be helpful for Mrs Isabel Boyer to review the staff survey with her and that Mrs Boyer had agreed. Mrs Brett explained that what Mrs Boyer had agreed was to consider the suggestion but so far she has not heard from her.

The Board then confirmed the minutes of the meeting.

2004/51 REPORT FROM THE CHIEF EXECUTIVE

Dr. Gareth Goodier, Chief Executive, presented a report which referred to three matters;

- (i) 2003/4 Financial Out turn  
More detailed analysis of the year-end budget position confirmed that break-even had been achieved and the draft final accounts were reporting a balanced outcome for the year.
- (ii) Organisational Development  
Dr. Goodier proposed to the Board the creation of an Organisational Development Working Party to oversee all elements of people management, complementing and supporting the existing Trust's committee structure. The Working Party would be chaired by a Non-Executive Director with membership from a cross-section of senior staff. The key

tasks would be to create an organisational development strategy and co-ordinate the range of local and national initiatives.

(iii) Catering Services

A Channel 4 documentary TV programme on hospital food broadcast on 13 May 2004 had praised the quality of food in Royal Brompton and Harefield Hospitals. However, it incorrectly reported that the average cost per meal was over £1.00 higher than elsewhere. Dr. Goodier said the Trust's cost per meal was only marginally higher. While the Trust was pleased to be upheld as the 'gold standard' on patients' food, the Trust also had to correct the misrepresentation over its costs.

Dr. Goodier also briefly reported four other matters;

(iv) Board Minutes

Mrs Brett and her colleagues had expressed concern at the Trust's slowness in placing its minutes on its website. Dr. Goodier assured the Board that the agreed minutes of previous meetings had been put on the website that afternoon and a speedier process was in place for the future.

(v) Cardiac Theatres Open Day

The Cardiac Theatres Open Day at Harefield Hospital on 18 May was highly successful and had received considerable favourable publicity.

(vi) Electronic Left Ventricular Assist Devices (LVAD)

The Sunday Times had published an article on 23 May 2004 featuring four pioneering operations in which electronic LVADs had been implanted in patients with heart failure. It mentioned two centres where the operations had taken place but made no reference to Royal Brompton Hospital where three of the operations were performed.

(vii) Location of Future Board Meetings

The Board having had a run of meetings at Royal Brompton Hospital rather than on alternate sites, the question of the place of future meetings was raised. Dr. Goodier accepted there should be representation between the two sites and said he would endeavour to achieve this rapidly. It had not been yet decided if the meeting in June would take place.

2004/51

PADDINGTON HEALTH CAMPUS DEVELOPMENT

Dr. Goodier presented a report from the Project Director on progress with the Paddington Health Campus Development. The report of the

independent review was in draft and publication was expected shortly. The Project Team continue to evaluate the options for site configuration of services. It had recently reviewed options for provision of services for management of chronic diseases.

On project governance, a Project Executive Group had been formed and had met regularly since March. It took Executive decisions relating to the Project and referred strategic matters to the Joint Project Board, to which it reported. The SHA is leading the establishment of a commissioning board to represent the interests of local and national commissioners of services from the two Trusts. It also considers clinical models proposed for the Campus and reviews key Project documents and the Project budget. Dr. Goodier also drew attention to recent media coverage on the Project. The six page article in 'Building' gave chapter and verse on the Project and was factually correct.

The Chairman informed the Board that an adjournment debate was held in Westminster Hall on 25 May on the distribution of specialist health services in West London. Mr John Randall, MP, Mr John Wilkinson, MP, and Mr Andrew Lansley, Shadow Spokesman for Health Services, spoke in the debate. Mr John Hutton, Minister for Health, replied to the debate. The debate covered issues with which the Board was familiar. It also confirmed that publication of the independent review was imminent. A summary of the debate was available.

2004/52 QUESTIONS FROM MEMBERS OF PUBLIC

Mrs Jean Brett said she had been present during Mr John Randall's debate. The Hansard record had been faxed to her that morning. Heart of Harefield was delighted with Mr Randall's contribution which concentrated on the Paddington Health Campus. Mrs Brett reminded the Board of Mr Randall's ability and his business background. He had gone so far as to say that it was now necessary to consider having an inquiry into the way the Project had been run.

Mrs Brett referred to the communications section of the Project Director's Report and questioned its lack of accuracy on media reports. It did not make clear that the Building article was severely critical of the Project, describing it as problematic, with no-one having known it would take so long and achieve so little. Building described it as, "The PFI from hell", while another article referred to the NHS having to "slash the size of the Project".

Mrs Brett also questioned the accuracy of Dr. Goodier's statement that the independent review of the Project would appear within two weeks. Representatives of Heart of Harefield had met with National Audit Office officials that morning. They had been told that the publication date of their report could not be predicted.

Mr David Potter, Chairman of Rebeat and Vice Chairman of Heart of Harefield, asked the Board to note that the original Outline Business Case had building space of 140,000 square metres while the current plans totalled 220,000 square metres. This was an increase of 57%, 861,000 square feet. This is much greater than the current 15% cut suggested for the Scheme, which is only 28,000 square metres, or 301,000 square feet. Mr Potter said he was amazed at such drastic changes and asked how the cut in size would be effected.

Mr Charles Perrin, Co-Chairman of the Joint Project Board, said the reduction in space principally related to St. Mary's and not Royal Brompton and Harefield. Considerable discussion had taken place over which St. Mary's services could be provided on the Campus and off Campus. This was the key driver over the reduction in space. Mr Perrin said the Joint Project Board had approved the Project budget for 2004/5 in principle. It intended to keep expenditure on consultants fees down as far as possible and would continue to monitor expenditure very closely.

Dr. Caroline Shuldham, Director of Nursing and Quality, said she had taken over responsibility for PPI in the Paddington Health Campus in relation to Royal Brompton and Harefield. Ms Sue Osborne had taken over the same responsibility in relation to St. Mary's. Dr. Shuldham said her immediate priority would be to review what had taken place, identify the concerns of all parties and achieve progress in partnership with the public.

2004/53 COMMENTS FROM THE ROYAL BROMPTON & HAREFIELD PPI FORUM

Miss Marguerite Greatorex, current Chair, said the Forum had asked for a copy of the new Outline Business Case (OBC) for the Paddington Health Campus when it becomes available but had been told it was confidential.

Dr. Goodier said the OBC published in 2000 was available to the public. The only subsequent OBC was for the Point Building which was a confidential document. Dr. Goodier indicated that the Trust expected the independent review report to be published soon. The Trust hoped it would support the production of a new OBC for the Development and when this becomes available the Forum would be given a copy.

Ms Josephine Ocloo said the Forum would like to learn more about the Development. Ms Ocloo referred to the reluctance of Harefield staff to relocate, noted that the nursing vacancy rate was higher at Royal Brompton than at Harefield and asked if it would affect the Development.

Dr. Goodier said the Trust would welcome an opportunity to brief the Forum. On the staff survey, Dr. Goodier said that although only 7%

of Harefield staff had indicated they would relocate to Paddington, 47% had said they had not come to a decision as it was at least seven years away. A significant percentage of the Trust's current staff will have left in seven years time, with many of them rotating in employment through other NHS posts. The Trust would refine the question about relocation to Paddington in the 2005 survey.

Dr. Goodier further explained that the NHS is changing and as a result the current basis of service provision at Harefield would be unsustainable. Many current tertiary care services were becoming secondary care services and 65% of patients currently referred to Harefield would in future be treated at local DGHs. The patients who would in the future be referred to Paddington would be patients living throughout the UK who had complex problems.

Ms Ocloo asked how Dr. Goodier's response would affect nurse vacancy rates. Dr. Goodier said measuring nurse employment by vacancy rates and whole time equivalents was anachronistic. He said Trust Managers and the Board needed to relate nursing hours to patient hours and patient complexity. He had asked Dr. Caroline Shuldham to develop a new measure of nursing activity by Autumn 2004 that would show more effectively how nurses are deployed in the Trust.

Mrs Jean Brett said Heart of Harefield was very pleased to see the PPI Forum Representatives at the Board meeting. Thanking the Chairman for seeking her response on the serious staffing issues raised by Ms Ocloo, Mrs Brett advised the Board that when the Secretary of State allowed the Paddington Health Campus Development to continue in 2001 this was accompanied by a Statement of Undertakings. On staff it directed that attitudes to the move be monitored by site and carefully analysed. There is a duty to carry out that undertaking properly. Mrs Brett said she would therefore be grateful if, in the next staff survey, the one question which Harefield staff wanted, was not again excluded by the Chief Executive. The question was, "Should the Paddington move not go ahead would you remain with the Trust?" That this had been refused by Trust Management Mrs Brett considered indicative of their fear of the answer. Mrs Brett assured the Forum Members that she would be delighted to speak to them on Paddington at any time.

Dr. Goodier explained that the Trust did not include the question in 2004 survey as another question put the same issue in a different way. He had asked Professor Anthony Newman Taylor to oversee the 2005 survey with assistance from the Research Services Department in producing a more relevant questionnaire. Heart of Harefield would be asked to contribute to the survey.

Mr David Potter referred to the 2004 staff survey and the percentage of staff at Harefield who were over 55 years of age. Mr Potter said

that the attitude of Harefield staff against relocating to Paddington would remain constant as the staff mix would remain the same.

2004/54 GOVERNANCE AND QUALITY REPORT

The Board received a governance and quality report for May 2004 which contained two items; the Annual Controls Assurance Report for 2003/4 and a report from the Risk Pooling Scheme for Trusts (RPST) 2004 Assessment, with Action Plan for 2004/5.

Dr. Caroline Shuldham presented the Controls Assurance Report. The standards and action plan for 2003/4 had been given greater priority in the Trust and this had resulted in considerable improvements towards compliance, higher scores and a more reliable method of assessment. The informal target score for achievement was 75% overall; the Trust had achieved 75% in all but four categories. Thames Audit had conducted independent verification and an action plan had been developed to address areas which still needed improvement.

The Board noted the report and recorded its satisfaction with the improvements that had taken place. It expressed its gratitude to Dr. Shuldham for leadership of controls assurance in the Trust and to Clothilde Kapufi-Morrison for the support she had given.

Robert Craig, Director of Governance and Quality, presented the RPST assessment report and action plan for 2004/5. The assessor had indicated at the end of her visit that the Trust complied with Level 1 criteria, that is an average score of 75%. The report indicated the overall average was 87%, a great improvement on the 57% average in 2003. The assessor had noted in particular the improvements made in risk management procedures and policies. Mr Craig indicated that RPST was currently reviewing Level 2 and Level 3 criteria. The Trust's aim for 2004/5 was to continue to make improvements so that it at least satisfied the current Level 2 criteria by 31 March 2005 and be ready for another assessment in 2005/6.

The Board noted with pleasure the highly successful outcome of the assessment and expressed its thanks to Lyn Jenkins, Trust Risk Manager, who had supervised the assessment.

2004/55 DRAFT BUSINESS PLAN FOR 2004/5

Mr Nick Hunt, Director of Partnership and Performance, presented the draft business plan for 2004/5 to the Board. The plan indicated the key objectives from the Directorates with target dates for achievement and three specific objectives given by the Chief Executive. The plan was, at present, subject to approval of the Trust budget for 2004/5. Mr Hunt said that Mrs Suzanne McCarthy had spoken to him about the plan and asked him to draw attention to three matters; the business objectives should relate to the Trust's strategic objectives, priorities should be graded and the plan should indicate how it would be

audited. Mr Perrin endorsed Mrs McCarthy's comments and said that grading priorities would be important if the Trust had to restrict developments for financial reasons. Mr Hunt agreed to revise the plan appropriately.

Mrs Isabel Boyer asked how the plan related to the three year rolling cycle and local NHS delivery plans. Mr Hunt explained the Department of Health planning guidelines indicated local delivery plans should match PCT funding, but this was complicated by the emergence of Foundation Trusts. The year 2004/5 was the second year of the local delivery plan and the SHA had indicated that there should be no departure from the current cycle. As a result the Trust had produced a local Trust business plan.

The Board approved the draft business plan subject to inclusion of Mrs McCarthy's comments and approval of the 2004/5 budget.

2004/56 PROGRESS TOWARDS BUDGET FOR 2004/5

Mrs Mary Leadbeater, Director of Finance, presented a report on progress with setting a revenue budget for 2004/5. Three key issues remain to be resolved; final confirmation of SLA income positions, final assessment of cost pressures, notably the recurrent nature of 2003/4 overspends and confirmation of savings targets. The Trust will continue to work to deliver a balanced budget for 2004/5. Mr Charles Perrin confirmed that the Finance Committee had yet to review the budget.

2004/57 CAPITAL PROGRAMME 2004/5

The Board received the Capital Programme for 2004/5, which had been balanced to the funding available. Mr Charles Perrin confirmed that the Finance Committee had considered and approved the Programme for adoption by the Board. Mr Patrick Mitchell, Director of Operations, asked the Board to note that the Programme represented the bare minimum of schemes that could be undertaken with the available funds.

The Board approved the Capital Programme for 2004/5.

2004/58 PERFORMANCE REPORT

The Board received the performance report for the month that ended on 31 March 2004. Subject to external audit the Trust had achieved financial balance inclusive of funding the Consultant Contract, delivery of a 3.5% rate of return on assets, meeting the capital resource limit and the external finance limit. The Chairman noted the Trust did not meet the public sector payment policy targets in 2003/4. Mr Perrin, Chairman of the Finance Committee, said the Committee would ensure considerable effort is made in 2004/5 to meet the target. The Finance Committee had at the same time noted considerable improvement in 2003/4 in reducing private patient debtors.



Mrs Lucy Davies, Head of Performance, confirmed that the Trust had met all the key targets in assessment of star ratings. Mrs Isabel Boyer expressed concern about the outpatient appointment cancellation rate. Mrs Davies said the data on which the criterion is based took account of entire clinic cancellations which were sometimes made several months in advance when a consultant advised that he or she would not be present and all patient appointments had to be rebooked. The Trust aimed to reduce clinic cancellation and did-not-attend rates in 2004/5.

Miss Marguerite Greatorex said the Patients Forum was concerned about outpatient activity and performance. Mr Kenneth Appel, Member of the Patients Forum, said some hospitals telephoned patients two or three days in advance to confirm their appointments. Dr. Goodier said the Trust hoped to look to the Patients Forum for help with setting service targets for outpatient clinics in 2004/5.

2004/59

#### ORGANISATIONAL DEVELOPMENT REPORT

Mr Tony Vickers, Director of Human Resources, presented the organisational development report and drew attention to six matters;

- (i) The Consultant Contract  
Initial offers were made to all consultant staff at the end of April but some consultants had raised concerns. The decision making group had considered the proposals again and the service impact on working to the proposed job plans. Some revisions were being made and final draft job plans and contracts would be issued by the end of May.
- (ii) Improved Working Lives  
The Trust aimed to achieve practice plus status in early 2005/6 and self-assessment against the seven criteria would be carried out by September 2004. It would be necessary to remedy weaknesses in flexible working which the IWL assessment in January 2003 and the 2004 CHI staff survey had identified.
- (iii) Organisational Development Framework  
Mr Vickers briefly referred to the report given by the Chief Executive earlier in the meeting. An Organisational Development Working Party would be created to develop a strategy and co-ordinate several national and local initiatives.

The Board approved the establishment of the Working Party, to be chaired by Mrs Isabel Boyer.

- (iv) 360 – Degree Appraisal  
This was being piloted within the Human Resources Department, the Paediatrics Directorate and among Executive Directors and General Managers and would be extended to Adult Intensive Care Services and Therapies shortly. The

results would be evaluated and reviewed by the Appraisal and Revalidation Committee in July. A decision would then be taken on extending it to all staff.

- (v) Dealing with Initial Concerns with Doctors  
No further comments from the Medical Committees had been received. Recommendations on the final wording about the designated member had to be made. In order to act quickly the Chairman received authority to act on behalf of the Board. The Chairman's action would be reported to the next Board meeting for approval.
- (vi) Harassment and Bullying  
Training in dealing with harassment and bullying had started on 26 May, initially for medical staff.

The Board welcomed and noted the report and action that was being implemented.

- 2004/60 ANNUAL WORKFORCE REPORT 2003/4  
The Board received the annual workforce report for 2003/4 which summarised key trends in the workforce profile and analysed information on the medical workforce, learning and development activity, workforce diversity and sickness absence. Mr Vickers asked the Board to note that following IT investment during the year a more comprehensive report would be published for 2004/5. The Chairman thanked Mr Vickers for the report, which the Board recognised was a significant improvement already on reports given in previous years.
- 2004/61 REPORT FROM DIRECTOR OF OPERATIONS  
Mr Patrick Mitchell, Director of Operations, presented his report. He asked the Board to note that three companies had presented tenders for construction and management of car parks at Harefield and a final report was in preparation for discussion by the Board at the next meeting. Work could start in July with completion in late September.  
  
Mr Mitchell also drew attention to the appointment of ten more junior medical staff to ensure rotas are compliant with the European Working Time Directive by August.
- 2004/62 REGISTER OF THE SEAL OF THE TRUST  
The Chairman counter-signed two entries relating to documents in the Register of the Seal of the Trust.
- 2004/63 ACCIDENT TO HOSPITAL BUS  
The Chairman reported orally that an accident occurred to the Hospital bus earlier in the afternoon. The driver and two members of staff were injured and had been taken to the Accident Department at Chelsea & Westminster Hospital. It was understood that their injuries were relatively minor. The Board noted the matter with concern. The

Chairman asked that the Board should send its best wishes to the three staff for a fast recovery.

2004/64  
FORUM

COMMENTS FROM THE ROYAL BROMPTON & HAREFIELD PPI

Ms Josephine Ocloo, Co-Chairman of the Patients Forum, said the Forum would want to ensure the Trust reflects diversity throughout the organisation. Although the annual workforce report stated that the proportion of ethnic minorities in the Trust workforce is higher than in the national workforce it was greater in some occupational groups than in others. Ms Ocloo observed that no Board member belonged to an ethnic minority.

Mr Vickers said the Trust intended to find out why fewer people from ethnic minorities apply for Board and Senior Management positions. He had asked recruitment agencies for information about the ethnic status and gender of all applicants. It would then be possible to review and overcome barriers to employment. The Trust had recently introduced ethnic minority mentors for certain staff.

The Chairman commented that he was aware the appointment of a Non-Executive Director from an ethnic minority was an issue and he had discussed it with the SHA Chairman and the NHS Appointments Office. Equal prominence had however to be given to satisfying the NHS Code of Conduct and Accountability in the appointment of a Non-Executive Director.

Mr Kenneth Appel said he had spoken to hundreds of patients in the past year. There was unstinting praise over the quality of food, the presentation of food by the staff and the cleanliness. The Chairman thanked Mr Appel for these welcome comments, which the Board noted with satisfaction.

2004/65

COMMENTS FROM MEMBERS OF THE PUBLIC

On behalf of Rebeat and Heart of Harefield Mr David Potter thanked the Trust and the staff of the cardiac theatres for the very successful open day at Harefield on 18 May. The event was very informative and comforting for patients and the staff were very friendly and helpful.

Mr Potter thanked Dr. Goodier for accepting that the venue of Board meetings should alternate and for agreeing that this would be addressed from July. Mr Potter also welcomed the workforce information provided by Mr Tony Vickers but queried why the turnover rate had risen in October and why £30,000 was earmarked to remedy defects in the Anzac Centre. He also enquired about progress with a sound amplification and recording system in the Concert Hall and the impact on the Capital Programme of restoration of the Mansion at Harefield.

Mr Mitchell said the Trust was seeking funding of a sound system in the Concert Hall from a non-NHS source. Funding to remedy defects in the Anzac Centre had been held back from the previous year to ensure defects were remedied before the final account is settled. Discussion on the restoration of the Mansion was taking place with a company that could invest in the building and operate it without cost to the NHS. Mr Vickers explained that October turnover statistics took reconciliation data earlier in the year into account. Mr Potter suggested for future presentation of data that the emblems used to refer to the two sites should be consistent.

Mr Don Chapman, a member of the public and Heart of Harefield supporter, said that there was often difficulty in hearing some members of the Board. He asked Board Members to speak louder. He also referred to recent improvements to junior doctors rest accommodation in the Concert Hall building and said there had been a recent water leak in the Concert Hall that had caused damage. Mr Mitchell said he was aware of it.

The Chairman referred to the decision to install a sound amplification and recording system in the Concert Hall, which would cost several thousands of pounds. Other priorities had necessitated deferring expenditure.

2004/66

RESOLUTION TO EXCLUDE MEMBERS OF THE PUBLIC

The Chairman proposed the following resolution which was adopted; "that members of the public be excluded from the remainder of the meeting, having regard to the confidential nature of business to be transacted, publicity on which would be prejudicial to the public interest."

(Section 1 (2) Public Bodies (Admission to Meetings) Act 1960)

**Lord Newton of Braintree  
Chairman**