ROYAL BROMPTON & HAREFIELD NHS TRUST

Minutes of a Meeting of the Trust Board held on 28 January 2004 in the Board Room, Royal Brompton Hospital

Present: Lord Newton of Braintree (Chairman)

Mrs I Boyer: Non Executive Director Mrs M Leadbeater: Director of Finance Mrs S McCarthy: Non Executive Director Mr P Mitchell: Director of Operations

Professor A Newman Taylor: Acting Chief Executive

Mr C Perrin: Deputy Chairman

Dr. C Shuldham: Director of Nursing and Quality

By invitation: Mrs C Champion: Director of Strategic Management

Mr R Craig: Director of Governance and Quality Professor T Evans: Associate Medical Director RBH Mr W Fountain: Associate Medical Director HH Professor D Geddes: Chairman Arts Committee

Mr R Gorlin: Chairman Audit Committee

Mr N Hodson: Project Director Ms V Hume: Arts Coordinator

Mr N Hunt: Director of Partnership and Performance Dr. B Keogh: Chairman Medical Committee RBH Dr. C Ilsley: Chairman Medical Committee HH Dr. R Radley-Smith: Associate Medical Director HH

Ms J Thomas: Head of Communications Mr T Vickers: Director of Human Resources

In attendance: Mr J Chapman: Head of Administration

Mrs L Davies: Head of Performance

Apologies for absence were received from Dr. Goodier and Professor Green

REF

2004/1 MINUTES

The minutes of the Trust Board meeting held on 27 November 2003 were considered. Mr John Ross, attending as a member of the public, said he could not agree with the second paragraph of Minute 2003/83 (iii) referring to his comments on the Mansion at Harefield Hospital. The Chairman asked Mr Ross to write to him with his record of what he said. This is as follows;

"In response to a request made by Mr Perrin at an earlier meeting that the community in Harefield should assist in funding the work required to renovate The Mansion, Mr Ross pointed out that the community had great difficulty in raising funds for its own projects. However, as Professor Newman Taylor had at an earlier meeting suggested the Heritage Lottery Fund as a possible source Mr Ross had obtained details of several Lottery options which would be suitable for the Trust to pursue and tabled them. Mr Mitchell replied that the Trust had already approached the National Lottery without success as these funds were not available for projects that should properly be funded by the Government.

Mr Ross then offered his personal assistance in any endeavour to save The Mansion."

Subject to this, the minutes were approved.

The minutes of the meeting of the Trust Board on 17 December 2003 were also received and were approved.

2004/2 REPORT FROM TRUST ARTS COMMITTEE

The Board received a report on the work of the Arts Committee in 2003 and Ms Vicky Hume, Arts Coordinator, gave a presentation which highlighted the development of the Arts Programme and the successes of the year. Ms Hume also drew attention to the Programme for 2004 in which "2004 - The year of music" would feature prominently. It was also planned to commission art for patient areas and promote the integration of art and design. Ms Hume said the Arts Committee was grateful for the encouragement Trust staff had given; she thanked the Board for its continuing support and funding over the past year from charitable funds.

The Chairman thanked Ms Hume for her presentation and Professor Geddes and the Arts Committee for their work over the year. The Board would continue to promote the development of arts in the Trust.

2004/3 REPORT FROM THE ACTING CHIEF EXECUTIVE

Professor Anthony Newman Taylor presented his report and drew attention to four matters;

(i) The Clinical Negligence Scheme for Trusts (CNST) Assessment Visit

The CNST assessment visit had taken place and the assessor had confirmed Level 1 accreditation again. The assessor had commented however on some shortcomings, notably over compliance with statutory training requirements. These would be addressed as quickly as possible. Professor Newman Taylor congratulated the Governance and Quality Directorate for a

satisfactory result. They aim to progress towards Level 2 accreditation in 2005.

(ii) Paddington Health Campus Development The review of the planning assumptions, affordability and the impact of the Development were expected to finish in March. HM Treasury, the Department of Health and the National Audit Office were undertaking a separate review of costs of NHS PFI Schemes.

(iii) The Trust's Financial Position At the end of December 2003 the Trust was £1.8mn overspent and faced a deficit at the end of the financial year. The Executive Directors, with the full support of the Finance Sub-Committee, had implemented urgent action to achieve a balanced outcome. This included minimum use of agency staff for the rest of the financial year.

(iv) Mr Charles Perrin, Deputy Chairman
Mr Charles Perrin had been awarded a CBE in the New Year's
Honours List for services to medicine and education, notably in
London.

The Board congratulated Mr Perrin on an honour which was well deserved.

2004/4 PADDINGTON HEALTH CAMPUS DEVELOPMENT

Mr Nigel Hodson, Project Director, presented a report on the Paddington Health Campus Development. He asked the Board to note that the current leaseholder for the Point Building was unwilling to wait until March to conclude negotiations with the NHS and had decided to market the building. Mr Mark Bielecki joined the Project Team on 19 January but had since left.

A meeting with the Chairman of Westminster City Council Planning Committee which the Chairs and senior staff from the Project attended, had taken place. The Planners were pleased with the progress the Development was making in response to their concerns. The most significant issue to be resolved related to the new St. Mary's Hospital Building. Successful meetings had taken place with the Mayor of London and Greater London Authority Planners. The planning submission was being finalised for printing and submission to Westminster City Council.

2004/5 COMMENTS FROM MEMBERS OF THE PUBLIC

Mrs Jean Brett, Chair Heart of Harefield, commented that the 1998 NHS Executive guidelines on opening Board meetings to the public stated that meetings should be audible to those who attend, including

a loop system for the hard of hearing. However it had been difficult to hear some of what Mr Hodson had said.

Mrs Brett questioned how Mr Hodson's paper could be described as a progress report, when the 10th January 2004 Estates Gazette had reported that Orange had broken off negotiations with the NHS and put the Point Building back on the market. (Copies of EG article and others tabled for the Board's attention.) Mrs Brett reminded Mr Hodson that he had been adamant in stating that acquiring The Point was essential for the Paddington Health Campus to go ahead in both his presentation to the Trust Board and that of November 2003 to the Strategic Health Authority. Mr Hodson's slides show him dismissing Eastbourne Terrace option as unsuitable followed by his other options of do minimum or do nothing.

The new outline planning application to which Mr Hodson had referred in his report, apart from still not having been submitted, is also tied to the acquisition of the Point Building. These facts together with the investigation being carried out into the Paddington Health Campus costs by the Treasury, Department of Health and National Audit Office and the wait for their report meant a standstill until April. Mrs Brett doubted The Point would still be on the market then as it is now being marketed floor by floor. There is also the problem of higher costs at £42.50 per sq ft when the NHS had been unable to afford the earlier £35 per sq ft.

Mrs Brett said more money being spent on the Paddington Project in relation to seeking PFI partners could not be justified, particularly when planning permission was lacking.

Referring to an article on the loss of the Point within the most recent Health Service Journal, Mrs Brett expressed concern about the comments made within it by Mr Nettel the Chief Executive of St. Mary's. Mr Nettel said, "we would be very foolish if we had all our eggs in that one basket", but was unable to articulate other options when asked (in relation to the decant and enabling works). Mrs Brett was also puzzled by Mr Nettel's remark that "there will always be alternatives in London where there is plenty of accommodation". Mrs Brett agreed that there might well be other accommodation in London but as far as the Paddington Health Campus was concerned it might as well be on the moon. For the problem of the Paddington Health Campus is one of a 20% space shortage on that specific site exacerbated by the one building which might have alleviated that shortage now being back on the market. This confirmed the Project's state of crisis.

In noting Mr Hodson's reference to further publicity on the Paddington Health Campus Mrs Brett doubted such publicity would prove positive. Despite the appointment of Christows as communications advisors publicity to date on the Paddington Health Campus was negative.

Trust Responses

- (i) The Chairman said the Executive Directors had agreed in principle to install a loop system in the Board Room at Royal Brompton Hospital and in the Concert Hall at Harefield Hospital in order to improve the audibility of meetings but expenditure had been deferred in the current financial year as a result of the Trust's financial position. Priority would be given to installation in the Concert Hall at Harefield.
- (ii) Mr Hodson said he had taken note of Mrs Brett's comments.
- (iii) Mr Charles Perrin confirmed to the Board that Mr Hodson's report was an accurate statement of the current status of the Project. Mrs Brett's concerns about expenditure were noted but while the reviews continued it would be irresponsible not to commit expenditure on working up the required outline business case and other exploratory work. The Joint Project Board scrutinised the purpose for which the expenditure was being incurred and the NHS Executive Chief Executive had been informed by the Accountable Officer that costs were continuing to be incurred.

2004/6 GOVERNANCE AND QUALITY REPORT: QUARTER ENDING 30 SEPTEMBER 2003

The Board received the clinical governance report from Mr Robert Craig, Director of Governance and Quality, for the quarter that ended on 30 September 2003 which encompassed the following;

- (i) The CNST Assessment Visit
 Professor Tim Evans, Chairman of the Trust's Clinical
 Governance Committee, confirmed, as the Acting Chief
 Executive had reported, Level 1 accreditation was again
 granted for 2004/5. The Governance Directorate would follow
 up recommendations on statutory training and agree a
 timetable and plan to achieve Level 2 accreditation at the next
 assessment and ultimately Level 3, the highest accreditation
 level.
- (ii) Clinical Governance Report for the Quarter Ending 30 September 2003
 Professor Evans summarised the work and achievements of the Directorate in complying with "Winning Ways" a report from the Chief Medical Officer. He would report regularly to the Board on infection control and prevention matters in the Trust. The Board noted highly satisfactory surgical outcomes and that all adverse events would in future be reported.

(iii) Paediatric Wound Infections

Professor Evans explained that concerns were raised in Autumn 2003 about wound infection rates in the Paediatric Directorate. Investigations found no common cause. Clinical practice and the ward environment were reviewed and changes in practice were implemented. A sub-group chaired by the Director of Paediatrics was set up to monitor wound infections, compare infection rates with benchmark figures and identify further corrective action. The outcomes would be reported to the Board.

(iv) Patient Satisfaction Report

Dr. Caroline Shuldham presented the patient satisfaction report and drew attention to the results of questionnaires given to inpatients and day patients and the work undertaken by patient focus groups. The National Survey for 2003 had informed the Trust that there had been a 70% return; a 60% return was mandatory.

The Trust received 23 complaints in the quarter, three more than in the first quarter. There was a proportionate increase in complaints about clinical care and a decrease in complaints over communication issues. The proportion of complaints to which the Trust had responded within 20 working days had improved. The Convenor received two new requests for independent review in the quarter.

The Board noted the report

Comment

Mrs Jean Brett, Chair Heart of Harefield, observed that the Convenor had received 13 requests for independent review but not one had been reviewed by an independent panel. Mrs Brett asked when the last independent panel met to review a complaint.

Mrs Brett also said it appeared the Convenor was no longer a Non-Executive Director of the Trust.

Trust Response

Mr John Chapman said the last independent panel meeting to review a complaint was in November 2002. He agreed to give brief details to Mrs Brett.

The Chairman said the Board appointed Mrs Suzanne McCarthy as Trust Convenor at the meeting on 27 November. Mrs Susannah O'Donnell agreed to continue as a Convenor even though she had ceased to be a Non-Executive Director after 30 November, reporting when appropriate to the Trust Board.

(v) Risk Strategy Committee Meeting
The Board received and noted the minutes of the Risk Strategy
Committee meeting on 17 December 2003.

(vi) Claims Report

The Board noted a report from Mr John Chapman on clinical negligence, personal injury and property claims from July to December 2003.

2004/7 <u>CLINICAL NEGLIGENCE, PERSONAL INJURY AND PROPERTY CLAIMS</u> HANDLING POLICY

Mr John Chapman presented a draft policy on handling clinical negligence, personal injury and property claims. The Policy would replace the current clinical negligence policy and a protocol on managing liability and property claims. The new Policy was necessary to comply with risk management criteria published by the Risk Pooling Scheme for NHS Trusts which would undertake an assessment visit on 3 March and to take account of changes in the structure of clinical governance in 2003.

Mrs Suzanne McCarthy suggested changes to Section 7, Section 8, Section 12 and Appendix 3 which Mr Chapman agreed. He also agreed to include an appropriate reference to providing relevant information to the Finance Directorate.

Subject to the inclusion of these amendments, the Board approved the Policy.

2004/8 PERFORMANCE REPORT

Mrs Mary Leadbeater, Director of Finance, presented a report of financial performance for the period that ended on 31 December 2003. An adverse financial variance from plan of £1.8mn was reported with an adverse movement in December of £198,000. The main reason for the worsened financial position was lower income recovery from private patients. The Executive Directors had agreed further action to reduce expenditure and increase income in order to deliver a balanced budget by the end of the year.

Mr Nick Hunt, Director of Partnership and Performance, updated the Board on progress with resolution of a dispute with Berkshire PCT over SLA income. The PCT had agreed to pay for over performance against HRGs at national tariff rates. This reduced the amount in dispute to £300,000 which had been referred to arbitration.

Mrs Leadbeater also briefly drew attention to the capital expenditure position. The Trust's capital duties were expected to be fulfilled by 31 March.

The Board noted the financial position with extreme concern. The Chairman said the Trust had an enviable position in London and throughout the NHS over managing its resources within budget. The Board gave its full support to the Executive Directors over the action that is being taken to achieve break-even position.

Mr Patrick Mitchell, Director of Operations, presented a report on activity up to 31 December 2003. There was a decrease in NHS and private patient activity in December and, overall, NHS activity had fallen to 4.4% above target and private patient activity to 8.6% ahead of target. No breaches of the 12 month waiting time (9 months revascularisation) targets had occurred and action would be taken to ensure no breaches occurred in the lower 9 month and 6 month targets at the end of the year. Apart from the financial position, the Trust currently met all the other performance targets that featured in the star rating system.

Mrs Lucy Davies, Head of Performance, gave details of the new targets that would feature in the 2004 star ratings. They were compliance with child protection protocols, clinical governance compliance, compliance with national clinical audit criteria and compliance with "Winning Ways".

Mr Tony Vickers presented a report on human resources indicators at 31 December 2003, the content of which was noted. Strict controls over the use of agency staff were now in operation as a result of action already taken by the Executive Directors. Similar controls were also in operation over vacancies.

2004/9 <u>MEETING OF THE FINANCE SUB-COMMITTEE ON 28 JANUARY 2004</u> Mr Charles Perrin, Chairman of the Finance Sub-Committee, gave a

Mr Charles Perrin, Chairman of the Finance Sub-Committee, gave a brief report. The meeting had discussed the Trust's financial position in depth and had unanimously give full support to the decisions the Executive Directors had taken to achieve a break-even position by 31 March. The Committee had noted that North West London Strategic Health Authority had been informed of the Trust's current financial position and had stated that the Trust must break-even by the end of the financial year.

The Trust Board gave its support to the unanimous view of the Finance Sub-Committee that the Trust must take whatever steps are necessary to achieve financial balance in the current year, while not breaching waiting time or other targets assessed for star ratings.

2004/10 CONTRACT FOR PAYROLL SERVICES - COMPETITION WAIVER

The Board received a report from Mrs Mary Leadbeater. The contract for payroll services ended on 31 March 2002 while the Trust was engaged in negotiating renewal with a company that had taken over the supplier of the contract service. In the circumstances the Finance Sub-Committee decided to extend the contract beyond 31 March 2002 on the grounds that there was clear benefit to the Trust from continuity of service. The service would continue at least until March 2005. In accordance with Standing Financial Instructions the Board had to be informed.

The Board noted and accepted the report.

2004/11 TRUST BOARD MEETING – JULY 2004

The Board confirmed that the July meeting would be held on Wednesday 21 July 2004 in the Concert Hall at Harefield Hospital. The meeting would commence at 4.30pm.

2004/12 <u>APPOINTMENT OF CONSULTANT AND VICOUNT ROYSTON FELLOW</u> IN CARDIOLOGY

The Board confirmed the recommendation of a meeting of an Advisory Appointment Committee on 18 December 2003 to appoint Dr. Theresa McDonnagh as Consultant and Vicount Royston Fellow in Cardiology at Royal Brompton Hospital.

2004/13 APPOINTMENT OF CONSULTANT PAEDIATRIC CARDIOLOGIST

The Board confirmed the recommendation of a meeting of an Advisory Appointment Committee on 19 December 2003 to appoint Dr. Gillian Halley as Consultant Paediatric Intensivist.

2004/14 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)

The next Trust Board meeting would be held on Wednesday 25 February 2004 in the Board Room, Royal Brompton Hospital.

Lord Newton of Braintree Chairman