

Board of Directors

Minutes

**of a meeting held on Friday, 3rd November 2006 at 9.30 am
in the Boardroom, Liverpool Women's Hospital**

PRESENT:

Mr K Morris, Trust Chairman
Mrs L Shepherd, Chief Executive
Mr D H Richmond, Medical Director
Ms S Lorimer, Director of Finance & Information
Ms G Core, Director of Nursing, Midwifery & Patient Quality
Ms C Salden, Director of Service Development
Mrs K Doherty, Director of Human Resources
Mrs A McCracken, Non-Executive Director and Vice Chair
Mr D Carbery, Non-Executive Director
Mr R Morris, Non-Executive Director
Ms Y Rankin, Non-Executive Director
Mr H Yeung, Non-Executive Director

IN ATTENDANCE:

Ms E Saunders, Trust Secretary
Miss C Davies, Minutes
Professor Zarko Alfirevic
Mrs Lydia Moore

1. **Apologies**

None.

2. **Minutes of Previous Meeting held on Friday, 1st September 2006**

The minutes of the previous meeting held on Friday, 1st September were agreed as a correct record of proceedings.

3. **Matters Arising**

3.1 **Breast Services Update**

Mrs Shepherd updated the Board on Breast Services. The main points were:

- Decision of OSC following meeting held on 10th October to ask PCT for plans for consultation on decision following tender exercise. Minute stated OSC resolved matter be deferred to a future meeting of panel and PCT to explain process that took place. Not sure which future OSC meeting it will go to at present.
- Need to clarify how we will be part of consultation.
- The Trust Chairman had approached the SHA regarding the process
- Mike Farrar had indicated the SHA would be looking at this in more detail.
- Mrs Doherty and Mrs Shepherd had met with staff last week – have agreed will continue with identification of staff who provide breast services.
- No change for patients at present.
- Not sure what form consultation will take.

- Daily Post had picked up the story and the Trust had given a comment.
- The Patients' Forum had backed the Trust's position.

The Board noted the report.

4. Operational Plans and Reports

4.1 Obstetric Directorate to present

Mrs Lydia Moore, Obstetrics Directorate Manager, presented an overview of the service provided by the Obstetrics Directorate and the challenges faced in the current year and going forward (copy attached).

Professor Alfirevic highlighted the quality aspects of the care provided by the Directorate and the challenges in reconciling choice and safety.

He referred to the discussions with Liverpool PCT regarding breast services and felt that this needed to be broadened to include Fetal Services. The Chairman assured the Board he would be asking the PCT if they had a strategy for women's services.

It was noted that the Healthcare Commission had indicated they would want to look at Maternity Services in the next round of reviews. The work on PbR with the Royal College, which Mr Richmond was undertaking, had been extremely useful. The DH had asked to talk to commissioners and was in the process of preparing guidance for commissioners. It was imperative that the Trust influenced this issue locally and nationally.

The Chairman was pleased that the Board had had the opportunity to have such a strategic debate and would now need to consider how the Board and the Directorate could work together to articulate the actions required.

The Chairman thanked Professor Alfirevic and Mrs Moore for attending the meeting.

4.2 Operational Plan Update

Mrs Shepherd reported on the progress to date on delivery of the Operational Plan's objectives, which had been discussed at the last Management Executive Board (MEB) meeting.

The Management Board understood the need to change the Trust's way of working to adapt to cultural changes and changes in practice.

Mrs Shepherd stressed the importance of the Trust being responsive to the market, being a successful FT and with a better understanding of external influences. The PP cap had given the Trust an opportunity to look at other alliances. It was noted that Classic Hospitals (previously Lourdes) had already met with Trust consultants. There was a lot of work to do on PbR but Ms Lorimer was already extremely proactive in that area. The issue of understanding capacity was crucial, as was improved planning of gynaecology activity going forward. This was noted as a risk to the Trust as it was necessary to plan for next year and take some capacity out of gynaecology with a view to streamlining. There was a lot of work to be done on the need to combine quality with efficiency.

Mrs Shepherd highlighted the following issues from the report:

Choice agenda – it would be necessary to understand and articulate what the Trust was offering patients and to develop this going forward.

Neonatal network – the Trust had previously been network importers but was now not as busy due to other networks operating more effectively and therefore not having to send babies here. NICU was still operating at 25 weeks and below but should be 27 weeks

with 48 neonatal cots. The Neonatal network in Cheshire and Merseyside was not as robust as it could be and this was an issue which needed to be resolved.

Quality and safety – the Trust is looking at a number of market intelligence packages, including Dr Foster, to support work in this area.

Facilities – the Clinical Genetics staff were extremely pleased with their new modular building accommodation. There would be a formal opening of the accommodation at Alder Hey in due course.

The Estates strategy would be concluded in the second half of the year to fit in with the Strategic Planning process.

Mrs McCracken referred to issues regarding contracted services and cleaning standards. Ms Core stated Sodexo had been given the opportunity to demonstrate that the Trust was getting the service it was paying for but they had failed to do so. Sodexo had been informed that the Trust would be reviewing the contract when there was a break in the contract next year.

Training and support for staff – Mrs Shepherd stressed the need to focus on the Trust's leadership programme (LEO). Ms Core was leading a campaign to address the bullying culture which exists in some parts of the hospital as the last staff survey highlighted that there was a problem within the Trust and the Trust was committed to addressing this.

The Board NOTED the progress to date on delivery of the Plan's objectives.

4.3 Nursing & Midwifery Action Plan

Ms Core reported on the Nursing & Midwifery Action Plan and the priorities for action in 2006/07.

In response to a comment regarding the Focus Group for ex-complainants, Ms Core stated that this had been extended further to invite some patients who had congratulated the Trust on staff attitude and behaviour. A meeting was scheduled for next week and Ms Core undertook to report back on progress. **Action: GC**

Ms Core also reported behavioural standards would be rolled out shortly and commented that that staff were willing to support the proposed changes. The Chairman referred to the professional development link with managerial development.

The Board NOTED the priorities and the action planned and to support the approach taken by the Nursing and Midwifery leads.

5. Performance

5.1 Corporate Report

Finance

Ms Lorimer reported that the financial position had stabilised at the half year point. There had only been a slight increase in the overspend and she was hopeful that this had now reached a plateau.

Activity had recovered due to a huge amount of work put in by the Gynaecology Directorate and a detailed action plan to pull back on activity. Ms Lorimer was optimistic that the £750,000 planned surplus was achievable.

Capital Programme – the capital expenditure had not been progressed as much as planned partly due to issues on other sites, ie ACWH and Alder Hey. There were also

several outstanding issues delaying completion of the Estates Strategy document so there would be no expenditure in the current year.

Ms Lorimer requested Board approval to advance next year's medical equipment expenditure in order to ensure that the Trust's internally generated capital is utilised in the current year and central funding allocations received through public dividend capital.

The Board APPROVED the proposed advancement of next year's medical equipment expenditure.

In response to a query regarding pathology services, Ms Lorimer stated that all directorates had been asked for more controls on requests for pathology testing and this would be monitored. The Trust would be going out to tender for pathology services next year and this would be brought back to the Board in due course.

Mr Yeung commented that the outlook for the year looked reasonable for the Trust based on a series of sensitivities which Mr Renouf had identified.

In response to a query regarding the Trust's unresolved issues with Liverpool PCT in relation to the contract, Ms Lorimer stated that this matter was still subject to negotiation.

In response to a query regarding Baker Tilly's review, Ms Lorimer stated they had met with the Directorate Managers regarding their reporting needs and Baker Tilly had held a workshop with Finance, Information and Coding regarding monthly close down. A further workshop would be held with Baker Tilly looking at formats for the corporate report. The Chairman referred to the debate at the Finance & Contracts Committee meeting regarding competence around financial forecasting and activity.

Activity

Ms Salden highlighted two additional performance indicators.

Gynaecology – have a revised internal plan to pull back but have overperformed on contracted plan this month so looking better.

Neonates – have seen a downward trend for the last 6 weeks – will be doing a spotlight on bed use and any underlying trends.

HR

Mrs Doherty reported there were no HR indicators as the HR Department was still struggling with the reporting functionality of the new ESR system. She hoped to be able to present something next month. The Trust had been liaising with other organisations to ascertain how they had obtained the information required.

Concern was expressed regarding the possible lack of management information and whether the first line manager was getting the information they required. Ms Core assured the Board that that information was in place and available on the wards.

Agency spend – in response to a query, Mrs Doherty confirmed that this was all junior doctor related. Mr Richmond commented that cross cover by junior doctors was not as corporate as it used to be and queried at what point we consider increasing staffing to cover that shortfall as he was concerned from a risk point of view. Mrs Doherty stated there had been a lot of work done by John Kirwan and Devender Roberts and now that return to work interviews were being carried out sickness absence had gone down. Mrs Doherty explained that the Deanery appointed medical staff had not joined the Trust and had had to be replaced with agency staff so the pay budget may be lower but this resulted in a higher agency spend. Mrs Shepherd felt that this would be worth looking at in that context and it was agreed to look at this further.

Action KD

5.2 Healthcare Commission – Annual Health Check 2006/07

Ms Saunders reported that subsequent to writing the paper more information had been published in relation to the outcome of the consultation which the Commission had run in the summer. There was still more information to come regarding target thresholds (section 2.3 in corporate report refers). Ms Salden had made the point that there was still no consistency between Monitor and HCC weightings.

Service reviews included maternity services and race equality and Ms Salden, Ms Saunders and Ms Core would be keeping close to this.

Ms Salden had looked at whether new targets would pose any great challenges for the Trust, there were incremental improvements but it was unclear where the benchmark would be at this time.

In response to a reference to inequalities in health, Ms Salden stated that the only sexual health measure the Trust feeds into is reducing teenage pregnancy. However, it has recently become clearer that a more diverse set of measures would be included for example, issues like Chlamydia screening which would be the Trust's responsibility.

The Board NOTED the position with regard to the Healthcare Commission's assessment and agreed to receive regular reports during the remainder of the year as to progress.

5.3 Making the Trust Financially Fit for Purpose 2007/8

Ms Lorimer reported on the draft CIP for 2007/08, which had been drawn up following 'Making the Trust Financially Fit for Purpose'. Trust wide initiatives to the value of £1.2m had been identified through the Quality & Efficiency Group. Ms Lorimer was optimistic the Trust would resolve the issue regarding Fetal medicine with Liverpool PCT as all other PCTs had signed up to pay, if not this year, then next year. All directorates were working on the CIP with specific savings attached to the various schemes and would be working up action plans prior to April.

It was noted that the draft tariff was being issued this week. It was unclear what the cost of A4C and the Consultant Contract would be next year. Mrs Shepherd referred to reductions in staff posts, including consultant retirements. In response to a query regarding CNST, Ms Lorimer commented that this was not known for 2007. Mrs Doherty referred to an increase in equal pay claims for A4C.

The Chairman queried whether there had been discussions with stakeholders, eg the Membership Council. Mrs Shepherd stated that staff representatives had been included in development of the plan but the Membership Council would need to approve the overall picture. Ms Lorimer referred to identification of cost improvement and would need to address this with individual directorates.

The Trust Board APPROVED in principle the work in progress.

6. Strategy

6.1 PACS Business Case

The Chairman welcomed Mrs Sue Brown, Directorate Manager for Critical Care, Dr Zafar Chaudry, Director of IM&T, and Mr Jeff Johnston, Assistant Director of Finance, to the meeting.

Dr Chaudry and Mrs Brown gave an extremely comprehensive presentation of the PACS Business Case.

In response to a query regarding ultrasound images and the need to be able to store videos, Ms Salden stated that it was unclear at present what the full cost of storing video images would be so that would need to be brought back to the Board as a separate Business Case in the future.

Mrs McCracken asked the Board to note that her husband was an employee of CSC (Project Management) but had not been involved with this project in any way.

Following a debate regarding the pros and cons of proceeding with the implementation the Trust Board AGREED to sign up to the preferred option (2) and to:

Support the implementation of PACS at LWFT across a Trust wide network.

Approve the provision of capital totalling £0.37m in 2006/7 and revenue of £0.26m over the term of the contract.

Recognise the scale of the project and commit to the implication in terms of management change and re-prioritisation of workload that will be required to support successful implementation by June 2007.

The Chairman thanked Mrs Brown, Dr Chaudry and Mr Johnston for attending the meeting. Mrs Shepherd highlighted the excellent work which had been carried out by the Project Team.

6.2 Public Health Strategy

Ms Core reported on the Public Health and Health Promotion Strategy.

The Trust Board APPROVED the Public Health and Health Promotion Strategy.

6.3 Marketing Proposal

Ms Salden reported on progress to date made by the designated sub-group of the Board on developing a Marketing Strategy for the Trust.

This would give the Trust an opportunity to shape a marketing function in the organisation and enable a focus on what the 'offer' should be in each service area, supported by a framework to take it forward. Mrs McCracken commented that it was good that marketing was being recognised as something the Trust needed to do.

Mrs Shepherd expressed her thanks to the group who had drawn up the proposal and referred to the need for Directorate Managers to have support in developing and taking this forward. It was proposed that the time out on 24th November would be for the Trust Board and MEB and could be run instead of the next MEB meeting. Ms Rankin highlighted that there were a lot of issues which needed to be addressed and stressed the need to be mindful of having discussions without actively progressing the proposal. Ms Salden referred to the importance of linking the proposal to strategic issues. It was noted that the paper did not include any costings or information regarding what resource was required within the organisation to support this. It was agreed to diary the 24th November and a programme would be issued as soon as possible. In response to a comment it was further agreed to change the wording in the paper to reflect all areas of the Trust and not just LWH.

Action: CS

The Trust Board:

**AGREED to support the approach proposed by the marketing sub-group
APPROVED the brief for the pitch**

APPROVED in principle the purchase of the Dr Foster or CHKS product.

7. **Clinical Governance**

Nil to report

8. **Corporate Governance**

To receive the minutes of the Committees of the Board of Directors as follows:

Corporate Assurance and Standards Committee

8.1 To receive the minutes of the CASC meeting held on Friday, 30th June

Received.

Clinical Governance Committee

8.2 To receive the minutes of Clinical Governance Committee meeting held on 11th August

Received.

8.3 To receive the minutes of Clinical Governance Committee meeting held on 8th September

Received.

IM & T Management Group

8.4 To receive the minutes of IM&T Management Group meeting held on 25th August

Received.

Finance & Contracts Committee

8.5 To receive the minutes of the Finance & Contracts Meeting held on 2nd August

Received.

8.6 To receive the minutes of the Finance & Contracts Meeting held on 29th August

Received.

8.7 To receive the minutes of the Finance & Contracts Meeting held on 2nd October

Received.

Audit Committee

Nil to receive

Charitable Funds

8.8 To receive the minutes of the Charitable Funds Committee Meeting held on Monday, 21st August 2006

Received.

In response to a query regarding the reduction in the Trust's portfolio (Page 2, item 4), Mr Roy Morris stated that this compared well with the benchmark and would now be in

excess of £1.6m as the market was better than in June. The performance of the portfolio had been good.

HR Committee

8.9 To receive the minutes of the HR Committee meeting held on 16th August

Received.

9. For Information

9.1 Quarter 2 Return to Monitor

The Finance & Contracts Committee had approved the Quarter 2 Return to Monitor on behalf of Board. Copies of the submission were made available.

10. Any Other Business

10.1 Additional days leave

Mrs Shepherd reported that in previous years staff had been awarded an additional days leave for achieving 3 stars. As the star ratings system was no longer in existence and staff had already been given an additional 5 days leave through A4C, Mrs Shepherd recommended that the additional days leave for 3 stars be discontinued this year. It was noted that the matter would be raised at MSC. Mrs Doherty commented that there was an understanding among staff that they would not be getting the 3-star day this year.

The Trust Board AGREED with the recommendation to discontinue the awarding of an additional 3-star annual leave day.

11. Date and Time of Next Meeting

Friday, 12th January 2007 at 9.30 am in the Boardroom, Liverpool Women's Hospital

km/l/s/es/cd

Board of Directors

Minutes

**of Part II of meeting to be held on Friday, 1st November 2006
in the Boardroom, Liverpool Women's Hospital**

1. **Apologies**
2. **Minutes of Part II of Previous Meeting held on Friday, 1st September 2006**
Approved.
3. **Matters Arising**
Nil
4. **Operational Plans & Reports**
Nil
5. **Performance**
Nil
6. **Strategy**
Nil
7. **Governance**
Nil
8. **Information**
Nil
9. **Any Other Business**