

## Board of Directors

### Minutes of Part 1 of a meeting held on Friday 7 January 2011 at 0930 in the Boardroom, Liverpool Women's Hospital

#### PRESENT

Mr Ken Morris, Chair  
Mr David Carbery, Non-Executive Director (save for items 8, 9.1, 9.3 – 14)  
Mrs Vanessa Harris, Director of Finance  
Mr Jonathan Herod, Medical Director  
Dr Pauleen Lane, Non-Executive Director  
Mrs Ann McCracken, Non-Executive Director  
Mrs Gail Naylor, Director of Nursing, Midwifery & Patient Experience  
Ms Caroline Salden, Director of Service Development  
Mrs Kathryn Thomson, Chief Executive  
Mrs Michelle Turner, Director of Human Resources & Organisational Development (save for items 8, 9.1, 9.3 – 14)  
Mr Hoi Yeung, Non-Executive Director

#### IN ATTENDANCE

Ms Pat Abbott, Interim Matron, Gynaecology & Surgical Services (for item 6.2)  
Mr Isam Badhawi, Principal Pharmacist (for item 6.2)  
Dr Katherine Birch, Head of Clinical Audit (for item 6.1)  
Dr Leanne Bricker, Director of Clinical Audit (for item 6.1)  
Ms Triona Buckley, Deputy Director of Human Resources & Organisational Development  
Mrs Liz Edwards, Assistant Director of Quality (for item 7.1)  
Ms Lisa Kirkham, Risk Facilitator (for item 6.2)  
Sheila Lloyd, Head of Clinical Effectiveness (for item 6.2)  
Ms Julie McMorran, Trust Secretary  
Ms Vivienne Sutton, Staff Nurse, Theatres (for item 6.2)  
Dr Mark Turner, Director of Research & Development (for item 10.2)  
Mrs Gillian Vernon, Research & Development Manager (for item 10.2)  
Ms Elaine Willis, Senior Technician, Medicines Management (for item 6.2)

#### 1. Apologies

Apologies were received from Non-Executive Directors Ms Liz Cross and Mr Roy Morris.

#### 2. Minutes of previous meeting held on 3 December 2010

The minutes were agreed and signed as a correct record.

#### 3. Matters arising

##### Board Action Sheet

Directors reviewed the action sheet as at December 2010. Progress updates were given in respect of items listed and fresh timescales agreed for items it had not been possible to bring back to the January 2011 Board as planned.

#### 4. Chair and Chief Executive Briefing

The Chair reported verbally on his recent meeting with four Members of Parliament from North Liverpool and Sefton. At the meeting he had briefed MPs in respect of developments at the Trust and plans for its Aintree Hospital based services, which had met with their support.

Short-listing had taken place in respect of the forthcoming Non-Executive Director vacancy and interviews would be held in early February 2011.

A consultation document had been issued outlining options for the future of the NHS Confederation and the Foundation Trust Network (FTN), in particular whether they should be separated or not. The document would be circulated and the Trust's response prepared by the Chair and Chief Executive based on directors' views.

The Board noted the written report from the Chief Executive who also reported verbally in respect of subsequent developments. The Operating Framework for 2011/12 had been issued by the Department of Health in December 2010 as had a paper on the legislative framework for implementation of the 2010 White Paper.

The Trust's consultation in respect of 'Rising to the Challenge' had been issued for consultation mid-December 2010. A challenge had subsequently been put forward by the Royal College of Nursing in respect of the definition of redundancy, to which the Trust had responded appropriately. Job matching and selection was scheduled for March 2011 and staff appeared realistic about the need for change.

A letter of support had been sent to the Secretary of State for Health in respect of the proposal to remove the private patient cap.

Some 39 flu-related deaths had occurred in the Liverpool area over recent weeks. There were significant bed pressures both locally and nationally because of the current flu outbreak, in particular on intensive care beds. The Trust had been able to continue with its elective surgery and operate a normal service and had this week assessed its cancer patients to further reduce any risk of needing to transfer patients elsewhere for critical care support. If the bed difficulties continued locally the Trust would seek to work with other Trusts and offer help to relieve the pressures they were experiencing.

The flu outbreak posed a risk to the Trust's workforce as well as its patients and the staff uptake of flu vaccine was improving.

Finally, Mrs Kathy Thomson reported on the possibility of developing a joint research office between the Trust and the University of Liverpool.

#### 5. To deliver safe services

Two patient stories were received, presented by the Director of Nursing, Midwifery and Patient Experience.

**Patient story 1** concerned a woman who had had a poor experience of the Trust when she attended the Trust's emergency room during a weekend, with symptoms of miscarriage. Scanning facilities were not available and whilst her clinical management had been appropriate there had been a lack of reassurance and explanation provided by staff. Women who attended with miscarriage symptoms over the weekend were now routinely contacted the following Monday by staff from the Early Pregnancy Assessment Unit (EPAU). Extending access to the EPAU was being reviewed and included as part of the £70m project underway.

**Patient story 2** also concerned a woman who had reported a poor experience of care from the Trust in respect of recurrent miscarriage. She had since delivered a healthy baby at the Trust and been entirely satisfied with the care she received.

## **6. To deliver the most effective outcomes**

### **6.1 Clinical audit strategy**

The Board received a presentation from the Director and Head of Clinical Audit. They outlined the aim to ensure audit was strategically aligned with the Trust's organisational objectives and detailed the audit programme key drivers. Directors agreed that the programme must align with the Trust's quality account and known organisational risks. It must also inform service improvement and development and clearly identify accountability for results.

The audit programme for 2011/2012 would be presented to the Governance and Clinical Assurance Committee (GACA) in March 2011. Both the Board and GACA would thereafter review progress with the programme based on the questions posed Healthcare Quality Improvement Partnership guidance.

### **6.2 Leading Improvement for Patient Safety (LIPS) VII**

Directors received a presentation from members of the team engaged in the LIPS VII programme, which was reviewing how to improve patient safety at the Trust by reducing medication errors and preventing harm from deterioration.

## **7. To deliver the best possible experience for patients and staff**

### **7.1 Real time patient surveys update**

The Assistant Director of Quality presented an update in respect of the Trust's real time patient survey work. Directors agreed that a metric was required to measure shifts in performance at clinical business unit or departmental level as a result of the surveys. Findings from the real time surveys would be included in the quarterly patient experience report.

## **8. To develop a well led, capable and motivated workforce**

### **8.1 Workforce and Organisational Development Strategy**

Proposals in respect of developing an integrated workforce and organisational development strategy were outlined, based on a set of clear values and behaviours and performance metrics. The proposals would be shared with the Council of Governors at its January 2011 meeting and be presented to the Board in March 2011 for approval.

The aims of a proposed people strategy were also briefly outlined. The strategy would cover a 1 – 5 year period and undergo annual refresh for Board approval.

## **9. To be efficient and make best use of available resources**

### **9.1 Performance and assurance report**

The Directors of Service Development and Finance presented the written report covering the period to November 2010. Ms Caroline Salden explained that the

position in respect of red-rated cancer targets had improved during December 2010.

MRSA screening performance was reported as 99.32% hence was red rated. The Trust was working to ensure it was known when patients had been screened elsewhere so that they could be positively included in the Trust's performance data.

Smoking rates were also red rated and the Trust would keep reviewing these with the Primary Care Trust vis-à-vis the model of smoking cessation available to its patients. Benchmarking data with other city centre hospitals would also be undertaken.

Mrs Vanessa Harris reported that the Trust's financial risk rating (FRR) was reported as 4, ahead of target as it was expected to deliver an FRR of 3. The forecast of £1m surplus at financial year-end remained.

### **Resolved**

That a report in respect of the Trust's performance against cancer targets be considered by GACA.

## **10. Corporate business report**

### **10.1 NHS Operating Framework 2011/2012**

The Directors of Service Development and Finance presented to the Board in respect of the NHS Operating Framework for 2011/2012, published in December 2010. They outlined the key issues and the potential impact of changes proposed upon the Trust.

### **10.2 Intellectual property policy**

The Research and Development Director and Manager presented the Trust's intellectual property which was based on guidance from the Department of Health.

Directors acknowledged it was difficult to commercially exploit intellectual property, particularly in the absence of joint approaches with external partners and risk sharing arrangements. They confirmed the Trust's commercial approach and appetite for doing so and agreed that it be considered by the Finance, Performance and Business Development Committee (FPBD).

### **Resolved**

- (a) To confirm the intellectual property policy
- (b) To request the FPBD to consider how the Trust might increase its commercial exploitation of intellectual property.

### **10.3 Approaches to partnership working**

This item was considered during Part 2 of the meeting.

### **10.4 Influencing strategy**

This item was considered during Part 2 of the meeting.

**11. Board assurance : minutes from the committees of the Board of Directors**

**11.1 Finance Performance and Business Development Committee meeting held on 23 November 2010**

The Board received the minutes.

**11.2 Audit Committee**

There were no minutes for receipt.

**11.3 Audit Committee Terms of Reference**

The Board approved the reviewed the Audit Committee Terms of Reference.

**11.4 Charitable Funds Committee**

There were no items to consider.

**11.5 Governance and Clinical Assurance Committee held 11 November 2010**

The Board received the minutes.

**12. For information**

**12.1 Public Health White Paper executive summary**

Received.

**12.2 Confidentiality NHS Code of Practice : public interest disclosure**

Received.

**12.3 Improving services for women and child victims of violence: Department of Health action plan**

Received.

**Resolved**

To consider at a future meeting of the Board the impact of domestic violence on those in the Trust's care and how the Trust's responds to the needs of affected patients.

**12.4 FTN Briefing – Department of Health Command Paper; Government response to White Paper consultation exercise (Liberating the NHS), legislative framework and next steps**

Received.

**13. Any other business**

There was no any other business.

**14. Date and time of next meeting**

Friday 4 February 2011 at 0930 in the Boardroom.