

Board of Directors

**Minutes of the Meeting held in Public at 9.30am on Monday, 2 June 2014
In the Seminar Room, Postgraduate Medical Centre
Leighton Hospital, Crewe**

PRESENT

Mr D Dunn MBE	Deputy/Interim Chairman (<i>in the chair</i>)
Mrs T Bullock	Chief Executive
Mr M Davis	Non-Executive Director
Dr PA Dodds	Deputy Chief Executive and Medical Director
Mrs D Frodsham	Chief Operating Officer
Mr D Hopewell	Non-Executive Director
Mr M Davis	Non-Executive Director
Mr M Oldham	Director of Finance & Strategic Planning
Mr D Pitt	Director of Service Transformation & Workforce
Mrs J Smith	Director of Nursing & Quality

IN ATTENDANCE

Mr J Lyons	Lead Governor
Ms M Steele	Acting Trust Secretary

Apologies

Dame P Bacon	Non-Executive Director
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The Chairman opened the meeting and welcomed those members of the public in attendance. The Chairman noted contribution from those in attendance was not permitted during the meeting, however, advised there would be an opportunity to discuss any issues with the Directors after the meeting, if a person so wished.

PATIENT STORY

Mrs Smith introduced the patient story, a video interview with a lady who had had a stroke. Mrs Smith advised the patient also has Diabetes and has previously been an in-patient of the Trust.

The patient noted the care she had received when she was admitted to Ward 6 having suffered a stroke. The patient advised the staff had been excellent, however, advised of a small number of issues which she had raised. The patient noted she had undergone a CT scan when she felt a pins and needle sensation in her face and she had become anxious as this had led her to think she had had a second stroke. However, as she had already had a CT scan on admission, there was a discussion around whether or not this had been an unnecessary CT scan. The patient also advised that she had overheard the medical teams discuss the clinical needs of another

patient and on one occasion there had been a mix-up in her patient notes.

The patient also noted she had felt very 'rushed' on discharge as there was an apparent need for the bed for another patient.

Mrs Smith noted the patient had also referred to her anxieties at having to undergo what would be considered by medical staff, routine tests. Mrs Smith noted it is important to consider the patients anxieties and worries regarding tests with communication being the key to allay these fears. Mrs Smith also noted the importance of communication particularly in relation to discussing patient notes in general ward areas and the mix up in the patient notes. Mrs Smith advised she had spoken to members of the medical team who had welcomed the feedback and who are currently reviewing working practices.

Mrs Smith advised the surprise of patients at being discharged seems to be becoming a recurring theme and in this regard noted further work was required in communicating with patients as to their proposed discharge date.

Mrs Smith advised she has feedback to the patient the changes being implemented by the medical team and the patient is also due to speak at the Trust's Long Term Conditions event in June.

Mrs McNeil noted her concerns in relation to the mix-up of case notes and also the lack of awareness by the medical team when discussing in open ward areas patient conditions. Mrs Smith noted there had appeared to be a lack of understanding of the patient anxiety.

In response to Mr Davis' enquiry as to how often mix up in case notes occur, and what actions are in place to ensure it does not happen, Mrs Smith advised that should a patient be undergoing a procedure there is a very rigid checklist procedure in place. In terms of a mix-up in patient notes when a Doctor is talking to a Patient, Mrs Smith advised she was unaware of how many cases happen informally. Mrs Smith advised she would follow up to ensure this particular incident had been reported.

The Chairman noted that overall the lady had been happy with her care and whilst there had been a concern in relation to a notes mix-up the Board of Directors should be assured that actions have been taken to ensure this does not happen again.

In response to Mr Barnes' enquiry as to whether the implementation of an electronic patient records system would alleviate the issue, Mrs Smith advised it would not necessarily alleviate same. Mrs Frodsham noted the Radiology Information System (RIS) will support checking in

the system. The importance of staff using the patient's NHS number as a patient identifier was noted as key.

Resolved

- **To note the patient story and thank the lady for sharing her experiences.**

DIRECTORS' INTERESTS

None noted.

MINUTES OF THE LAST MEETING

After discussion, it was

Resolved

To sign the minutes as an accurate record of the Board meeting held in Public on Tuesday, 6 May 2014 subject to noting

- The venue of the meeting was the Salt Arch Room at Victoria Infirmary, Northwich rather than the Board Room at Leighton Hospital, as noted.

To sign the minutes as an accurate record of the Extraordinary Board meeting held on Tuesday, 27 May 2014 subject to noting

- Under Directors Interests, Mr Barnes' Interests were noted incorrectly in the Audit Committee Annual Report and the Audit Committee Annual Report would be amended, rather than the Performance and Finance Committee Annual Report , as noted.

Amendments reflected in the public minutes of the meeting.

ACTIONS ARISING FROM PREVIOUS MINUTES NOT INCLUDED ELSEWHERE ON THE AGENDA

None noted.

ANNUAL WORK PROGRAMME

The Chairman presented the Annual Work Programme for noting. No amendments were recorded.

Resolved

- **To note the Annual Work Programme**

CHAIRMAN'S ANNOUNCEMENTS

14.05.6.4 Non-Executive Director Recruitment

The Chairman noted the Governor Nominations & Remuneration Committee had met and approved the appointment of GatenbySanderson to progress the recruitment to the vacant Non-Executive Director post. The Chairman advised the Nominations & Remuneration Committee were satisfied with the process undertaken by the Board in considering the experience required for a new Non-Executive.

14.06.7.1 Visit of Mr Ed Miliband and Mr Andy Burnham

The Chairman noted Mr Ed Miliband, Leader of the Labour Party, and Mr Andy Burnham, Shadow Secretary of State for Health had visited the Trust on Monday, 12 May and met with staff.

Mrs McNeil noted the extensive media coverage of the visit by BBC.

14.06.7.2 Auditors

The Chairman noted he had met with the Trust's recently appointed internal Auditors, KPMG, and it was noted there was a comprehensive audit plan in place.

14.06.7.3 Meetings with Stakeholders

The Chairman noted he had met the previous week with the leader of Cheshire East Council. The Chairman advised he had also been contacted by the Chair of University Hospital North Staffordshire NHS Trust whom he would arrange to meet with.

Resolved

- **To note the Chairman's Report**

GOVERNORS ITEMS

14.06.8.1 Governor Representation on Committees

The Chairman noted the work being undertaken in relation to Governor Representation on both Governor and Board Committees.

Resolved

- **To note the report**

CHIEF EXECUTIVE'S REPORT

14.06.9.1 Monitor Teleconference – Quarter 4

Mrs Bullock noted the teleconference which had taken place with Monitor on 7 May 2014 had been scheduled to discuss the Trust's

Annual Plan submission. This conversation covered all aspects of the usual quarterly conference call and in this regard, Monitor has subsequently advised there will be no scheduled Quarter 4 teleconference.

Mrs Bullock advised the teleconference had included discussion on a number of items covering governance, quality and financial performance.

14.05.8.2 Area Team – Quality Surveillance Group Meeting

Mrs Bullock advised she, Dr Dodds and Mrs Smith had attended a Quality Surveillance Group Meeting on Thursday, 8 May 2014. Mrs Bullock advised of those stakeholder organisations which had attended.

Mrs Bullock advised that prior to the meeting the Trust had been given a list of items on which to present. Mrs Bullock noted, however, discussion had focused mainly on the Trust's mortality rate with very little time allocated to discuss other areas.

Mrs Bullock advised a follow-up letter had been received from the Area Team which detailed high-level local health economy actions and discussion was to take place as to how to move the actions forward. Mrs Bullock advised she was to meet with Moira Dumma, Director Cheshire Warrington and Wirral Area Team to receive formal feedback.

14.06.9.2 Board Effectiveness Survey – April 2014

Mrs Bullock referred to the Board Effectiveness Survey results which had been circulated previously noting the Survey was undertaken half yearly by Board members and on an annual basis by Governors and Staff.

In relation to the Board responses, Mrs Bullock noted there had been a slight improvement across the indicators whilst there was also very little change on the Governor responses from the previous year with either very slight improvements or slight deterioration but nothing significant to note.

In relation to the Staff responses, Mrs Bullock advised she had been disappointed by the staff response rate and suggested staff were 'surveyed out'. Mrs Bullock noted that the differences on the staff responses were small in comparison to the previous year. Mrs Bullock noted the response to the question as to whether staff recognised members of the Board and suggested the Board of Directors consider additional ways to raise their profile. Mrs Bullock also noted the improved score in relation to there being a widespread belief about a culture of safety within the organisation. Mrs Bullock advised it was important the Board understood the reasoning for the responses and took action as appropriate.

In response to Mr Barnes' enquiry as to the number of staff invited to complete the survey, Mrs Bullock advised it was open to all staff to complete. Mr Barnes recommended a random sample survey group be invited to complete the survey going forward suggesting the value of the survey responses was limited with the response rate being so low. The Chairman noted the responses were a snapshot in time and it is important the Board learns from the responses and considers what actions to take.

Dr Dodds advised that feedback from staff generally in relation to surveys is their concern regarding the anonymity of the responses wherein Dr Dodds noted it was important to reinforce that responses are anonymous.

Mr Hopewell noted the survey had been undertaken annually for a number of years and suggested it was time to refresh the format. This suggestion was supported wherein Mrs Bullock advised she would consider surveys undertaken by other Trusts and also approach KPMG. It was agreed the Board Effectiveness Survey would continue in its current form until an alternative format was agreed

14.06.9.3 Provider Board Meeting – 16 May 2014

Mrs Bullock noted the second meeting of the Provider Board had taken place on Friday, 16 May 2014 advising the Terms of Reference had been approved whilst options for new models of integrated care were reviewed.

Mrs Bullock advised formal sub-groups (finance and operational) were established whilst the draft Alliance Contract and Memorandum of Understanding were largely agreed.

14.06.9.4 Executive Director Away Day

Mrs Bullock referred to the Executive Away day which had taken place on Monday, 19 May. Mrs Bullock advised a significant part of the day had seen discussion on the Trust's 5 year Strategic Plan narrative which requires submission to Monitor by 30 June. Mrs Bullock noted the significant amount of work being undertaken to complete the submission.

Mrs Bullock advised discussion had also focused on the Organisational Development Strategy and the alignment of same with the outcomes from the workshop session with AQuA at the Board Away Day of 28 April 2014.

Discussion had also taken place on the Front of House and the next steps. In response to the Chairman's enquiry as to the timeframe for reviewing the Front of House and submission of a Business Case, Mrs Bullock advised there was no specified timeframe as there were no

capital funds available to fund same. Mrs Bullock advised of work to be undertaken with the Division to consider the optimum model for a Front of House and also the costing of same should monies become available. Discussion took place regarding the potential sources of funding and it was agreed that the Trust would not be in a position to borrow the monies at this time.

Mr Davis referred to the Development Control Plan and the need to ensure that any plans/works carried out did not inhibit any potential Front of House plans. Mr Oldham also noted the impact of the Connecting Care 5 Year Strategy would also need to be considered.

14.06.9.5 AQuA Masterclass – Leading Deep cultural Change

Mrs Bullock referred to the Masterclass which had taken place on Tuesday, 20 May. Mrs Bullock noted the content of the event had been very similar to the previous Board on Board hosted by AQuA. Mrs McNeill agreed noting the focus was more at an operational level rather than strategic.

14.06.9.6 Quality Improvement Training

Mrs Bullock noted that 30 staff have undergone the training hosted by AQuA with the final day scheduled for Tuesday, 3 June 2014.

Resolved

- **To note the Chief Executive's Report**

MEDICAL DIRECTOR'S REPORT

14.06.10.1 Serious Untoward Incidents and RIDDOR Events

Dr Dodds advised there had been no Serious Untoward Incidents for the period whilst there had been 1 RIDDOR event (Reporting of Injuries, Diseases and Dangerous Occurrences).

14.06.10.2 Consultant Appointments

Dr Dodds advised a substantive Consultant Ophthalmologist was appointed with an additional candidate offered a locum post subject to Board of Director approval of the Business Case for the Expansion of the Ophthalmology Workforce (Agenda Item 11.4)

Resolved

- **To note the Medical Director's Report**

QUALITY SAFETY & EXPERIENCE

14.06.11.1 Patient Quality Safety & Experience Report

Mrs Smith presented the report noting the number of formal complaints received for the month of April was 21 and provided detail of the key

trends. Mrs Smith advised that of the two complaints being reviewed by the Ombudsman, one had, the previous week, been closed and not upheld.

Mrs Smith noted the number of closed complaints advising 3 had been upheld, 12 partially upheld and 7 were not upheld.

Mrs Smith advised there had been 108 contacts raising concerns and provided detail of the key trends. Mrs Smith noted there had been 167 compliments/thank-yous received.

Mrs Smith presented the Legal Services Report noting there had been 1 new Clinical Negligence claim received whilst 3 Clinical Negligence claims had been closed during the period. Mrs Smith advised there had been 1 new Employer Liability claim.

Mrs Smith advised 2 inquests had been concluded in April noting the Narrative conclusions for both.

Mrs Smith advised there had been 16 postings on NHS Choices and also provided detail of the Friends & Family Test Response Rates and Net Promoter Scores. In relation to the responses for A&E, Mrs Smith advised 483 patients had indicated they would recommend the Trust rather than would not recommend, as noted. Mrs Smith noted the variable score in relation to Ante Natal.

In relation to the Patient Safety Monthly Performance Report, Mrs Smith advised of the number of patients who experienced a harm incident whilst being treated in the Trust against the total number of patients cared for by the Trust in the same period.

Mrs Smith noted the continued improvement in the number of Hospital Acquired Pressure Ulcers Resulting in Harm by Month and also the number of Patient Safety Incidents Resulting in Harm. Mrs Smith also detailed the Trust's RAMI, SHMI and number of In-Patient Deaths.

Mrs Smith advised Chart 8 – Hospital Initiated Outpatient Cancellations was a new chart which detailed the number of hospital initiated outpatient cancellations. Mrs Smith noted the Trust aims to reduce hospital initiated cancellations by 20% by April 2016 and noted in this regard the target line was inaccurate reflecting a two year target over a twelve month period. Mrs Smith advised this would be amended for future reports.

Mrs Smith advised there had been no incidents of MRSA in April 2014 and noted there had been one case of *Clostridium difficile* reported against a revised target of 23 of the year 2014/15.

Mrs Smith advised of the number of patients with a suspected stroke that are admitted directly to the specialist acute stroke unit and the number of patients diagnosed with the Transient Ischemic Attack that are treated within 24 hours of referral.

Mrs Smith advised of the on-going work with Public Health in relation to the Smoking during Pregnancy target. Mrs Smith advised there had been an improvement in the numbers of patient who had stopped smoking, however, it was important that this improvement was sustained.

Resolved

- **To note the report**

14.06.11.2 Strategic Integrated Governance Committee – 12 May 2014

Dr Dodds presented the minutes noting the three items to be raised to the Board of Directors.

Dr Dodds referred to previous discussion by the Board of Directors in relation to the NICE report (Board of Directors 3 February 2014) and noted the positive comments in relation to the revised format of the report.

In relation to the Information Commissioner Officer (ICO) Audit Report, Dr Dodds confirmed the ICO had completed their Audit and the report was due to be released into the public domain. In response to the Chairman's enquiry as to whether the audit had been scheduled, Dr Dodds advised the Trust had invited the ICO to complete the audit with future annual audits mandated nationally.

Dr Dodds advised the Risk Management Strategy had been approved by the Committee. The Chairman noted, in his discussions with KPMG, they had expressed an interest in how the Trust monitors and manages its risk. Mrs Bullock noted this would form part of the work programme going forward.

Resolved

- **To note the minutes of 12 May 2014**

14.06.11.3 Business Case for the Expansion in Urology Workforce

Mrs Frodsham presented the Business Case for an additional Consultant with associated support structure. Mrs Frodsham noted in detail the reasons for the Business Case and advised the monies had been included in the Trust's Annual Plan/Budget for 2014/15.

Detailed discussion took place regarding the financial detail and clarity was also provided in relation to the increasing demand and market share.

Mrs McNeil enquired as to the proposed timeframe for further growth in demand and recruitment of an additional Consultant, as indicated in the Business Case. Mrs Frodsham noted same would be considered as part of the Trust's Clinical Services Strategy advising should the Business Case be approved, a Benefits Realisation Paper would be received 6 months subsequent to the appointment to include consideration of future options.

Mr Barnes noted the Trust's position nationally in terms of Consultant workforce and also referred to the recruitment timeframe. Mr Barnes' enquired as to whether action could have been taken sooner by the Trust. The Chairman noted the Board had been made aware of the position previously with provision for same included in the budget for 2014/15. Mrs Frodsham advised the Trust would appoint a Locum until the post was recruited to substantively.

Resolved

- **To approve the Business Case and drawdown of monies for an additional consultant in Urology with associated support structure.**

14.06.11.4 Business Case for the Expansion in Ophthalmology Workforce

Mrs Frodsham presented the Business Case for an additional 1.8 WTE Consultant and 1 WTE Speciality doctor with associated support structure. Mrs Frodsham noted in detail the reasons for the Business Case and advised the monies had been included in the Trust's Annual Plan/Budget for 2014/15. Mrs Frodsham advised the proposed investment would support an improved patient experience with a continued focus on clinical outcomes.

Mrs Frodsham noted the issues with the estate advising it no longer meets service requirements and pivotal to the long term strategy is the expansion of same. Mrs Frodsham noted however, in the interim activity can be delivered through different ways of working.

Mrs Frodsham advised of potential further changes to the existing service noting the Trust were currently undertaking a review of the Ophthalmology partnership with East Cheshire NHS Trust and the impact on direct clinical care sessions.

In response to Mr Barnes' enquiry as to the opportunity to work with University Hospital North Staffordshire, Mrs Frodsham advised they were currently reviewing their capacity and demand.

Mrs McNeil noted the potential estate costs had not been included in the Business Case wherein Mrs Frodsham advised consideration was currently been given to a number of options which would need to be costed. Mr Davis noted an internal reallocation of space may not require a great capital investment but would improve premium costs.

Resolved

- **To approve the Business Case for an additional 1.8 WTE Consultant and 1 WTE Speciality doctor with associated support structure**

10.04.10.4 Nursing & Midwifery Safe Staffing

Mrs Smith referred to the paper and presentation at the Board of Directors meeting of 7 April 2014 and provided a verbal update in relation to same.

Mrs Smith noted the pictorial boards advising of the staff present on each shift and in what numbers were being put on the wards that day and the following day (3 June 2014). Mrs Smith also advised work had been undertaken with the IT and Information Departments to record this information on the Trust's intranet. Mrs Smith advised that previously this information was required on a shift by shift basis, however, subsequent guidance received advised the information should be provided on an hourly basis rather than shift by shift with the information being made available to the public. Mrs Smith advised of work being undertaken with the IT department in this regard. Mrs Smith advised the Trust would be RAG rated on the information.

Mrs Smith advised the Trust were required to have a link on the Trust website to the bi-annual report to Board on staffing levels whilst the Performance Report would include exception reporting in relation to staffing, as appropriate. Mrs Smith advised the Trust's website would also include additional narrative such as background information to the numbers of staff.

Mrs Smith summarised her update noting the Trust were on track to comply with each of the 9 expectations within the specified timeframe.

Resolved

- **To note the verbal update**
- **To circulate detail of the links to the intranet to the Board of Directors. JS**

OPERATIONAL DELIVERY

14.06.12.1 Performance & Finance Committee – 23 May 2014

Mr Oldham presented the minutes noting the 'carry forwards' for the Capital Programme were currently being finalised.

Mr Oldham also noted in detail those items to be raised to the Board of Directors including concerns regarding Trust performance against the 62 Day Cancer Wait for First Treatment Target and Mandatory Training.

Mr Oldham noted a paper had also been received in relation to Patient Moves Out of Hours which highlighted a number of patients moves were happening after 10pm at night. Mr Oldham advised monthly auditing of patient moves was to be conducted.

Resolved

- **To note the minutes of 23 May 2014**

14.06.12.2 Performance Report

Mrs Frodsham presented the Performance Report noting the Cancer Wait Time targets were delivered in month with the exception of Symptomatic Breast Patients – two week wait from referral to date first seen and All Cancers: 62 Day wait for first treatment from urgent GP referral. Mrs Frodsham advised the Trust were on track to achieve the Symptomatic Breast target for the month of May, however, noted there is a risk the Trust will not achieve the 62 Day Cancer Wait target for the quarter.

Mrs Frodsham advised the Trust continued to deliver the admitted, non-admitted and incomplete RTT (Referral to Treatment) pathway targets in month at an aggregate level. Mrs Frodsham advised A&E attendances for April were below plan, however, were above plan for the month of May. Mrs Frodsham noted the Trust achieved the Four-Hourly target for April with work on-going to review those breaches occurring in the evenings or at weekends.

In response to Mr Davis' enquiry as to whether the continuing decline in Non-Elective spells was positive for the Trust, Mrs Frodsham advised it was , however, noted a continued focus was required on medical Non-elective as the decrease was mainly in surgical spells.

In relation to the financial position, Mrs Frodsham provided detail of the Trust's income and expenditure performance also noting the Trust's pay and non-pay costs, contract income, performance against Cost Improvement Programmes, the Capital Programme and the cash position.

In relation to Workforce, Mrs Frodsham noted the position in relation to sickness absence, appraisals and mandatory training.

Resolved

- **To note the report**

STRONG PROGRESSIVE FT

14.06.13.1 Monitor Self-Certification

Mrs Bullock presented the template Self-Certification document which was to be completed and returned to Monitor for 30 June 2014. Mrs Bullock requested Board members contact her directly if they had any concerns or wished to highlight issues against any of the questions posed.

In relation to Question 5 – Certification on AHSCs and Governance, Mrs Bullock advised the Trust would be responding ‘Not Applicable’ whilst in relation to Question 6 – Training of Governors, Mrs Steele had completed a detailed response. Mrs Bullock noted the Declaration must be signed ‘having regard to the views of Governors’ and invited Mr Lyons to comment should he so wish. Mrs Bullock also requested Mrs Steele forward the response in relation to Training of Governors to Mr Lyons for his consideration.

Resolved

- **To note the Self-Certification document**
- **To forward the response in relation to Training of Governors to Mr Lyons for his review and comment *MS***

14.06.13.2 Clinical Services Strategy Event

Mrs Frodsham provided verbal feedback from the Clinical Services Strategy Event on Friday, 9 May 2014 noting same had been well attended and the feedback had been very positive. Mrs Frodsham noted the format of the event and advised a brief paper detailing the outcomes and next steps would be presented to the board of Directors meeting of 7 July 2014.

Resolved

- **To note the verbal update**
- **To receive a paper detailing the outcomes and next steps at the Board of Directors meeting of 7 July 2014**

14.06.13.3 Connecting Care – A transformational approach to the Integration of Health and Social Care in Central Cheshire 2014-2019

Mr Pitt presented the draft paper noting it detailed the Central Cheshire Connecting Care 5 year Strategy across Health and Social Care. Mr Pitt noted the Board of Directors were being asked to support the vision and key themes outlined in the paper and advised that the Central Cheshire Connecting Care Board will approve the submission to NHS England on 20 June 2014. Mr Pitt advised the Board of Directors were also being asked to agree to the Connecting Care Board proceeding with further key stakeholder engagement and involvement to shape the initial strategy in to a final strategy.

Mr Pitt noted a description of what integrated care will 'look and feel like' for the service user or member of the care team was yet to be included whilst discussion on the future role of the acute sector was yet to take place.

Mr Pitt requested any comments on the strategy document be sent to him.

Mrs McNeil noted the vision was well written and inspiring, however, noted one could not underestimate the extent of work to be undertaken.

In response to the Chairman's enquiry as to whether the Board were supportive of the direction of travel and key themes outlined, it was

Resolved

- **To support the paper as presented and agree to the Connecting Care Board proceeding with further key stakeholder engagement and involvement to shape the initial strategy in to a final strategy**

FIT FOR PURPOSE INFRASTRUCTURE

14.06.14.1 Infrastructure Development Committee – 12 May 2014

Mr Oldham presented the minutes of 12 May 2014 noting the item to be raised to the Board of Directors. Mr Oldham provided a background to the proposed investment for the Surgical Assessment Lounge and advised the Infrastructure Development Committee have reviewed the financial position in respect of Theatres and ICU considering whether the additional works (Surgical Assessment Lounge, additional Endoscopy Room and Treatment Centre waiting area configuration) were affordable. Mr Oldham noted the financial risk of proceeding and in the detailed discussion that followed which included potential sources of funding for the risk amount, it was agreed to accept the Infrastructure Development Committee recommendation to accept the risk and progress with the works.

Mr Oldham advised a brief paper would be presented to the Board of Directors meeting of 7 July 2014 regarding the governance arrangements.

Resolved

- **To manage an acceptable risk and progress with the works**
- **To receive a paper relating to the governance arrangements at the Board of Directors meeting of 7 July 2014**

14.06.14.2 Improving Theatres and Intensive Care Project Board – 13 May 2014

Mrs Frodsham presented the minutes noting the June meeting was to be cancelled and the May meeting would in fact be the last meeting of the Board.

Mrs Frodsham noted there were no items to escalate or highlight to the Board of Directors.

Resolved

- **To note the minutes of 13 May 2014**

14.06.15 LEGAL ADVICE

Mrs Bullock advised of three new requests for legal advice.

Resolved

- **To note the report**

VISITS OF ACCREDITATION, INSPECTION OR INVESTIGATION

14.06.16.1 CPA Accreditation

Mrs Bullock advised the Microbiology Department had undergone an accreditation inspection and had successfully retained CPA accreditation.

Resolved

- **To note the verbal update**

14.06.17 BOARD ACTIONS

After discussion, it was

Resolved

- **To approve the schedule of Board of Directors' actions**

ANY OTHER BUSINESS

None noted.

REVIEW OF THE MEETING

The Chairman noted circa 40% of the items on the Board Agenda had been patient focused, 20% on regulation and governance, 20% on organisational performance and 20% on strategy.

Dr Dodds noted work currently being undertaken with the Divisions and Sub-Committees on the format of committee agenda and linking same to the five domains of the Care Quality Commission inspections. Dr

Dodds suggested consideration should also be given to the format of the Board of Directors agenda.

Mrs Bullock noted Monitor have issued guidance in relation to the Well-Led Domain and advised she will prepare a brief paper on the implications for the Trust for the Board of Directors meeting of 7 July 2014. It was also agreed to consider the format of future agenda at the next Board Away Day.

Resolved

- **To receive a paper on the Well-Led Domain issued by Monitor at the Board of Directors meeting of 7 July 2014 TB**
- **To discuss the format of future Board of Directors agenda the Board Away Day of 16 June 2014**

TIME, DATE AND PLACE OF FORTHCOMING MEETINGS

A Board of Directors meeting, in public, is at 9.30am on Monday, 7 July 2014.

Signed

Chairman

Date