

## CAMBRIDGE UNIVERSITY HOSPITALS NHS FOUNDATION TRUST

Minutes of the meeting of the **BOARD OF GOVERNORS OF CAMBRIDGE UNIVERSITY HOSPITALS NHS FOUNDATION TRUST** held on 8 September 2009 at 17.30 in the Hexagon, Frank Lee Centre, Addenbrooke's Hospital.

**PRESENT:**

- Dr M Archer (Chairman)
- Mr D Adlam (Staff Governor)
- Mr M Bright (Patient Governor)
- Dr S Bullivant (Patient Governor)
- Mr R Burgin (Advisor)
- Mrs M Chaloner (Patient Governor)
- Brig R Cockman (Public Governor)
- Mrs J Coston (Patient Governor)
- Mrs P Dansie (Public Governor)
- Mr A Dasgupta (Advisor)
- Dr M Davies (Partnership Governor)
- Mrs J Ewer (Public Governor)
- Mr B Gerbaldi (Public Governor)
- Mrs M Hart (Patient Governor)
- Mrs R May (Staff Governor)
- Prof B Michell (Patient Governor)
- Dr J Nicholls (University Governor)
- Cllr T Orgee (Local Authority Governor)
- Mr J O'Sullivan (Staff Governor)
- Mrs G Pharaoh (Patient Governor)
- Mr E Revell (Public Governor)
- Mr A Roberts (Patient Governor)
- Mrs S Smith (Advisor)
- Mr L Williamson (Public Governor)
- Ms C Young (Commissioning Group Governor)

### **APOLOGIES**

- Mr C Carr (Staff Governor)
- Ms M Donnelly (PCT Governor)
- Mrs G Francis (Public Governor)
- Prof D Humber (Partnership Governor)
- Prof A Lever (University Governor)
- Mr R Quince (Advisor)

### **IN ATTENDANCE**

- Dr J Ahluwalia (Executive Medical Director)
- Dr K Castille (Chief Nurse and Operating Officer)
- Mrs F Cousins (Executive Director of Information Systems & Analysis)
- Dr G Goodier (Chief Executive Officer)
- Mrs B Hennessy (Director of Patient Experience and Public Engagement)
- Mrs R Murphy (Director of Communications)
- Mr C Greenhalgh (Vice Chairman)
- Mr J Potter (Non Executive Director)
- Mrs H McGhee (Deputy Trust Secretary)

### **40/09 CHANGES TO THE BOARD**

The Chairman welcomed Cllr Clare Blair replacing Cllr Sheila Stewart as the newly appointed local authority governor, representing the City Council. Cllr Tony Orgee's re-appointment as a local authority governor, representing the County Council was noted, and Ms Maureen Donnelly as the representative of NHS Cambridgeshire, had been reappointed by their respective organisations.

#### **41/09 MINUTES OF THE PREVIOUS MEETING**

The minutes of the previous meeting held on Thursday 2 July 2009 were agreed as a correct record.

#### **42/09 MATTERS ARISING FROM THE MINUTES**

No matters arising were identified which would not be dealt with under other agenda items.

#### **43/09 FINANCIAL AND PERFORMANCE REPORTS**

##### **(A) Financial Report**

Received and noted: Financial report

##### **(B) Performance Report**

Received and noted: Performance report

##### Noted

The Chairman noted that governors had had the opportunity to scrutinise and comment upon both the finance and performance reports in detail, and to ask in-depth questions about the reports at the Governance and Assurance Working Group meeting held on 3 September. Governors had no further questions at this time.

##### Agreed

The examination of the reports in detail at the Working Group had proved to be a good step forward.

#### **44/09 PATIENT EXPERIENCE REPORT**

Received: Improving the experience of our patients report

Mr Fraser Rogers, Head of Public Engagement, reported on behalf of Mrs Hennessy, Director of Patient Involvement and Public Engagement, who had been called away on Trust business.

##### Noted

- (i) Governors' comments on the format of the report had been sought at the Governor/ Director Working Group on Membership and PPI and would be incorporated in the next report to be circulated to governors in December.
- (ii) The TouchNav kiosk had been installed on 5 September. It was intended to assist in wayfinding and was undergoing evaluation.
- (iii) Staff governors found it helpful to meet their constituents and focus groups had been held on matters of concern to staff, allowing staff to engage with issues and make their views known to governors.
- (iv) Mrs Hennessy was working with Dr Castille to develop scorecards for each ward. In six months' time feedback would be provided at each ward as part of the process of accountability.

- (v) Both Mrs Hennessy and Mr Rogers had been asked to present in national Conferences on the tools which the Trust was using to understand patient views. It was helpful that the Trust now had abundant information available in real time, which could be acted upon rapidly.

#### Agreed

Members were reminded to send further suggestions or comments on the format of the report to Mrs Hennessy or Mr Rogers; these would be taken into account in the production of the next report to the meeting in December.

### **45/09 INFECTION CONTROL**

Received: Update on infection control

Dr Jag Ahluwalia, Executive Medical Director, reported.

#### Noted

- (i) Dr Ahluwalia clarified that of the 12 MRSA bacteraemias identified to the end of July, two had subsequently been found not to be due to MRSA and so the number had fallen to 10.
- (ii) The report summarised key actions going forward for further reduction in infection rates during the year, some resulting from a visit by a Department of Health specialist cleaning team.
- (iii) In August the Trust was one case above trajectory for MRSA bacteraemias for the year. For *C. difficile* the Trust had a year-to-date figure of 43 cases and was expecting to end the year well below the ceiling of 240, representing another major step forward.
- (iv) New audit tools developed for the wards made use of real-time data for surveying patients on a weekly basis, looking at patient care and patient experience. Generally the Trust was doing well, but in some domains there was room for improvement.
- (v) Audits of hand hygiene compliance had shown that there was no area which had fallen short of 95% compliance for the period April to June. Overall, compliance across the Trust had been 99% for the quarter.
- (vi) The intention of all these measures was to ensure that no patient developed a preventable infection whilst in the Trust's care.
- (vii) Governors found these results encouraging. However, they asked to see separate data on the transplant area which had previously been a problem. It was noted that the transplant area received a large number of visitors and this could affect the data.
- (viii) Governors also sought information on the number of MRSA bacteraemias where the infection had been present when the patient was in the community and this could be provided.
- (ix) Governors noted that there were differences between the figures regarding hand hygiene in this report and in the patient experience report. It was explained that this reflected the differences between direct observation and patient expectations. The high reputation of the Trust was reflected in patients' high expectations of the treatment which they were to receive. Using a numerical scale might be clearer.

Agreed

- (i) Governors thanked Dr Ahluwalia for his presentation. Whilst the Trust should never be complacent about infection, the figures for *C. difficile* were an encouraging trend and significantly better than expected. The provision of a new isolation ward had been helpful.
- (ii) Data on hand hygiene in the transplant area, and on the number of MRSA bacteraemias where the patient had had the infection in the community would be included in the next report to governors.
- (iii) Governors congratulated staff on their achievements which had significantly reduced the incidence of healthcare acquired infection acquired in the Trust.

**46/09 CHAIRMAN'S DIARY OF EVENTS**

Received and noted the Chairman's report.

Noted

Following publication of the FTN report on open/closed Board of Directors' meetings, the Chairman had asked Judy Ewer to provide Board of Directors' meetings with a brief quarterly report on those issues which governors would like to raise with the Board. This would take account of issues raised in all fora by governors, and include all governors' views. It was hoped that all governors would take advantage of this opportunity to improve links with directors.

**47/09 GOVERNOR/DIRECTOR WORKING GROUPS AND NOMINATION AND REMUNERATION COMMITTEE REPORT**

**Reports from the meetings of Governor/Director Working Groups**

**(A) Forward Planning held on 19 August 2009**

Received: Minutes of meeting of 19 August 2009.

Mr Michael Bright, Chairman of the Forward Planning Working Group, reported.

Noted

- (i) The revised terms of reference would now be forwarded to the Governors' Constitution Committee for consideration.
- (ii) Governors received an update on the Southern Campus developments and debated the possibilities of moving hospital care into the community.
- (iii) The S106 agreements were in the process of being signed by all the parties to the agreements. The Chairman had signed on behalf of the Trust.

## **(B) Governance and Assurance held on 3 September 2009**

Mr Jim O'Sullivan, Chairman of the Governance and Assurance Working Group, reported.

### Noted

- (i) The minutes from the 3 September meeting would be distributed shortly.
- (ii) Governors had received a presentation from the external auditors with the opportunity to ask questions about this year's audit. The internal auditors would present to the next meeting.
- (iii) Dr Castille and Service Improvement Facilitator Ewan Kelsall had attended to give an in-depth seminar about discharge planning and the many projects going on to improve this and the positive steps the Trust was taking; Dr Castille would report progress in six month's time.
- (iv) As previously reported, Governors had scrutinised the Finance and Performance reports in detail, and asked numerous questions.

## **(C) Membership and PPI held on 24 August 2009.**

Received: Minutes of the meeting held on 24 August 2009.

Mr Brian Gerbaldi, Chairman of the Membership and PPI Working Group, reported.

### Noted

- (i) The Chairman congratulated Mr Gerbaldi on his election as Chairman of this group. Mr Gerbaldi thanked the retiring Chairman of this group, Mary Chaloner, for her work in that capacity.
- (ii) He drew members' attention to the minutes which had been circulated. He noted that the meeting had been curtailed owing to the briefing for governors on swine flu.

## **Report from the Governors' Nomination and Remuneration Committee**

### Noted

- (i) The Chairman reported that the appointments panel of the Nomination and Remuneration Committee had met twice since the last Board of Governors' meeting and would be meeting to consider the shortlisting of candidates for the NED positions on 9 September.
- (ii) The decision to use search agents had produced a very strong field of candidates, and had added value to the process in ways which would serve the Trust well in years to come.
- (iii) The governors' strategy to identify candidates for all the NED positions which would become vacant in 2009/2010 had proved excellent and the Chairman expressed her gratitude to those NEDs who had agreed to be re-considered for their positions in advance of the expected date.
- (iv) The Chairman congratulated Gerald Coteman, who had stepped down as a non-executive director on 1 September, to take up the position of Chairman of Princess Alexandra Hospital in Harlow. She also thanked Shona Johnstone

who had stepped down as a non-executive director on 31 August due to her recent ill health.

- (v) Provision had been made for the shortlisted candidates to meet the governors on 17 and 18 September. The Chairman would seek feedback from governors on their impressions of the shortlisted candidates, which would assist the panel in the interviewing process; however it was for the panel to make the final selection of candidates to recommend to the Board.

#### **48/09 BOARD OF DIRECTORS' MINUTES (REDACTED)**

Received and noted: Redacted minutes of Board of Directors' meetings 28 April, 26 May, 30 June and 28 July 2009

- (i) In answer to governors questions the Trust Secretary explained that the Board of Directors' minutes were redacted to remove items of commercial sensitivity, personal data and information shared in confidence, in compliance with the provisions of the Freedom of Information Act. Approximately 20% of the minutes were redacted.
- (ii) Governors were concerned by reference to 'risk' to the plans for the development of the clinical pharmacy service. It was explained that the risk referred to financial risk rather than the quality of service. The service was having to assess its future plans in the light of financial stringency.
- (iii) Governors suggested that the patient story which was at the heart of directors' Board meetings should also be brought to the heart of the governors' Board meetings.
- (iv) It was explained that the production of the redacted minutes in this format meant that they need only be produced once as this also responded to FOI requests.

#### Agreed

- (i) It was agreed that the patient's story be included on the Board agenda and the FT office, advised by Dr Ahluwalia, would follow this up.
- (ii) Governors welcomed the receipt of the Board of Directors' minutes.

#### **49/09 REPORT FROM THE NHS FOUNDATION TRUST GOVERNORS' ASSOCIATION**

Received: Report from Mr Brian Gerbaldi

#### Noted

- (i) The Chairman congratulated Brian Gerbaldi on his re-election as Vice-Chairman of the FTGA.
- (ii) Governors' attention was drawn to the publication of a further briefing on non-executive directors. The membership of FTGA was now 62% of all FTs. The Association was holding a further development day on Monday 19 October in Solihull and a third delegate was entitled to attend free of charge, as Mr Gerbaldi was attending as Vice-Chairman. Governors were invited to let the FT office know if they would like to take up the place. This could be a different delegate on each occasion.

## **50/09 UPDATE OF REGISTER OF GOVERNORS' INTERESTS**

The Register of Governors' Interests had been updated and copies were available from the Secretary.

## **51/09 FUTURE EVENTS**

Noted

A list of future events was tabled.

The Chairman drew governors' attention to the invitations to the opening of the Oasis Centre in Abingdon House for children and teenagers with cancer on 25 September, and to the Masterplanning presentation being held on 22 September in Clare College at 1730. Governors would also receive details of the launch of the display of the 800 Panorama the drawings of Quentin Blake on 28 September.

## **52/09 DATE OF NEXT MEETING**

The date of the next meeting was confirmed as:

**Thursday 3 December 2009 at 1730 in the Hexagon, Frank Lee Centre**

## **53/09 ANY OTHER BUSINESS**

### **NED/ Governor interaction**

Noted

- (i) Governors raised the question of their relationship to non-executive directors and the amount of information with which they were provided. They considered that there was some way to go on the issue of governors being consulted on decisions, although it was acknowledged that they received a great deal of detailed information from the Trust.
- (ii) In answer to governors' questions, the Chairman outlined the structure of the Board of Directors, which was available on the Trust website. Quarterly Board meetings involved all Directors, whilst the remaining meetings involved only Executive Directors.
- (iii) Governors also asked at what point governors would have input to debates in the case of a crisis, for example a national financial crisis, possibly requiring large budget cuts. Dr Goodier reassured governors that they would always be involved in debate of this kind. In the event of an exceptional scenario every effort would be made to engage governors, for example through the working groups.
- (iv) The Trust was presently focussing on developing information systems to identify waste and inefficiency, and looking at improving the efficiency of services across the board to maintain the best quality care for the money available. The Trust was driving clinical services to achieve upper decile performance in the NHS. The management information available had improved greatly and enabled the Trust to improve productivity for example around discharge issues. The Trust needed to improve surpluses to achieve sustained development of the Trust. In discussion with CUHP partners Dr Goodier was looking at back office services to see where efficiencies could be achieved in the light of the need to reduce spending and achieve the most efficient output.

- (v) The governors were fully involved each year in the development of the annual plan.
- (vi) Colin Greenhalgh, as Senior Independent Director, confirmed his willingness to engage with governors to further improve communications.

Agreed

An opportunity would be found for governors to discuss these matters, and the agenda format would be reviewed.