

**MINUTES OF THE TRUST BOARD MEETING  
HELD IN PUBLIC ON TUESDAY, 18  
DECEMBER 2012 AT 1PM IN THE BOARD  
ROOM, WEST CUMBERLAND HOSPITAL,  
WHITEHAVEN**

**Present:** Mr M Bonner, Vice Chairman (Acting Chairman)  
Professor V Bruce, Non Executive Director  
Ms J Cooke, Non Executive Director  
Mrs A Farrar, Interim Chief Executive  
Ms C Siddall, Director of Operations  
Mr M Walker, Medical Director  
Mrs C Platton, Acting Director of Nursing  
Mr S Shanahan, Interim Director of Finance

**In Attendance:** Mr D Gallagher, Director of Human Resources & OD  
Mrs R Duguid, Acting Director of Governance/Company Secretary  
Miss E Kay, Head of Communications & Reputation Management  
Mr L Morgan, Director WCH Project (TB132d/12 only)  
Mrs J Stockdale, Head of Corporate Affairs  
Mr P Armstrong, BU Director, Surgical (TB132c/12 only)  
Mrs L Corlett, Deputy BU Director, Surgical (TB132c/12 only)

**TB126/12 EMERGENCY CARE STANDARDS PRESENTATION**

Mrs B Monk, Deputy Director of Emergency Care, gave a presentation to the Board, outlining the new internal professional standards for emergency care which had been designed to deliver "excellent emergency care each day, every day" (copy attached).

Mrs Monk confirmed that although patient feedback/stories had been taken into account when implementing the acute physician model at the Cumberland Infirmary, the patient survey was undertaken afterwards and, therefore, the model was to be re-launched with specific changes following the feedback from the survey. Feedback from the North West Ambulance Service was also to be sought.

Ms Siddall commented that all staff were to be commended for all their hard work in this project, particularly at the present time with the additional pressures in the system.

Mrs Monk confirmed that plans were in place to deliver the 95% A&E target, and although there had been a slight decline earlier in the month, things were now back on track. Mrs Farrar stressed that this was one of the Trust's major priorities on which to deliver and would be reviewed in March.

Mr Bonner thanked Mrs Monk for her presentation.

**TB127/12**      **WELCOME AND APOLOGIES**

Apologies for absence were received from Mr M Little and Mr M Evens.

**TB128/12**      **DECLARATIONS OF INTEREST**

No declarations of interest were noted.

**TB129/12**      **MINUTES OF THE LAST MEETING**

The minutes of the meeting held on 27 November 2012 were **APPROVED** as a correct record.

**TB130/12**      **MATTERS ARISING AND ACTION PLAN**

No matters arising were discussed.

The action plan was **APPROVED** as follows:

TB48b/12      Trauma Accreditation: Ms Siddall to bring a more detailed report to the Board in January.

TB110b/12      Service Improvement: Outlined in report. Action complete.

TB120c/12      Service Performance: Outlined in report. Action complete.

TB120d/12      Workforce Report: Figures reviewed by Finance Committee. Action complete.

**TB131/12**      **SAFETY AND QUALITY**

a) **Improving Patient Safety**

Mrs Platton and Mr Walker presented the Improving Patient Safety report, which was **APPROVED** by the Board.

Mr Walker confirmed that the Trust was working with health economy partners on a multi-disciplinary team basis so as to improve patient discharges. He confirmed that the Trust was also reviewing its internal information so that this could be improved.

With regard to incident reporting, Mrs Platton **AGREED** to provide the Board with peer comparison data in due course.

In relation to the strategic aim of reducing harm within the hospitals, the Board discussed 'compassion' and how this needed to be further emphasised and explored within the four themes of work.

**ACTION:**

Mrs Platton to provide the Board with peer comparison data in due course.

b) **Service Performance**

Ms Siddall presented the Service Performance report, which was **APPROVED** by the Board.

The Board **NOTED** that it was unlikely that the Q3 A&E performance standard would be achieved due to an unprecedented increase in emergency admissions and the outbreak of norovirus.

c) **Workforce Report**

Mr Gallagher presented the Workforce Report, which was **APPROVED** by the Board.

Professor Bruce commented that she was pleased to see an improvement in the data relating to appraisal and training rates. Mr Gallagher confirmed that work continued so as to improve these further.

Mr Shanahan explained that Finance staff had indicated that they were experiencing problems with the equality & diversity training and it was, therefore, **AGREED** that Mr Gallagher would review this particular area of training, with a view to replicating that of the Northumbria Trust.

**ACTION:**

Mr Gallagher to review equality and diversity training, with a view to replicating that of the Northumbria Trust.

d) **Cancer Peer Review Update Report**

Ms Siddall presented a report which updated the Board on the outcome of the external cancer peer review visit and the action plans that had been put into place to address immediate and serious risks that had been identified. The report was **APPROVED** by the Board.

Ms Siddall confirmed that the risks had been included within the Trust's Risk Register.

Mrs Farrar reported that the Trust had received confirmation from the NHS Cumbria Medical Director that he was reassured that the issues were being appropriately dealt with.

e) **Self Certification Return – November 2012**

Ms Siddall presented a report which provided Board members with details of the Trust's self certification return for performance (November 2012), against a range of operating indicators.

In discussing the Board Statements, Mrs Farrar explained that statements 1 and 8 could now be reported as 'yes', as the Trust was now better placed in having the knowledge and evidence to support these. She explained that as time progressed, more of the statements would be changed to report 'yes'. The report was **APPROVED** by the Board.

TB132/12

**STRATEGY AND POLICY**

a) **Acquisition Update**

Mr Bonner reported that although significant work continued, it was unlikely that the acquisition process would be finalised by March 2013.

As from January 2013, the Trust Development Agency would be taking over all responsibility for leading on the acquisition process from the current SHA.

Membership recruitment continued, with 7000 members having signed up to date. 34 expressions of interest for governor roles had been received; the closing date for applications was 17 January 2013.

Interim management arrangements continued to go well. As the contract for the WCH Project had been signed earlier that day, Mrs Farrar would now take up responsibility as the Senior Responsible Officer for the scheme. The only issue which Mrs Farrar would still not be able to be involved was that of the acquisition transfer, so as to protect her integrity.

Mr Bonner extended the thanks of the Board to Mr Evens for all his work in connection with the WCH project and to Dr Goodwin, who had now stood down from his role as Acquisition Director, as his work in connection with the WCH project was complete.

b) **Organisational Readiness for Acquisition**

Mrs Farrar presented a report to the Board which provided a progress report on the key items of business being prepared for the finalisation of the acquisition process. The report was **APPROVED** by the Board.

c) **Orthopaedic Strategy**

Mr Bonner welcomed Mr Armstrong and Mrs Corlett to the meeting to give a presentation on the proposed clinical strategy for trauma and orthopaedic services (copy attached).

Mr Armstrong outlined the proposals and requested the support of the Board.

Mr Walker commented that it was a positive step forward for the service and for patients.

Mr Armstrong explained that plans were being put in place to appoint a Clinical Director for the service across both hospital sites and a clinical meeting was to be arranged in January so as to develop the plan; details of which would be provided to SMT in due course.

Mrs Farrar extended the thanks of the Board to the orthopaedic team for developing the proposals, which would result in more patients receiving local care and a better service overall.

The Board gave its support to the orthopaedic strategy.

d) **West Cumberland Hospital Clinical Vision**

Mr Morgan presented a brief update to the Board on the development of a WCH clinical vision delivery plan, which included four key work streams that were to be established to progress the clinical vision. The Board **APPROVED** the report.

Mr Morgan explained that patients and key stakeholders would be advised of the vision via local forums and health economy organisations.

e) **PCPI Business Case**

Mrs Farrar presented a report requesting approval from the Board to progress the Primary Percutaneous Coronary Intervention (PPCI) Business Case to finalisation, prior to requesting final approval at the February Board meeting.

Mrs Farrar explained that the Business Case was not currently in the Trust's Capital Plan and would cost in the region of £5-6m. Although the running costs had not been identified, building costs would take approximately 5 years to pay back. The Capital Plan would, therefore, be reviewed so as to identify sufficient funds prior to the case being brought back to the Board in February.

It was **AGREED** that the Trust's Capital Plan would be reviewed by the Senior Management Team, alongside the Business Unit. Mr

Shanahan and Ms Siddall would also discuss the business case with the Trust's Capital Investment Group.

Following discussion, the Board **APPROVED** the proposal to progress the Business Case and to receive the final Case at the meeting in January.

**ACTION:**

Trust's Capital Plan to be reviewed by the SMT alongside the Business Unit. Mr Shanahan and Ms Siddall to discuss the business case with the Trust's Capital Investment Group. Finalised business case to be presented to the Board in January.

**TB133/12**      **FINANCIAL PERFORMANCE**

a) **Month 8 Report**

Mr Shanahan presented the Month 8 finance report which was **APPROVED** by the Board.

**TB134/12**      **GOVERNANCE & ASSURANCE**

a) **Patient Safety Walkabouts**

There had been no Non Executive Director patient safety walkabout undertaken due to additional Board business, however, these were to be reinstated from January 2013.

Executive patient safety walkabouts continued to be undertaken on a weekly basis.

**TB135/12**      **STANDING COMMITTEES OF THE BOARD**

a) **Governance Committee – November 2012**

The minutes and action plan were **APPROVED** by the Board.

b) **Charitable Funds – November 2012**

The minutes and action plan were **APPROVED** by the Board.

**TB136/12**      **ANY OTHER BUSINESS**

No further business was discussed.

**TB137/12**      **DATE, TIME AND PLACE OF NEXT MEETING**

Tuesday, 22 January 2013 at 1pm in the Board Room, Cumberland Infirmary, Carlisle.