

# Board of Directors

---

## Minutes of the Meeting held in Public at 9.30am on Monday, 1 July 2013 In the Boardroom, Leighton Hospital, Crewe

### PRESENT

Mr J Moran	Chairman ( <i>in the chair</i> )
Dame P Bacon	Non Executive Director
Mr J Barnes	Non Executive Director
Mrs T Bullock	Chief Executive
Mr M Davis	Non-Executive Director
Dr PA Dodds	Deputy Chief Executive and Medical Director
Mr D Dunn	Non-Executive Director
Mrs D Frodsham	Chief Operating Officer
Mr D Hopewell	Non-Executive Director
Mrs R McNeil	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

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

### STAFF STORY

Mrs Smith presented the patient story, a video interview with a staff member who had been attending her local gymnasium when she was asked to provide assistance for a gentleman who was having a cardiac arrest.

The staff member provided detail of her experience and the role she undertook in providing life saving resuscitation. The staff member advised the ambulance crew had brought the patient to Leighton Hospital where he was stabilised and subsequently moved to University Hospital North Staffordshire NHS Trust (UHNS).

The staff member advised she had received a letter from the gentleman's wife thanking her for saving her husband's life and that she had subsequently met with the gentleman when he attended for Cardiac Rehab Assessments at Leighton Hospital.

Mrs Smith read extracts of letters from the gentleman and his wife to the staff member which had thanked her for saving his life.

Mrs Bullock commended the staff member for her actions noting how difficult it can be to attend to a patient experiencing a cardiac arrest outside of the ward environment and in the absence of appropriate equipment.

Dr Dodds noted the reference to the fact that staff at the gymnasium were unsure of how to use the defibrillator and advised this highlighted the importance of training for all staff. Mr Pitt advised it was appropriate that staff training is provided generally within the Trust to ensure staff can assist should they experience such an incident.

The Chairman noted the impact staff have not only within the hospital environment but also in the community.

In response to Mr Barnes' enquiry as to why the patient was moved to UHNS, from Leighton Hospital, Dr Dodds advised the patient underwent a coronary angiogram, an investigation which is not provided at Leighton Hospital.

#### **Resolved**

- **To note the patient story and thank the staff member for the feedback provided.**
- **To liaise with the Head of Organisational Development and Learning re staff training on life saving skills. DP**

#### **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 Monday, 3 June subject to noting**

Under *Agenda Item 13.06.10.1 Patient Quality Safety and Experience Report* – the second paragraph should read Mrs Smith noted there had been 24 *complaints* closed in month - ...' rather than 24 claims as noted.

Under *Agenda Item 13.06.10.5 Care Quality Commission Bi-Annual Update* – the second sentence should read ‘Mrs Smith noted there had been a reduction in the Trust’s risk assessment.’ Mrs Smith requested the words ‘in comparison to the previous year’ be removed.

Under *Agenda Item 13.06.11.1 – Performance & Finance Committee* – 22 May 2013 it should be noted Mr Dunn had requested a further detailed review of Bank & Agency Costs and the performance of sickness absence be undertaken.

***Amendments reflected in the Public Minutes of the meeting.***

### **ACTIONS ARISING FROM PREVIOUS MINUTES NOT INCLUDED ELSEWHERE ON THE AGENDA**

None noted.

### **CHAIRMAN’S ANNOUNCEMENTS**

#### **13.07.6.1 Vale Royal Clinical Commissioning (VRCCG) Board Meeting – 5 June 2013**

The Chairman advised he had attended the VRCCG Board Meeting of 5 June noting discussion had taken place on the following key items:

- The availability of reablement monies and the suggestion same be utilised to relieve winter pressures in the local health economy.
- Specialist Commissioning and the request for Clinical Commissioning Groups to refund monies to Specialist Commissioning from their initial allocation. The Chairman advised this applied to Clinical Commissioning Groups nationally.
- Over performance on the contract with the Trust. The Chairman noted this reflected discussions had by the Trust’s Board of Directors at previous Board of Director meetings.

#### **13.07.6.2 AQUA Patient Safety Event – 12 June 2013**

The Chairman advised he and Dame Pat Bacon had attended the event which was a follow-up to the Patient Safety Ambassadors Programme. The Chairman advised Mr Robert Francis, QC, had been a key note speaker at the event and provided detail of his address.

In response to Mr Dunn’s enquiry as to whether Mr Francis had expressed an opinion on the suggestion a number of the recommendations would not be progressed nationally, Mrs Bullock advised it was important that organisations focused on the key principles of the Francis Report and considered the views of the local

stakeholders, patients and population rather than complete a tick box exercise of an action plan against 290 recommendations.

In response to Mrs McNeil's enquiry as to whether Mr Francis had suggested what critical information should be presented to the Board of Directors, the Chairman noted the triangulation of information was noted as important. Dame Pat Bacon advised one of the key issues raised was that of strategic –v- operational decision making wherein the divide could be a reason for inaction. Dame Pat Bacon advised Mr Francis was strong in his view that nothing should get in the way of a Board of Directors focusing on patient safety/patient outcomes in their decision making process.

#### **13.07.6.3 Care Quality Commission (CQC) Dinner – 19 June 2013**

The Chairman advised of the recent dinner he had attended at which Mr David Behan, Chief Executive of the CQC, had spoken. The Chairman provided a brief summary of the speech given by Mr Behan.

#### **13.07.6.4 Foundation Trust Network (FTN) Meeting – 20 June 2013**

The Chairman advised Mr Paul Bates, Director of Strategy for the CQC, had attended to present in the absence of Mr David Behan. The Chairman noted the key points of the presentation including the following:

- The CQC are not the enforcement body within the NHS that is the role of Monitor
- The Board of Directors are wholly responsible, within a Trust, for the care provided
- The importance of 'soft' intelligence/information was noted
- The move by the CQC to Ofsted type ratings

The Chairman noted other items discussed at the meeting included:

- The FTN review of the draft tariff for 2014/15
- The competitive environment within the New NHS
- Funding for winter pressures
- The new Care Bill
- Monitor's proposed review of the viability of small/medium sized acute Trusts
- The current position on the proposed merger of Royal Bournemouth & Christchurch Hospitals NHS Foundation Trust and Poole Hospital NHS Foundation Trust and the view of the Office of Fair Trading/Competition Commission
- Future membership of the FTN

#### **13.07.6.5 Health & Wellbeing Board - 25 June 2013**

The Chairman advised he had attended the Board meeting as an observer and provided feedback, noting in particular the East Cheshire Clinical Commissioning Group prospectus for 2013/14 had been presented. The Chairman advised work was also currently underway

on mapping dementia in the local health economy whilst it was also noted the Health & Wellbeing Board are keen to drive change and add value within the local health economy.

The Chairman noted that in discussion with Cllr Janet Clowes, Chair of the Health & Wellbeing Board, the Trust will be invited to be part of the discussions where health service provision within the local health economy which affected the Trust was being discussed.

Mrs Bullock advised an agreed programme of Non-Executive/Executive Director attendance at the East Cheshire Health & Wellbeing Board, Vale Royal Clinical Commissioning Group and South Cheshire Clinical Commissioning Group Board Meetings was now in place. Mrs Bullock advised she attended the West Cheshire & Chester Board meetings as a Member of the Board.

Mrs Bullock asked that the Director attending any of said Board meetings provide a brief summary of the discussion with same uploaded on Content Locker for information sharing purposes, with other Board members of the Trust.

#### **Resolved**

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

### **GOVERNORS ITEMS**

#### **13.07.7.1 Council of Governors Meeting – 25 July 2013**

The Chairman noted the date of the Council of Governors meeting of 25 July 2013 advising an Agenda Setting Meeting had taken place the previous week.

#### **13.07.7.2 Governor/NED Workshop**

The Chairman advised a workshop for Non-Executive Directors (NEDs) and Governors had been scheduled to take place immediately before the Council meeting and outlined the objectives of the workshop to include interaction between NEDs and Governors and also to consider the Governors' new duty under the Health & Social Care Act of holding NEDs individually and collectively to account.

#### **13.07.7.3 Governor Appointment (Non-Clinical Support Staff)**

The Chairman advised the election within the Staff Constituency to the Class of Non-Clinical Support Staff had closed at 5pm on Wednesday, 26 June 2013. The Chairman advised Mr Brian Walton had been re-elected for a further 3 year term.

#### **Resolved**

- **To note the report**

## **CHIEF EXECUTIVE'S REPORT**

### **13.07.8.1 Cheshire West and Chester Health and Wellbeing Board Meeting – 19 June 2013**

Mrs Bullock provided feedback from the Board Meeting noting a review of governance arrangements had taken place and in particular Membership of the Board. Mrs Bullock advised attendance by Chief Executive Officers had declined in recent months and noted she had contributed to the discussion advising she was keen to remain as a Member of the Board.

Mrs Bullock noted the Health & Wellbeing Strategy (2014-19) was currently being considered with the focus on a number of key items. Mrs Bullock advised a consultation exercise on the Strategy was to take place.

### **13.07.8.2 CCG Partnership Board Meeting**

Mrs Bullock advised the role of Programme Director was currently out to advertisement. Mrs Bullock advised the Trust would host the post, however, the postholder would report directly to Dr Andrew Wilson, Chair of South Cheshire Clinical Commissioning Group. Mrs Bullock advised it was anticipated interviews for the post would take place in August 2013.

Mrs Bullock advised a Pan-Cheshire bid, which recognised the different workstreams in the 3 local areas (East, West and Mid Cheshire), had been submitted for the Pioneer Pilot. Mrs Bullock advised a response to the application was not due to be received until September 2013.

Mrs Bullock advised a Partnership Board Away Day was scheduled to take place on 31 July 2013 which was to be facilitated by Mr David Fillingham, CEO of AQuA. Mrs Bullock outlined the proposed objectives for the day.

### **13.07.8.3 CCG Senior Teams Meeting**

Mrs Bullock advised she and Mr Oldham had attended the meeting. Mrs Bullock noted the specific items discussed including the Service Line Reviews completed by Deloitte, concerns re the fragmentation of care and in particular Outpatient Services. Mrs Bullock noted the Northwich Health Park concept was also discussed wherein Mrs Bullock advised she was to attend public engagement events hosted by Vale Royal Clinical Commissioning Group to raise awareness of the concept with the Public.

In relation to the concerns regarding the fragmentation of care, Mrs Bullock advised she and Mr Oldham were to approach local GPs to ascertain their requirements and discuss potential new models.

**13.07.8.4 Monitor Quality Governance Assessment**

Mrs Bullock presented the results of the assessment following the discussion at the Board Away Day of 17 June 2013. Mrs Bullock noted that the overall score had remained the same, however, there had been a deterioration in a small number of the sub-criteria particularly under 'Measurement'.

Mrs Bullock advised she would review the existing Action Plan, specifically in relation to the areas of deterioration, to establish what further action is required.

Mrs Bullock noted the Assessment would be completed again in December 2013 and proposed completion yearly thereafter to coincide with the Board Self Certification.

**13.07.8.5 Care Quality Commission – 8 Commandments**

Mrs Bullock referred to the Eight Commandments of Care recently released by the Care Quality Commission. Mrs Smith advised the Trust's response to the Commandments would be incorporated in the response to the Francis Report.

**13.07.8.6 Integrated Care Pioneer Bids**

Mrs Bullock noted she had spoken on this item under Item 13.07.8.2.

**13.07.8.7 Monitor review of the viability of small/medium sized acute Trusts**

Mrs Bullock advised Monitor were to complete a review of small/medium sized acute Trusts to gain a better understanding of whether there is an optimum size for an acute Trust. Mrs Bullock advised details of the proposed review were not yet available.

**13.07.8.8 Spending Review**

Mrs Bullock noted the detail of the Spending Review which had been released a number of days previously, noting in particular the impact on the NHS.

Mrs Bullock noted the Trust's strategy on service transformation and service integration is now more important than ever. Mr Dunn advised it was important the strategy and impending changes focused on quality and patient care and not solely on the financial aspects.

Dame Pat Bacon noted the cuts to the Local Authority Spending would also have an impact on health services, particularly social services.

In response to Mr Davis' enquiry as to whether reablement monies were recurrent, Mrs Bullock advised it was not usually the case.

**Resolved**



- **To note the Chief Executive's Report**
- **To complete the Quality Governance Assessment in December 2013 and annually thereafter**

## **MEDICAL DIRECTOR'S REPORT**

### **13.07.9.1 Serious Untoward Incidents and RIDDOR Events**

Dr Dodds advised there was one Serious Untoward Incident in June which has been reported as a Never Event. Dr Dodds provided brief detail of the event noting same was to under go a Level 2 Root Cause Analysis.

Dr Dodds advised of no RIDDOR events (Reporting of Injuries, Diseases and Dangerous Occurrences) for the period.

#### **Resolved**

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

## **QUALITY SAFETY & EXPERIENCE**

### **13.07.10.1 Patient Quality Safety & Experience Report**

Mrs Smith presented the report noting that the number of formal complaints received for the month of May was 15, a decrease of 12 on the previous month. Mrs Smith advised that of the 15 complaints received 10 related to episodes of care in 2013 and 5 in 2012. Mrs Smith noted the main trends for the complaints.

Mrs Smith advised there were 4 outstanding complaints currently being reviewed by the Ombudsman with no complaints referred in May. Mrs Smith advised one complaint previously referred to the Ombudsman had been closed, not upheld.

Mrs Smith noted there had been 14 complaints closed in month – 1 was upheld, 9 were partially upheld and 4 were not upheld.

Mrs Smith advised there had been 124 contacts made with the PALs office, 100 of which raised concerns. Mrs Smith detailed the key trends. Mrs Smith noted there had been 172 compliments received.

Mrs Smith presented the Legal Services Report for May noting the number of claims received. Mrs Smith noted there had been 4 formal inquests during May.

Discussion took place regarding the legal costs associated with claims received wherein it was noted the Trust was a member of the NHS Litigation Authority and an explanation of the claims process was given. Mrs Bullock advised the Trust does defend claims, however, if



there has been an error/valid concern the Trust will admit liability where appropriate.

In response to Mrs McNeil's enquiry as to whether the NHS Litigation Authority was the sole provider of indemnity cover for legal claims against the NHS, Mr Oldham advised NHS Litigation Authority was the most prominent organisation, however, additional organisations had now joined the market. Mr Oldham advised a paper would be presented to the Board of Directors in the autumn of 2013 regarding the provision of indemnity cover for the Trust.

Mrs Smith noted there had been 10 new postings on NHS Choices advising of the current star rating for Leighton Hospital and Victoria Infirmary.

Mrs Smith noted the Friends & Family Test results for May 2013 advising benchmarking data would be available later in the month and would be included in future Patient Safety Quality & Experience Reports.

Mrs Smith presented the Patient Safety report noted the slight increase in incidents of Patient Falls and Hospital Acquired Pressure Ulcers. Mrs Smith noted the Strategic Integrated Governance Committee continued to monitor Patient Falls whilst the QuEST Committee will continue to monitor the on-going work in relation to Pressure Ulcers. Mrs Smith advised of the Trust's RAMI (100), following the rebasing, noting Peer was 101. Mrs Smith advised the Trust was better than peer and whilst pleased, advised the Trust would not become complacent in its work to reduce mortality rates.

Dr Dodds advised there were a number of other mortality indicators published which showed the Trust as worse than peer.

#### **Resolved**

- **To note the report**
- **To receive a paper regarding the provision of indemnity cover for the Trust** *MO*

#### **13.07.10.2 Strategic Integrated Governance Committee – 10 June 2013**

Dr Dodds presented the minutes noting there were two items to be escalated to the Board of Directors.

Dr Dodds advised the Board Assurance Framework for 2013/14, which incorporated previous feedback received from the Board of Directors, had been presented for approval. Dr Dodds noted the Framework was approved subject to a number of minor amendments.

Dr Dodds advised the Committee had received and approved the Health & Safety at Work – Directors and Board Members Report. Dr Dodds noted there were no items of concern within the Report which required escalation to the Board of Directors.

The Chairman thanked Dr Dodds for presenting the minutes and noted the minutes reflected the robust discussions of the Committee.

**Resolved**

- **To note the minutes of 14 May 2013**

**13.07.10.3 Business Case for the Appointment of a 4th Colorectal Consultant**  
Mrs Frodsham presented the Business Case recommending Board of Directors approval for an investment of 4.5 PAs to accommodate one of the General Surgeons reducing hours to a part-time role, alongside the appointment of a 4<sup>th</sup> Colorectal Consultant to replace the substantive position. Mrs Frodsham noted the part-time Consultant would provide a flexible job plan to support the General Surgery service, as well as specialising in Endocrine surgery.

Mrs Frodsham provided detail of the Business Case noting in particular same reflected the move to more specialisation amongst Consultants away from general roles.

In response to Mrs McNeil's enquiry as to the availability of potential candidates, it was noted that as a Centre of Excellence for Colorectal Surgery, Consultants are keen to come and work at the Trust.

In response to the Chairman's enquiry as to any additional costs for the Clinical Commissioning Groups, it was noted it was not anticipated there would be any further costs as currently the Clinical Commissioning Groups were paying for waiting list initiatives.

Mrs Frodsham advise the Business Case specifically addressed the capacity shortfall in General Surgery with a more comprehensive review of future options to be undertaken at a later date.

It was agreed the investment was an investment in quality which would also have financial benefit.

**Resolved**

- **To approve the Business Case**

**OPERATIONAL DELIVERY**

**13.07.11.1 Performance & Finance Committee – 19 June 2013**

Mr Oldham presented the minutes and noted in detail those items to be raised to the Board of Directors, as follows:

- Theatre Utilisation
- Cancelled Operations – Mr Oldham advised the number of operations cancelled for non-clinical reasons had increased, however, the number of cancelled operations not rebooked within 28 days had reduced. Mr Oldham noted a review of the reasons for the cancellations in April May and June was to be completed with a report being presented to the July meeting.
- Sickness Absence/Bank and Agency Nursing spend. Mr Oldham advised a report had been received on the discrepancy around the performance of sickness absence and the use of bank and agency. Mr Oldham noted the Committee had discussed the report in detail and further pieces of work have been requested to include additional data. Mr Oldham advised a further report was due to be presented to the Performance & Finance Committee.
- Priorities for the first quarter.

#### **Resolved**

- **To note the minutes of 19 June 2013**

#### **13.07.11.2 Performance Report**

##### **Organisational Delivery**

Mrs Frodsham noted that year to date, there had been no instances of MRSA recorded whilst, for the period, there had been one case of *Clostridium difficile*.

Mrs Frodsham advised all the cancer targets had been achieved for the period noting, however, there had been a significant increase in the number of 'Breast Symptoms seen in 2 weeks' and in this regard the Trust had put a number of additional clinics in place.

Mrs Frodsham noted that, as planned, the Trust had failed the Admitted Pathway target, however, with the continued work in Ophthalmology it was anticipated the target would be attained for Quarter 2.

Mrs Frodsham advised the number of A&E attendances had reduced during May noting there was no apparent trend. Mrs Frodsham advised the Trust was seeing a decrease in the number of patients attending at A&E and subsequently being admitted as a result of the recent work in relation to assessments and front of house. In response to Mr Barnes' enquiry as to whether activity was profiled for the year, Mrs Frodsham noted it was. Mr Barnes enquired as to whether there was a risk of increased admissions over the winter period, Mrs Bullock advised there was however this had been profiled in the plan.

Mr Dunn noted the improved performance wherein Mrs Bullock acknowledged the work completed, however, expressed concerns regarding the increasing number of GP admissions.

In response to Mrs McNeil's enquiry as to whether there had been any change in the profile of GPs referring, Mrs Frodsham advised there had been no change.

Mrs Frodsham noted there had been slight improvement on the previous month in relation to Clinical Letters – Turnaround whilst there had been 2 Mixed Sex Accommodation Breaches in month.

Mrs Frodsham noted the Access Indicators and advised there should be no breaches, going forward, within adult audiology.

Mrs Frodsham detailed the productivity and activity indicators and in particular Length of Stay, the Bed Occupancy Rate, Cancelled Operations and Inpatient and Day Case Elective Spells.

### **Finance**

In relation to the financial position, Mrs Frodsham noted the overall financial risk rating of 3.

Mrs Frodsham advised income was better than plan in month with elective activity performing above plan. Mrs Frodsham noted Other Income is over plan. Mrs Frodsham detailed the figures in relation to pay noting key improvements seen in nursing costs in specific areas. Mrs Frodsham noted non-pay is over spent in month.

Mrs Frodsham advised the Cost Improvement Programme was below plan noting the reasons for same whilst also providing detail of the Capital Programme.

In relation to the Cost Improvement Programme, Mr Davis enquired as to actions taken where there is a Divisional deficit in month. Mrs Frodsham advised Divisions are requested to seek the saving through alternative achievable means to ensure savings are attained.

Mrs Frodsham advised Cash is less than expected and noted the reason for same.

Mr Oldham noted a concern in relation to the cash-flow. Mr Oldham advised the local Clinical Commissioning Groups were not authorised Safe Havens. Mr Oldham advised Safe Havens ensure confidential person identifiable information can be communicated safely and securely. Mr Oldham noted the procedures act as a safeguard for confidential information which enters or leaves an organisation, whether this is by fax, e-mail, post or other means. Mr Oldham

advised this meant that patient identifiable information could not be issued to the Clinical Commissioning Groups for verification and subsequent payment. Mr Oldham advised the Clinical Commissioning Groups have confirmed they will issue cash advances, if required, prior to the issue being resolved.

**Resolved**

- **To note the report**

**STRONG PROGRESSIVE FT**

**13.07.12.1 Audit Committee Minutes – 28 May 2013**

Mr Hopewell presented the minutes noting nothing further to add.

**Resolved**

- **To note the minutes of 28 May 2013**

**13.07.12.2 Trust Corporate Strategy**

Mrs Frodsham presented the final draft of the Trust Corporate Strategy. It was noted the Strategy document had been presented at the Board Away Day on 17 June 2013 and the final draft now presented incorporated the previous comments made.

Mrs Frodsham noted the strategic plan is underpinned by the Annual Plan, Strategic Objectives and other enabling strategies and advised of the key strategic principles.

In the discussion a number of additional minor amendments were suggested and it was

**Resolved**

- **To approve the final draft subject to the minor amendments**

**13.07.12.3 Principles of collaboration between Mid Cheshire Hospitals NHS Foundation Trust and University Hospital North Staffordshire (UHNS) 'Stronger Together' Programme**

*Mr Steve Allen, Director of Strategy at University Hospital North Staffordshire NHS Trust, joined the meeting at this point.*

Mrs Frodsham presented the concept paper noting the rationale for same. Mrs Frodsham detailed the guiding principles and behaviours and noted the governance arrangements would be considered and detailed on a service by service basis.

Mr Davis requested clarification as to whether Non-Executive Directors would be participative on the Collaboration Board whilst concerns regarding the importance of the Collaboration Board were also noted. Mrs Bullock advised she was to meet with Mr Hackett, Chief Executive

of UNHS (who had commenced in post that day) wherein discussion on the Membership and priorities of the Collaboration Board could be considered in detail.

Mrs Frodsham advised initial discussions had taken place in relation to a number of service developments with work progressing in Audiology and provided detail of same.

In response to the Chairman's enquiry as to whether the Clinical Commissioning Groups were supportive of the concept, Mrs Frodsham advised the Trust's local Commissioning Groups were supportive whilst Mr Allen advised the Commissioning Groups local to UHNS were also supportive.

It was noted the paper had also been discussed in some detail at the Board of Directors Away Day of 17 June 2013.

Mrs Frodsham noted Mr Oldham was to attend the Board of Directors meeting of University Hospital North Staffordshire later in the week to represent Mid Cheshire Hospitals NHS Foundation Trust.

In the discussion that followed it was

**Resolved**

- **To approve the concept paper**

*Mr Allen left the meeting at this point.*

**13.06.11.4 Working Capital Facility**

Mr Oldham request Board of Director approval to extend the term of the Trust's working capital facility by a 12 month period, with the inclusion of a break clause at 6 months. Mr Oldham advised the terms and conditions applicable to the extended term would be as those previously presented to the Board of Directors in July 2012 and are available for review through the Acting Trust Secretary.

Discussion took place regarding the necessity of having an overdraft facility wherein Mr Oldham noted under Monitor's draft Risk Assurance Framework working capital facilities would be discounted for calculation of the Financial Risk Rating. He suggested the final version of the Risk Assurance Framework be reviewed, once available, as regards the future requirement for a Working Capital Facility.

**Resolved**

- That the borrowing by the foundation Trust of up to the full amount of the facility on the terms and conditions set out in the facility Agreement is in the interests of and for the benefit of the foundation trust and is in the interests of and for the benefit of the members as a whole and that such terms and conditions be and are approved and accepted.
- That by entering into the facility, the foundation trust will not be in breach of its obligations pursuant to Section 44 of the National Health Services Act 2006, and that the foundation trust will not use the facility in such a way that will cause itself to breach its obligations, pursuant to Section 44 of the National Health Services Act 2006, or any condition of its licence.
- That Tracy Bullock and Mark Oldham are authorised to review and sign the facility agreement on behalf of the foundation trust in their capacity as Chief Executive and Director of Finance respectively to indicate acceptance of the terms and conditions.
- That the bank is authorised to act in all matters concerning the facility upon instruction from the foundation trust signed in accordance with the bank's mandate for any of the accounts of the foundation trust held with the bank current from time to time.

## **FIT FOR PURPOSE INFRASTRUCTURE**

### **13.07.13.1 Theatres ICU/SAL Project Board Minutes – 11 June 2013**

Mrs Frodsham presented the minutes, noting the establishment of the Task & Finish Group and the development of a written Commissioning Plan. Mr Davis noted the timeframe for the overlapping of the moves (into the new build and decanting out of the Treatment Centre) was very tight whilst noting there were approximately 500 members of staff that will require training on the new equipment.

In response to Mr Dunn's enquiry as to whether the build was on track for completion within the specified timeframe, Mrs Frodsham noted the build is on schedule both in terms of timeframes and costings.

In response to Mr Barnes' enquiry as to the proposed use of the existing Theatre space, Mrs Bullock advised work was underway to establish the most appropriate use of this space whilst noting there was no shortage of options. Mrs Bullock advised this was being picked up through the Executive Management Board and will be approved by the Infrastructure Development Committee.

#### **Resolved**

- **To note the minutes of 11 June 2013**

### **13.06.13 LEGAL ADVICE**



Mrs Bullock advised legal advice had been sought in relation to an information sharing agreement.

**Resolved**

- **To note the report**

- 13.06.14 VISITS OF ACCREDITATION, INSPECTION OR INVESTIGATION**  
Mrs Smith provided an update on the recent Cheshire East Local Authority Ofsted inspection for Safeguarding Children noting the outcome of same. Mrs Smith advised partner agencies including the Trust were not part of the inspection however an Improvement Board has been established to take forward the recommendations. Mrs Smith noted partner agencies, including the Trust, were mandated to sit on said Board.

**Resolved**

- **To note the report**

- 13.06.15 BOARD ACTIONS**  
After discussion, it was

**Resolved**

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

**ANY OTHER BUSINESS**

None noted.

**TIME, DATE AND PLACE OF FORTHCOMING MEETINGS**

A Board of Directors meeting, in public, at 9.30am on Monday, 5 August 2013

**Signed**

**Chairman**

**Date**