The Shrewsbury and Telford Hospital NHS Trust

FOUNDATION TRUST PROGRAMME BOARD

Thursday 26th January 2012

Lecture Theatre, Education Centre, PRH

M I N U T E S

Present: Mr John Davies (JD) Chair
         Mr Adam Cairns (AC) Chief Executive
         Mrs Sue Assar (SA) Non-Executive Director
         Dr Simon Walford (SW) Non-Executive Director
         Mr Barry Simms (BS) Non-Executive Director
         Mr Martin Beardwell (MB) Non-Executive Director
         Mr Dennis Jones (DJ) Non-Executive Director
         Dr Ashley Fraser (AF) Medical Director
         Mrs Julia Clarke (JC) Director of Compliance & Risk Management
         Mr Adrian Osborne (AO) Communications Director
         Mrs Vicky Morris (VM) Director of Quality and Safety/Chief Nurse
         Mrs Debbie Vogler (DV) Director of Strategy
         Mr Neil Nesbit (NN) Finance Director
         Miss Victoria Maher (VMa) Workforce Director
         Mr Tony Holt (TH) Programme Manager

120126-1 Apologies
Dr Peter Vernon (PV)

120126-2 Items for Approval
120126-2a Project Initiation Document (PID)
JC presented the PID and stated that all comments from members have been incorporated into the document (including 4.2.1; a statement which outlines the assurance process for FT documentation). SW was interested in the Quality Governance Assurance Framework tool (draft presented at December Board Development session). VM is currently is working on the tool which will be completed in March. There is also a process in place for Quality Impact Assessments for all CIP schemes, which is being co-ordinated through the Programme Management Office
- The PID was approved by the FT Programme Board

120126-2b Terms of Reference (ToR)
It was noted that BS surname would be corrected

It was agreed that the frequency of the meeting should be amended – normally to be scheduled after the Trust Board meetings and outputs will be monitored by the Trust Board.

- The ToR were approved by the FT Programme Board (pending above amendments)
120126-3 Strategic Stakeholder Group

120126-3a Terms of Reference (ToR)
AO gave an overview of the Community Stakeholders. The Strategic Stakeholder Forum (SSF) is intended to be a standing conference between local patient and partner organisations, and the Trust. It was proposed that the group meets at least quarterly. Discussions ensued regarding the most appropriate person to Chair this group - JD and AO agreed to discuss the matter outside of this meeting. MB asked clarification on the definition of a ‘consultative’ capacity of the group. AO stated this reflected a genuine intent for the group to be consultative. The forum will help to develop key relationships whilst we transform into a membership organisation. AO clarified that members of the Trust Board would be invited along with other Stakeholders to test ideas, run business as usual processes past them to make sure we ‘get it right’

SA suggested that there should be a NED representation on this group; this was agreed by the FT Programme Board.

ACTION: AO to propose/agree an appropriate Chair with JD and make agreed amendments to Strategic Stakeholder Forum ToR

120126-4 Workstream update reports
JC gave a brief overview of the purpose of the workstream updates. JD emphasised that Board development sessions would be used to work up approaches which would be assured through the relevant committee before being presented to the FT Programme Board.

BS requested that notes from the January Board development session and all subsequent sessions are circulated to all members.

ACTION: JC to circulate Board development session notes to NEDs

120126-4a Quality Governance (RAG rated GREEN)
VM reported that quality workshops have taken place in December 2011 and January 2012. VM stated that there is a further workshop in February aimed at specifically developing the Quality Improvement Strategy.

4b. Financial Governance (RAG rated AMBER)
NN informed members that the current schedule of work is critical to identifying ongoing issues and risk over the next months. The development of a financial strategy is ongoing and the outcomes/recommendations from the system report (Finnamore) may highlight significant issues which will need to be taken into account (ie strategy is emergent and therefore milestones within the current plan need a degree of flexibility).

120126-4c Business Development (RAG rated GREEN)
DV stated that the process around service development is iterative. All Corporate Directors have been asked to review the Deloitte market assessment and DV will circulate to NEDs. The current proposals for development potentially inform the QIPP¹ system plan (e.g. PCI).

¹ Quality, Innovation, Productivity, Prevention
Outcomes from recent Business Planning Cycle workshops will be included in IBP Chapter 5 by the end of February. DV referred to the agreement brokered for the Trust to trial a telehealth system which clearly defines a direction for the emerging QIPP system plan and inform central discussions with commissioners on telehealth. BS questioned how the approach would offer best value for money. DV suggested that the use of conferencing technology would reduce management downtime due to travel between SaTH sites together with the associated costs. Upon proof of concept, similar arrangements could then be rolled-out for the whole local health economy.

DV commented that Deloitte has been commissioned to put forward recommendations regarding the management capacity of the strategy team.

120126-4d Workforce and Organisational Development (RAG rated GREEN) VMa informed the group that development continues to create a Trust-wide picture of change based around reconfiguration and other emerging clinically led service proposals. This will be reflected in the next iteration of IBP Chapter 8 (Workforce). A SWOT analysis has been undertaken to inform workforce strategy, and staff engagement sessions are being planned to re-launch Listening into Action (LiA).

120126-4e Governance (RAG rated GREEN) JC stated that the Trust may need to consult with the public on FT process; JD queried the need for another public consultation. JC noted that although engagement with members had been ongoing, the last consultation exercise had been undertaken in January 2008. The decision would rest with the SHA.

**ACTION: JC to clarify the position on FT public consultation with the SHA**

120126-5 FT Membership update TH presented an update which outlined the current FT position, recent policy and guidance issued by Monitor and DH and membership update. The matter of membership recruitment was discussed. MB asked whether social networking had been considered. AO noted that discussions on this matter were already planned with the FT membership manager.

**ACTION: AO to meet with FT membership manager to discuss viability of social networking for membership recruitment/communication**

120126-6 Risk Log A draft risk log was presented by JC for discussion. AC asked for risk owners to consider the individual risks and score them appropriately for discussion at the next meeting.

SW queried the impact of any potential delay to the FBC delay. AC reiterated the Trust’s commitment to completing the FBC by the end of March

**ACTION: Risk owners to assess risks and advise JC of risk score – for discussion at next meeting**
120126-7 Lessons Learned
Paper for information. No comments were made by the FT Programme Board.

120126-8 Any Other Business
None

120126-9 Date of Next Meeting

Thursday 1st of March 2012, Meeting Room 1, Treatment Centre, RSH.