Presentation by Mrs Beck re Major Accident Decontamination, Facilities and Procedures

This agenda item was cancelled due to pressures on all staff in the Accident & Emergency Department. The Trust has received an enormous increase in medical emergencies over the weekend and the two hospital sites are full to capacity. The Trust Board heard how the staff have coped admirably with what is being reported as the worst winter pressure scenario the Trust has had to face.

Minutes of the Trust Board meeting held on Tuesday 14th January 2003

The Minutes of the Trust Board meeting held on Tuesday 14th January 2003 were agreed as a correct record.

Matters Arising

No matters were raised.

Membership of the Board

The Chairman announced that Mrs Jackson has tendered her resignation with the Trust at the end of March 2003. Mr Johnson stated that this would be more formally marked at the March Trust Board meeting, which is to be Mrs Jackson’s last.

The Zenith Project

Mr Bennett updated members on progress to date, notably:-

Energy Centre - Audit reassurances would be provided to the Strategic Health Authorities to enable the replacement Energy Centre Scheme to proceed.
Sterile Services/Decontamination – Trusts are being asked to network on this issue, it's been suggested that locally the network be with Preston. A meeting is being held with relevant managers to resolve the issue within the timeframe of the DTC becoming operational.

03/018  Clinical Governance

The Minutes of the Clinical Governance Committee held on the 22nd January 2003 will be brought to the next meeting of the Trust Board.

The Trust received a visit last week from the Intrathecal Chemotherapy Task Force at which we were told that our processes are within the requirements of the regulations for safety; Mr Harrison expects the Trust to receive a good report from the Task Force.

03/019  Shifting the Balance of Power

Mr Parry reported that the 4 new Directorates of Health and Social Care (DHSC) are being disbanded after only 8 months of operation. The DHSE North covered all of northern England and is based in Leeds. Their role was to oversee the development of health and social care.

The Chairman has received a verbal report that the Cardiothoracic Centre, Walton Neurology and the Royal Liverpool NHS Trusts

03/020  Local Development Planning and GP Referral Information

Mr Throp explained that the Local Development Planning process (LDP) replaces the annual Service and Financial Framework (SaFF) agreement. The LDP covers a 3 year period and introduces major changes to the way in which funds flow through the NHS. Initially 15 Healthcare Resource Groups (HRG’s) will be covered by the financial flow exercise with the intention to have HRG’s utilised as the main currency for purchasing all elective activity by 2005/06. Initially the LDP will seek to reward the Trust for all increased activity for such procedures.

Mr Throp tabled a paper listing issues requiring resolution prior to the 2003/2004 agreement.

The Chairman asked Mr Throp what was the expected shortfall at year end. Mr Throp stated that the Trust is at present looking at a 6% shortfall at year end; Mr Throp will report a more accurate forecast at the next meeting. The Trust will be required to submit a shortfall plan to the SHAs.

Out-Patient Appointments – The Board received the paper, previously received at the Finance Committee, which compared GP referrals for the first nine months of 2001 and 2002 by PCT. This information a 3% increase in referrals over that time in Southport and a 5.2% increase in Ormsk!rk referrals. Mrs Kirwan drew the Board’s attention to the fact that there had been a significant reduction in referrals from West Lancashire in the year 2001 which might affect the trend. The Board agreed to monitor the trend in referrals from both areas, which can have a major impact on the Trust’s ability to meet performance targets.

03/021  Financial Position – Trust’s Recovery Plan

In view of the expected shortfall at the end of this year to meet our financial targets, the Trust has been in discussions with the two PCTs and produced a joint Recovery Plan to bring the Trust back into balance over the next 3 years.

The plan is based upon:-
Modernising services – to review how and where clinical services are currently provided and to improve those services. For example, the three Trusts are currently reviewing whether the day hospitals currently located in the acute hospitals could be better provided in a community setting.

The phased closure of the SGI – a large part of the financial problem is the capital charge and the running costs of the SGI. The Trust has requested extra capital monies to build alternative accommodation on the SDGH site and will begin transferring off the SGI site in Autumn 2003.

Internal changes – all three organisations are examining possible changes to their organisations, the contracts they hold and the charges they make in order to release revenue without affecting levels of clinical performance.

A Special Team Brief is being issued to staff immediately after this Trust Board meeting. Some staff groups within this Trust will be asked if they wish to be considered for Early Voluntary Retirement or Voluntary Redundancy.

03/022 Clinical Reconfiguration

(a) Surgical Services – the general surgical moves took place last weekend. Mr Stephenson confirmed that as of 10th February 2003 all emergency general surgery will take place at SDGH. Any admissions for general surgery and urology from A&E will be undertaken at Southport.

(b) Medicine – Mr Gawthorne reported that Draft Number 4 of the Consultation Document is with the respected organisations for comment. Once comments have been received this document would be presented for approval at the March meeting of the Trust and PCT Board meetings, then that of the Strategic Health Authorities and possibly also that of the Minister would be required, before a period of public consultation commence.

Action: Mr P Gawthorne

(c) Obstetric, Gynaecology and Paediatric Services – A detailed Action Plan has been produced in readiness for the changes to commence during May 2003.

03/023 Improving Rewards for NHS Consultants

Members noted the document circulated with the Agenda. Mr Harrison has asked the Medical Staff Committee for its opinion on this latest proposal.

03/024 Performance Review – December 2002

Board members noted the progress made against the key performance targets outlined in the Report for December 2002.

03/025 Letter of Intent re Partnership with Aintree

Discussions are being held with Aintree Hospitals NHS Trust regarding potential collaboration of the provision of services ie vascular surgery, urology, dermatology, haematology and pathology. Mr Parry and Members of the Board thought this was a sensible approach, indeed a vascular alliance has already been formed with Preston Hospitals NHS Trust, which commenced on the 6th January 2003. Primary Care Trusts and Strategic Health Authorities will also be involved. Mr Parry will keep Members informed.
The Minutes of the Finance & Performance Committee held on the 27th January 2003 were noted.

The Minutes of the Charitable Funds Committee held on the 6th January 2003 were noted.

The Minutes of the Joint Project Board held on the 22nd January 2003 were noted.

_03/05 – Strategic Intent_ – following short discussion it was agreed that Mr Bennett and Mr Cheetham would bring to the March meeting of the Trust Board revised changes to the Terms and Conditions for the Joint Project Board.

**Action:** Mr Bennett and Mr Cheetham

The Minutes of the Trustees of the Charitable Fund held on the 14th January 2003 were noted.

The Minutes of the Modernisation Board held on the 21st January 2003 were noted.

The Minutes of the Information Strategy Board held on the 15th January 2003 were noted.

**Any Other Business**

(a) **Abolition of Community Health Councils**

The date for CHC abolition has been announced as the 1st September 2003. Members of the Trust Board wished to formally record its thanks to Southport and Formby CHC and West Lancashire CHC for their valued support throughout the years.

The Minutes of the Extraordinary Trust Board Meeting, held in private session on the 27th January 2003 were agreed as a correct record.