

Minutes of the Investment and Workforce Committee – Part 1
Held on 6th June 2012 1:00 – 3:00pm
In AD77, East Surrey Hospital, Redhill

Present	Richard Durban	RD	Non-Executive Director (Chair)
	Michael Wilson	MW	Chief Executive Officer
	Edward Cooke	EC	Non-Executive Director
	John Power	JP	Non-Executive Director
	Paul Simpson	PS	Chief Financial Officer
In attendance	Yvonne Parker	YP	Director of Workforce
	Justine Stratfold	JS	Head of Service Line Reporting (Minutes)

1	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>Apologies Ian Mackenzie</p> <p>Noted Joe Chadwick-Bell will no longer be attending the committee. Confirmation required as to who picks up elements Joe's responsibilities.</p>
2	<p>MINUTES AND ACTIONS OF THE PREVIOUS MEETING</p> <p><u>MINUTES – Part 1</u></p> <p>The minutes of the 2nd of May 2012 meeting Part 1 were approved as an accurate record of the meeting.</p> <p><u>ACTIONS</u></p> <p><u>Meeting 4/4/12</u></p> <p>Action 1 – A set of Workforce KPI's to be developed and reported appropriately YP / PS</p> <p>Action 2 – Comments from the discussion of the workforce plan to be incorporated in the document and presented to the I&W committee meeting in June YP</p> <p>Action 3 – Estates Strategy to be tabled at the July I&W Committee meeting IM</p>

Meeting 2/5/212

Action 4: The Training plan to be split between the reporting of last year 2011-12 and the plan for the new year 2012-13. YP

Action 5: The Training Plan to be re tabled at the July I&W committee once the results of the TNA and training funding is known. YP

3 WORKFORCE

Workforce Plan:

The Paper had not materially changed since April and the paper was therefore not taken. It was agreed to progress this in two ways:

- a) Put together a workforce action plan to deal with recruitment/ retention / temporary staffing / sickness as well as tie back to KPIs
- b) The full workforce plan to revised and ready by Q2 to tie in with the integrated business plan.

ACTION : Workforce Action plan including updated KPI's to be tabled for the July I&W committee YP

ACTION : Workforce Plan to be revised as part of the IBP YP

Clinical WTE

Assurance was sought by the committee as to the appropriateness of the clinical staffing numbers within the organization. PS outlined the basis for the determination of funded establishments as follows:

Consultants – A job planning process is being completed with the help of KPMG. This will look at the demands and activity within the trust to determine the number of whole time equivalents required. This is an annual process.

Junior Doctors – This is determined by the junior doctor rotas and must be EWTD compliant. The rotas also determine the levels of banding paid to the doctors. PS noted that there can be issues associated with Deanery supply and covering gaps within the rotas this creates.

Nurses – Wards are budgeted under the HURST model which looks at factors such as the acuity of the patient, number of beds etc. PS advised that the model is optional for use in the NHS and not mandatory but is a well recognised tool for determining establishment requirements.

Midwives – RCM guidance advises this by looking at the midwife-birth ratio. This is

specific to individual organisations.

Other Nurses – the budgeting of specialist nurses this is more general based on the needs of the services. Outpatient nurses are linked into the job planning process.

EC queried how the McKinsey review ties in with the nursing numbers when the HURST model is in place. PS explained that the gains associated with the review were more focused on the temporary staffing bill as well as productivity gains associated with what the organization does.

RD requested that the clinical numbers, as explained, be articulated in a document and sent to the Safety and Quality committee so that further assurance can be gained from the Chief Medical Office and the Chief Nurse.

ACTION – PS to produce a table outlining staff group / WTE / Vacancies etc to go to the Safety and Quality committee PS

It was agreed that the Safety and Quality Committee would review the savings plan and obtain assurance from the Chief Nurse and Chief Medical Officer surrounding schemes associated with their staff groups.

Recruitment/ Retention / Staff Survey demonstrate that there is a need to focus on cultural change. This is a key element in reducing the temporary staffing bill. It was highlighted that the results of the staff survey reflected that comparatively SASH did not perform substantially worse than the neighbouring organisations. Behavioural change and OD would be the subject of the next board seminar.

4 CAPITAL PROGRAMME AND ESTATES

Capital Report : Month 2

All capital projects proceed according to plan.

Unscheduled Care – Drainage problems has caused delays but the contractor has made up the time and this should complete on the overall timetable.

Paediatrics – commence 25th June 2012 to finish in October 2012

Main Entrance – The first part of the build will be completed in August

RD queried as to whether the budget is £15.3M or £14.8M as mentioned in the papers. PS to check this.

ACTION: PS to confirm the overall capital budget figure PS

Update on Theatre Refurbishment

There are practical problems with the closing of 2 theatres whilst the work is carried out

as set out originally. These include loss of revenue, noise, disruption etc. Therefore 2 alternative options are being explored:

Option 1 – 4 Modular theatres which will be substantially more expensive (£4m)

Option 2 – 2 Modular theatres and 2 refit

PS confirmed that whichever option is pursued the work will slip into the next financial year.

MW stated that the organization needs to keep the current capacity open to meet its revenue targets. Should an alternative option be used the current theatres would be closed down when the new ones open. The released space could have a number of uses for example extending recovery area or day surgery.

ACTION : An addendum to theatres business case to be tabled at the I&W July committee meeting PS

Planning permission has been submitted for the Chemotherapy/Podiatry project. PCT have given their approval and the business case has been submitted to the SHA. This project is just waiting for planning permission to proceed,

Respiratory Unit project – still awaiting decision from St Thomas'

Training Centre - £313k has been received from the deanery for this work

5 **BUSINESS PLANNING**

A letter has been received from David Flory which confirms the outcome of the meeting held with MW/PS:

- The organisation will continue with its plan to continue as a standalone Trust.
- An integrated business plan to be completed and submitted after Q2 accounts complete
- The financials will need to demonstrate, delivery of the financial plan, delivery of the savings plan and performance against the FT metrics
- Service Performance will be analysed in terms of the Performance Framework
- A Long Term Financial Model (LTFM) will need to be provided

The organization will need to agree with the SHA the direction of the 1st draft of the Integrated Business Plan:

- Overall Strategy as a Trust
- Financial/Activity Plan

RD queried the role of the committee in obtaining assurance over the delivery of the plan. It was confirmed that a document will be produced detailing the strategies and which the various components should be reported to I&W.

ACTION: A proposal on how to best provide assurance over the delivery of the

	<p>TFA/FT plan to come to the July I&WC PS</p> <p><u>Business Plan</u></p> <p>Submitted for approval to the I&W committee.</p> <p>PS introduced the document as an outward facing document intended for the public. It is focused on immediate priorities, the overall corporate objective, summary of strategies, workforce and financial information.</p> <p>A debate was had over the balance between the individual sections of the report.</p> <p>The business plan was approved subject to the following amendments:</p> <ul style="list-style-type: none"> - Inclusion of an index - Savings plan to be updated - Version number and date
<p>6</p>	<p>ANY OTHER BUSINESS</p> <p>None noted</p>
<p>7</p>	<p>DATE OF NEXT MEETING</p> <p>Next meeting is scheduled for 4th July 2012 1pm-3pm AD77.</p>