

Trust Board

Date: 25 May 2017

Time: 1.30 pm

Venue: Rooms 1 and 2, level 1, New Mill

MINUTES

Present:	<p>Michael Smith Nicola Lees Rob Vincent Sue Butler Zulfi Hussain Nadira Mirza Liz Romaniak Sandra Knight Andy McElligott Debra Gilderdale</p>	<p>Trust Chair Chief Executive Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Director of Finance, Contracting & Facilities Director of HR & OD Medical Director Director of Nursing and Operations</p>
In Attendance:	<p>Paul Hogg Stella Jackson Jacqueline Edwards Colin Perry</p>	<p>Trust Secretary Deputy Trust Secretary Ward Manager, Dementia Assessment Unit (item 4) Public Governor, Bradford West</p>

One member of the trust

Item	
3145	<p>Welcome and Apologies for Absence</p> <p>The Chair welcomed everyone to the meeting. He referred to the tragic terrorist attack which occurred in Manchester on Monday, 22 May and reported the Board had observed a minute's silence at 11.00 am in respect of those affected. Apologies were received from Mr Banks.</p>
3146	<p>Declarations of Interest</p> <p>There were no declarations of interest.</p>

Chair: Michael Smith
Chief Executive: Nicola Lees

3147	<p>Issues Received from the Public</p> <p>There were no issues from the public.</p>
3148	<p>Patient and Carer Experiences</p> <p>This month's patient story was told via a recorded interview between Jacqui Edwards and Mrs Smith (not her real name). Mrs Smith was a carer for her husband who had been a service user of the Dementia Assessment Unit (DAU) for approximately six months prior to moving to a nursing home.</p> <p>Mrs Smith had visited her husband at the DAU every day. She spoke highly of the dedication of the staff, the cleanliness of the unit and about the quality of the food. She also welcomed 'John's Campaign' (which meant she was able to visit the ward at a time to suit her) and the Trust's Relocation Travel Cost scheme. Mrs Smith did, however, have concerns about staffing levels and the impact this had on the amount of time staff were able to spend caring for individual service users. She was relieved to discover that from April 2017, funding had been received for additional staffing. Mrs Smith also believed that a regular toileting routine should be introduced for those service users unable to recognise and communicate their toileting needs.</p> <p>During ensuring discussion, the following key points were highlighted:</p> <ul style="list-style-type: none"> • The lack of specialist nursing provision within the local area had been an issue; • A number of initiatives had been introduced which enabled carers to provide their views about the service; • The Relocation Travel Cost scheme was a five year scheme which had been introduced when the service relocated from Airedale NHS Foundation Trust premises to the Lynfield Mount site. Those people who had difficulty utilising public transport to get to Lynfield Mount were able to access the scheme; • The skill mix on the ward would be changing in order to improve the mix of expertise; and • Work was underway to obtain recognition of the DAU as a centre for excellence. <p>Ms Mirza requested details about the cultural backgrounds of those people accessing the service and queried whether the service was accessible to the diverse communities served by the Trust. Action: Director of Nursing and Operations to forward details to Ms Mirza.</p> <p>Trust Board thanked Jacqui for attending the meeting and Mrs Smith for sharing her story.</p>

3149	<p>Minutes of the Meeting held on 27 April 2017</p> <p>The minutes of the meeting held on 25 January 2017 were agreed as a true and accurate record subject to the following amendment:</p> <ul style="list-style-type: none"> Item 3131: Quality and Safety Feedback from Board members – the second bullet point being amended to read ‘Dr Butler had attended <i>an</i> NHS England commissioned event.....’.
3150	<p>Matters Arising from the Meeting held on 27 April 2017</p> <p><u>Actions</u></p> <ul style="list-style-type: none"> 23/2/17-4: Integrated Performance Report – January 2017 and 30/3/17-2: Matters Arising – Dr Butler reported these actions had been superseded by the agreement to hold an Extraordinary Quality and Safety Committee meeting to review four serious untoward incidents; 30/3/17-1: Patient and Carer Experiences – Mrs Gilderdale informed Board members the Service Manager within Acute and Community services was managing the action relating to the obtaining of information from Glen about how the Crisis Support service could be improved; 27/4/17-4: Review of Patient and Carer Stories – Mr Hogg reported that both he and Ms Lees had recently discussed the use of patient stories at the Annual Members Meeting. The Chair added the Staff Governors had requested that the Trust also have a number of stands at the event displaying some of the good practice taking place within the Trust; and 27/4/17-5: Integrated Performance Report: March 2017 Data – Mrs Gilderdale reported 4.6 whole time equivalent staff had left the Learning Disabilities team during the last 12 months and highlighted that labour turnover data for the team would feature in IPR reports from June 2017 onwards. She also reported the ratio of staff to clients within the Child and Adolescent Mental Health Services team was a national issue.
3151	<p>Chair’s Announcements</p> <p>The Chair reported:</p> <ul style="list-style-type: none"> The Council of Governors had met on 11 May and had received bite-size training about the Bradford and Craven Mental Wellbeing Strategy. Governors had also considered how they might contribute to delivery of the Trust’s two year operational plan. Action: Deputy Trust Secretary to circulate to Board members the notes taken during the facilitated discussion. The meeting had been observed by Chris Storton, CQC Inspector, who had provided positive feedback about the Governors; He had attended the Nurse Celebration event on 12 May. The event had been a huge success and a number of excellent presentations had been

	<p>given;</p> <ul style="list-style-type: none"> • He had also attended the Bradford and Airedale Mental Health Advocacy Group meeting on 12 May where there had been an interesting discussion about self-advocacy; • Both he and Ms Lees had met with Cllr Peter Box, the Leader of Wakefield Council, and had discussed a number of matters including devolution on a West Yorkshire basis; • He had attended the Champions Show the Way Volunteering Celebration on 24 May. Approximately 1,000 people were being referred to the service each year and 33 people were undertaking volunteering duties in the Trust's services. The volunteers were from a very diverse background; and • The recruitment process for the Non-Executive Director to replace Ms Mirza would commence on 30 May. The Trust would be running two open-house meetings action: Chair to circulate details to the Council of Governors Nominations Committee and a wide range of communication tools and media would be utilised to advertise the vacancy. <p>Trust Board noted the Chair's report.</p>
3152	<p>Chief Executive's Report</p> <p>The Chief Executive presented a report which summarised key issues taking place across the health economy and contained links to more detailed information. Ms Lees highlighted the following:</p> <ul style="list-style-type: none"> • Nurse Celebration event – the police had given a presentation about the Police Special Officers. Following the presentation, a number of police officers had contacted the Trust to express their interest in taking part in the initiative. There had also been a presentation about the support provided by the Trust to Romania. This had resulted in the sharing of best practice and in Romania healthcare professionals adopting the 'hello my name is' initiative; • Manager graduates from prestigious Nye Bevan leadership programme – Trust Secretary, Paul Hogg, had graduated from this programme which was designed to develop NHS leaders of the future; • NHS Cyber Attack – the report contained a link to the BBC interview with Health Secretary, Jeremy Hunt, about the recent NHS cyber-attack. The Trust's emails and Connect, which had been affected by the attack, were restored on 23 May. The clinical information systems had not been affected. The Trust had commissioned an external review of the incident to determine whether any lessons could be learnt; • Health Business: Mental Health Services – the Trust had been ranked fifth, for its focus on the whole person approach, in the league of mental health trusts; and • Caring to Change – Board members were encouraged to read this document which highlighted how compassionate leadership could stimulate innovation

	<p>in health care. Mr Hogg added Chief Executives and Directors from healthcare organisations often spoke at King’s Fund events and would investigate the feasibility of Trust Board members being allocated a speaking slot at a future event.</p> <p>Trust Board noted the Chief Executive’s report.</p>
3153	<p>Quality and Safety Feedback from Board Members</p> <p>The Chair invited Board members to highlight any insights gleaned during visits to services:</p> <ul style="list-style-type: none"> • Dr Butler and Mrs Romaniak had met with staff from the Wakefield Children’s services. The team was very dedicated and was making effective use of social media. They highlighted a small number of issues relating to IT and premises and these were being reviewed. The team was undertaking some innovative work which would benefit from being shared more widely; • The Chair and Ms Lees had visited the Health Visitors based at Sandal Castle Medical Centre, Wakefield. The team had welcomed the visit and outlined the importance of its best practice initiatives being recognised and shared. A small number of IT teething issues were being experienced and responded to. Despite these issues, the team had been very complimentary about the support provided by the IT staff. The team reported a 50% increase in caseload due to the high number of new houses being built in the Wakefield area. Cllr Box had subsequently confirmed housing would increase further. Board members recognised the potential impact new builds had on service provision and considered it important that the Trust obtained intelligence relating to new build schemes within the Trust’s footprint; • Mr Hogg had visited the Early Intervention in Psychosis service and the skill of clinicians at obtaining information from service users with very complex needs had been evident. Mr Hogg had also accompanied a District Nurse on a visit to a patient with a leg ulcer. The nurse had been very skilled and empathetic and had welcomed Board members visiting the service; and • Dr Butler and Mrs Gilderdale had visited the District Nursing Out of Hours team and had been impressed with the way in which the team supported one another. The team had highlighted two issues: one related to tethering data on SIM cards and another related to a lack of private space for private meetings. <p>Trust Board noted the information received</p>
3154	<p>Assurance Reports from Committee Chairs</p> <p>A paper was presented containing key points discussed at the Quality and Safety Committee meeting held on 5 May 2017. The assurance report from the Audit Committee meeting held on 24 May was circulated at the meeting and would be referred to when considering the Annual Report and Accounts and Quality Account</p>

	<p>at agenda item 13.</p> <p>Dr Butler provided a verbal update from the Extraordinary Quality and Safety Committee meeting held on 11 May 2017 which focussed on four serious untoward incidents (SUIs) that had occurred during the last three years. The incidents had tended to occur when there was a combination of increased activity on the ward and capacity constraints. A review of the SUI action plans had revealed these focussed on outputs rather than outcomes. It was agreed that all future SUI action plans would be reviewed by the Committee. The Committee had also highlighted the high plethora of action plans in place and believed it appropriate that future Committee-related actions be prioritised for staff. Ms Lees added the Executive Management Team was trying to deter staff from producing generic action plans in order to reduce the number of plans in place.</p> <p>Positive feedback had been received from Commissioners about the quality of the SUI reports.</p> <p>Dr McElligott added that the primary reason for holding the Extraordinary meeting had been to consider whether there had been any underlying systemic issues that connected the four deaths. The Committee had been assured that there was no evidence to suggest this was the case.</p> <p>Trust Board noted the points highlighted from the Committee meetings.</p>
<p>3155</p>	<p>CQC Registration Compliance</p> <p>During discussion about the paper, the following key points were considered:</p> <ul style="list-style-type: none"> • Mrs Romaniak reported the Trust Board Task and Finish Group had highlighted the importance of Board and Committee members considering whether or not the detail within Board and Committee papers provided sufficient evidence to support CQC compliance requirements; and • In response to a comment from Dr Butler, Dr McElligott reported the CQC inspection results, regulatory reports and committee reports supported the self-assessment ratings. Ms Lees reported there were a number of additional initiatives in train which also supported the self-assessment ratings. These included staff focus groups and peer reviews. <p>Trust Board:</p> <ul style="list-style-type: none"> • Recognised the improved process and continuing work to provide assurances against the CQC requirements; and • Confirmed it was sufficiently assured with performance against the five key questions as reflected in the report.

<p>3156</p>	<p>Annual Report by the Freedom to Speak Up Guardian</p> <p>The Chair brought this item forward as the paper author, Mrs Hussain, had joined the meeting. Mrs Hussain then provided a broad overview about the Freedom to Speak Up Guardian (FTSUG) role and the work undertaken since her appointment.</p> <p>Ms Mirza (FTSUG NED lead) commended Mrs Hussain on the excellent work she had done in establishing the role within the organisation. Ms Lees outlined the importance of the Guardian responding in a robust way to concerns raised and sought assurance about the effectiveness of this process. In response, Mrs Hussain reported she had recently devised a form which would be given to managers for completion and return to the Chief Executive. Additionally, evidence of action completed by the Managers would be sought. Those people that had raised the concern would be written to within three months of raising the concern with a view to determining whether they had recognised any changes and whether they had been treated fairly. Ms Lees noted staff had contacted the Guardian about staffing resource related issues and queried why such concerns were not being raised elsewhere. In response, Mrs Gilderdale reported these concerns were being highlighted during ‘what matters to you’ discussions and action had been implemented where possible to resolve the issues. Resource concerns had also been highlighted in a number of serious incident reports. Mrs Knight believed culture played a key part in staff feeling able to raise concerns with their managers. This was evidenced by the recent staff survey results where the percentage of people who considered they received adequate support from their line manager was lower than a number of other trusts. Mrs Knight also outlined the importance of the role in challenging the Board.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the reported cases for 2016/17; • Agreed to receive annual reports on FTSUG activity, noting that the Quality and Safety Committee would receive a report every six months; and • Noted the FTSUG objectives for 2017/18.
<p>3157</p>	<p>a) Integrated Performance Report: April 2017 – Exception Reporting</p> <p>The report assessed progress against the Trust’s key targets and performance indicators as at April 2017 and provided exception reports on areas that were currently off trajectory. The following key areas were discussed or noted during the meeting:</p> <ul style="list-style-type: none"> • Sickness absence levels in mental health inpatient wards had steadily reduced from 8.1% in February and 7.4% in March to 4.7% in April. The downward trend reflected action taken by HR Business Partners and service

managers working closely together to address this issue. The Chair also believed sickness absence levels were traditionally lower at this time of year;

- Information Governance (IG) training compliance had reduced to 90.45% and would continue to be closely monitored at the business unit and corporate services performance meetings;
- There had been an increase in the number of serious incidents during April. A paper regarding serious incidents would be considered at the June Private Board meeting;
- The ratio of clients to staff within the School Nursing team was 2722:1 against a recommended ratio of 2200:1. The current performance reflected annual leave taken in April;
- Accident and Emergency waiting times performance, whilst still below trajectory, were improving. Service users of the Safe Haven and Sanctuary were being asked whether their attendance at these services had prevented them attending A&E. The results were awaited and, once available, would either be circulated to Board members or incorporated into the June IPR.
Action: Director of Nursing and Operations to circulate the data. Additionally, it had recently come to light that a presentation had been produced containing information about the impact of the Trust's crisis services on A&E attendance. **Director of Finance, Contracting and Facilities to circulate; and**
- Key financial measures were rated green with the exception of the Cost Improvement Programme (CIPs) measure which was rated amber due to CIPs being £29k behind plan at month one. A number of CIP schemes were profiled to deliver in the last six months of the year. There had also been a small number of breaches for medical locum and price caps in month one.

Trust Board noted the content of the dashboard and the issues highlighted by Board members.

b) Review of the Board Integrated Performance Report (IPR)

The annual review of the format and content of the IPR had taken place and the recommended amendments to the format and content were detailed in the paper at agenda item 11b. Two initial changes had been incorporated into the May report. These related to the branding used and the streamlining of finance slides. Board members agreed to also include a 'Well-Led' or 'Board Assurance' section within the report. This would contain a monthly Committee Chair slide and a quarterly Board walkabouts slide. As the Board would not be holding Public Board meetings in the months of August and December, it was agreed that the Quality and Strategy items scheduled for those months would be reallocated to the following months report by exception.

Trust Board approved changes to the format and content of the Board Integrated Performance Report.

	<p>c) Board Integrated Performance Report: Proposed Structure and Content</p> <p>Mr Hogg welcomed the new slides relating to mortality data and adult physical health outstanding metrics. Mr Vincent believed the Board should also focus its attention on the changing demand on services. In response, Ms Lees reported this would be the focus of a Board Development Day. Action: Chair/Trust Secretary to programme into the BDD calendar.</p> <p>Trust Board noted the proposed structure and content of future performance reports.</p>
3158	<p>Change Programme Board – Six Month Update</p> <p>During consideration of the paper, Mr Vincent sought assurance that the projects detailed at section 4 were going to be pursued with sufficient rigour and speed. He considered it appropriate to highlight which projects would span a number of years, particularly where the financial impact of those projects would not be fully realised during 2017/18. Ms Lees reported the Finance, Business and Investment Committee (FBIC) would receive a paper in July which provided further details about each of the projects. These would also be quality impact assessed before the FBIC meeting.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Noted the CIPs delivered and shortfall including the non-delivery of the Red and Amber rated projects in 2016/17; • Noted the outlined CIP plan for 2017/18 and the work being undertaken to achieve this; • Noted the yet to be scoped projects with no delivery plan/quality impact assessment; and • Endorsed the revised reporting format template with the addition of a detailed six monthly report on progress at each November/May Trust Board meeting.
3159	<p>Annual Report and Accounts and Quality Report</p> <p>The Chair referred Board members to the assurance report from the Audit Committee meeting held on 24 May 2017. This highlighted assurances received by the Committee and recommended that the Board approve the Annual Report and Accounts and the Quality Account for 2016/17.</p> <p>Trust Board:</p> <ul style="list-style-type: none"> • Approved the Annual Report and Accounts for 2016/17;

	<ul style="list-style-type: none"> • Confirmed that the Quality Report presented an accurate reflection of quality across the Trust; and • Ratified the Quality Report content (pending any minor additions/ amendments) in readiness for publication by 30 June 2017.
3160	<p>Annual Plan Statements</p> <p>A paper was presented containing the first of two Annual Plan self-certification statements required by NHS Improvement. The statement presented related to the Trust's provider licence.</p> <p>Trust Board self-certified the statements.</p>
3161	<p>Committee Annual Reports for 2016/17</p> <p>A paper was considered containing the approved Annual Reports from the Mental Health Legislation Committee, Quality and Safety Committee and the Finance, Business and Investment Committee.</p> <p>Trust Board noted the Committee Annual Reports.</p>
3162	<p>Annual Report by the Senior Information Risk Owner (SIRO)</p> <p>A paper was considered containing the Annual Report by the SIRO. The report covered the period 1 April 2016 to 31 March 2017.</p> <p>Trust Board noted:</p> <ul style="list-style-type: none"> • The assurances provided in the paper; and • The proposed information governance objectives for 2017/18.
3163	<p>Board Business Cycle</p> <p>The Trust Secretary introduced the Board Business Cycle which outlined those items scheduled for future meetings. The following additions were agreed during the meeting:</p> <ul style="list-style-type: none"> • Bradford Provider Alliance Memorandum of Understanding (June); • External Review of Cyber Attack (July Private Board); • System Leadership (July Trust Board Away-day); and • Staff Survey Results Update (November). <p>Trust Board noted the items contained within the Board work programme.</p>

3164	<p>Reporting on the Use of the Trust Seal</p> <p>A paper was considered providing details about the use of the Trust Seal.</p> <p>Trust Board noted the Register of Sealings.</p>
3165	<p>Committee and Council of Governor Approved Minutes</p> <p>A paper was presented containing approved minutes from the following meetings:</p> <ul style="list-style-type: none"> • Council of Governors meeting, 9 February 2017; • Quality and Safety Committee meeting, 17 March 2017; and • Finance, Business and Investment Committee meeting, 29 March 2017. <p>Trust Board noted the content of the Council of Governors and Committee approved minutes.</p>
3166	<p>Any Other Business</p> <p>There were no other items of business.</p>
3168	<p>Date and Time of the next Meeting</p> <p>The next meeting will be held at 1.30 pm on Thursday, 29 June 2017 in meetings rooms 1 and 2, New Mill, Victoria Road, Saltaire, Shipley.</p> <p>The meeting concluded at 4.10 pm.</p>

**Trust Board (Public)
25 May 2017**

ACTIONS

Ref No	Actions requested	Timescale	Progress
23/2/17-1	<u>Chief Executive's Report</u> Chair to explore the potential of Bradford University students supporting the Trust with a piece of work relating to the development of relationships with the Voluntary and Community Services across West Yorkshire.	One month	Volunteering lead contacted. Further meeting to be arranged to explore further.
23/2/17-4	<u>Integrated Performance Report – January 2017 Data</u> Dr Butler to arrange for the deep dive into serious incidents to also focus on reporting timescales.	Two weeks	Serious incidents reviewed at the Extraordinary Quality and Safety Committee meeting held on 11/5/17
30/3/17-1	<u>Patient and Carer Experience</u> Director of Nursing and Operations to: determine from Glen how the Crisis Support service could be improved.	April 2017	Feedback being sought via the Service Manager for Acute and Community Services
30/3/17-2	<u>Matters Arising</u> Dr Butler to ensure the May Quality and Safety Committee report incorporates an update about the deep dive into serious incidents.	May Trust Board	Serious incidents reviewed at the Extraordinary Quality and Safety Committee meeting held on 11/5/17
27/4/17-3	<u>Chief Executive's Report</u> Director of Operations and Nursing to arrange for a summary of the Public Satisfaction report to be forwarded to the	Two months	Received on 12/6/17

	Strategic Reference Group for consideration. Trust Secretary to timetable an update paper into the Board work programme.	Two months	Scheduled for July 2017
27/4/17-4	<u>Review of Patient and Carer Stories</u> Trust Secretary/Deputy Trust Secretary to determine how patient and carer stories might be shared via the Annual Members' Meeting	June 2017	Ideas discussed with the Chief Executive
27/4/17-5	<u>Integrated Performance Report: March 2017 Data</u> Director of Nursing and Operations to i) ensure future reports contain labour turnover data for the Learning Disabilities team; and ii) to determine whether the ratio of staff to clients within the Child and Adolescent Mental Health Team was a national issue.	May 2017 May 2017	Reported as completed at the May 2017 Trust Board meeting
25/5/17-1	<u>Patient and Carer Experiences</u> Director of Nursing and Operations to: i) forward to Ms Mirza details about the cultural backgrounds of those people accessing the Dementia Assessment Unit service and, ii) to advise Ms Mirza whether the service is accessible to all communities.	One week	Details forwarded via email on 6/6/17. Confirmation also provided that the service was accessible to all communities
25/5/17-2	<u>Chair's Announcements</u> Deputy Trust Secretary to circulate to Board members the notes from the facilitated discussions with Governors relating to their participation in the delivery of the two year operational plan. Chair to provide Council of Governor Nomination Committee members with details of the Non-Executive Director open house meetings.	One week One week	Circulated via email on 1/6/17 Provided to all Governors via 26/5/17 Friday Folder

<p>25/5/17-3</p>	<p><u>Integrated Performance Report: April 2017 – Exception Reporting</u></p> <p>Director of Nursing and Operations to provide Board members with the results of the research into the impact the Sanctuary and Safe Haven are having on Accident and Emergency services.</p> <p>Director of Finance, Contracting and Facilities to circulate the presentation relating to the Trust’s crisis services and their impact on A&E.</p> <p>Chair/Trust Secretary to programme consideration of the changing demand on services into the Board Development programme.</p>	<p>Once available or via the June IPR</p> <p>Two weeks</p> <p>One month</p>	<p>Details circulated</p> <p>Circulated on 8/6/17</p>
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