EXECUTIVE SUMMARY:

Attached are the minutes of the Trust Board meeting held on 27 April 2017.

RECOMMENDATION:

- The Board is asked to approve the minutes.
Present: Michael Smith Chair
Nicola Lees Chief Executive
David Banks Non-Executive Director
Sue Butler Non-Executive Director
Rob Vincent Non-Executive Director
Zulfi Hussain Non-Executive Director
Nadira Mirza Non-Executive Director
Debra Gilderdale Director of Nursing and Operations
Andy McElligott Medical Director
Liz Romaniak Director of Finance, Contracting and Estates
Sandra Knight Director of Human Resources and Organisational Development

In attendance: Paul Hogg Trust Secretary
Stella Jackson Deputy Trust Secretary
Andrew Birkenshaw Health Facilitation Nurse
Colin Perry Public Governor, Bradford West
Ranjit Arora Appointed Governor, Bradford Assembly
Christopher Storton Care Quality Commission

Two members of the Trust

3123 WELCOME AND APOLOGIES
The Chair welcomed everyone to the meeting. There were no apologies.

3124 DECLARATIONS OF INTEREST
There were no declarations of interests.

3125 ISSUES RECEIVED FROM THE PUBLIC
There were no issues from the public.
This month’s patient story was told by Andrew Birkenshaw, through the use of a powerpoint presentation, and was about Noel, a 49 year old man with learning disabilities, autism and epilepsy. Noel first came into contact with the Trust’s Health Facilitation team when he was diagnosed with cancer in his bowel and his bladder and needed an operation within four weeks of diagnosis. Due to his autism, Noel found any changes difficult and especially changes to his body. He had a history of not tolerating interventions well and of pulling out tubes and cannulas. The Health Facilitation team worked closely with a number of different health professionals (in total, 15 professionals from five organisations) to facilitate Noel’s hospital admission, procedure and post-operative care. Social stories were used to inform Noel about his illness and to guide him through his patient journey. As a result of careful planning, Noel’s procedure was a success and he was discharged from the Trust in April 2017, six months earlier than originally anticipated.

The story demonstrated the quality of care that could be achieved when people from different disciplines, services and organisations worked together to create a person-centred hospital admission support plan. The commitment that went into planning Noel’s care meant that he was able to have quality, safe and effective lifesaving treatment.

During ensuing discussion, the following key points were highlighted:

- The story should be shared with the West Yorkshire STP. **Action: Chief Executive**;
- Andrew was investigating how RiO/SystmOne could be better utilised to evidence the time spent supporting individual service users; and
- The time spent planning and organising Noel’s hospital admission, procedure and support requirements resulted in a successful outcome.

**Trust Board thanked Noel for sharing his story and Andrew for presenting this.**

The minutes of the meeting held on 30 March 2017 were agreed as a true and accurate record, subject to the following amendments:

- Item 3112: Chair’s Announcements:
  - The final sentence of the ‘Moving Forward Graduation’ paragraph amended to read ‘Other local trusts would be taking part in the next programme, including Bradford Teaching Hospitals NHS Foundation Trust who had also taken part in the latest programme’; and
  - The name of the Interim Lead Governor to change to Colin **Perry**.
MATTERS ARISING

- Item 3115: Assurance Reports from Committee Chairs – The Trust Secretary reported a meeting would take place between himself, the Chair, the Medical Director and a Consultant at the Trust to consider clinical buddying. Board members considered it appropriate that the Board receive a paper about Clinical Leadership at the June Board meeting. **Action: Deputy Trust Secretary to timetable into the work programme.**

Actions

- 23/2/17-1: Chief Executive’s Report – Ms Mirza agreed to provide the Chair with contact details for the Student Union Bureau at Bradford University. **Action: Ms Mirza;**
- 30/3/17-1: Patient and Carer Experience – The Director of Nursing and Operations reported the Trust’s mental health employment lead met with Glen on 11 April 2017 and had reviewed his CV. Glen had also been referred to the skills training employment pathway through the Job Centre. Mrs Gilderdale was also trying to organise a date to meet with Glen about his experience of using the Crisis Support service; and
- 30/3/17-3: The Trust Secretary reported a progress update would be provided at the June Board in relation to the Five Year Forward View for Mental Health.

CHAIR’S ANNOUNCEMENTS

The Chair reported:

- Dr David Sims had given an excellent membership talk about Autism during lunch time;
- He had chaired a recent meeting of the Mental Health Federation Network Board. It was believed there was still work to do to raise the profile of mental health with the NHS Federation;
- He, Ms Lees and Mr Vincent had attended a meeting with Bradford Council to discuss the implications of Public Health grant cuts on Trust services. The Trust had reinforced the importance of the two organisations working together and there was a general commitment to do so;
- The local Clinical Commissioning Groups (CCGs) were adopting a common management structure, whilst maintaining their independence as CCGs;
- Both he and Ms Lees had met with Philip Davies MP. Mr Davies had been very complimentary about the relationship between the Trust and the Cellar Trust. The Chair and Ms Lees would be arranging to meet with other MPs in the district following the General Election. Mrs Gilderdale added that Mr Davies had visited the Safer Spaces service at the Cellar Trust on 13 June 2017; and
- Public Governor, Nick Smith, had won the Good Morning Britain Lifesaver of the Year award. Trust Board congratulated Nick on this achievement.

Trust Board noted the Chair’s report.
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:

- Executive Management Team members had been attending different Trust sites to present the Operational Plan 2017/19 (the final presentation was due to take place on 2 May 2017). During the presentations, feedback had been sought from staff about the issues they were experiencing. Staff had raised a number of small issues and action had subsequently been taken to resolve these. Additionally, Executive Management Team members were holding one meeting each month at Trust sites and staff had been invited to attend the first part. Feedback would be sought from staff following the meetings about any issues they were experiencing. Ms Lees had also been contacted by a staff member (via the ‘chat to Nicola’ email address) to raise a concern about an increase in car parking prices for staff working at the Airedale Centre for Mental Health site. A review was underway to determine how many staff were affected by the increase;

- NHS England had published a report on the health and care of people with learning disabilities. This highlighted issues relating to the percentage of people accessing health checks, the number of people accessing breast screening and life expectancy levels;

- The King’s Fund had published a report relating to public satisfaction with the NHS in 2016. Ms Lees urged Board members to read the document. Trust Board believed a summary of the report should be considered by the ‘You and Your Care Strategic Reference Group’ and an update provided to Board. **Action: Director of Nursing and Operations to timetable into the work programme**; and

- The King’s Fund had also published a report relating to the long-term sustainability of the NHS and Adult Social Care. This contained a conclusion that the form of the NHS and Adult Social Care would need to change in order to remain sustainable.

Trust Board noted the content of the Chief Executive’s report.
The Chair invited Board members to highlight any insights gleaned during visits:

- Mr Vincent and Mrs Knight had visited the Energy and Environment team. The Trust’s energy and environment performance benchmarked well against other trusts but further investment would be required in the near future in order to sustain performance levels. The team did not highlight any areas of concern;
- Dr Butler had attended two NHS England commissioned events relating to serious untoward incidents (SUIs) and the Duty of Candour. The events had focussed mainly on learning from SUIs and relationships with the service user and their carers. There was a clear expectation that Non-Executive Directors should have exposure to SUIs (in excess of current exposure levels at the Trust); and
- Ms Lees reported she had visited the North Normanton Children’s Services team following the transfer of the Wakefield Children’s Services contract to the Trust on 1 April 2017. The team had been very positive about: i) the management arrangements in place; ii) working for the Trust; and iii) the support received from the Trust’s Informatics Team. Two quality and safety visits were planned in the near future.

Trust Board noted the information received.

ASSURANCE REPORTS FROM COMMITTEE CHAIRS

A paper was presented containing key points discussed at the following meetings:

- Audit Committee, 11 April 2017; and

A paper was also circulated at the meeting containing key points discussed at the Finance, Business and Investment Committee meeting held on 26 April 2017.

Trust Board noted the points highlighted from the Committee meetings.

REVIEW OF PATIENT AND CARER STORIES

A paper was considered which proposed a refreshed approach to the patient and carer stories. During discussion about the paper, the following key points were raised:

- Consideration should be given to incorporating research and development stories into the programme and to sharing the stories more widely as case examples;
The approach to the sharing of stories should be tailored to the circumstances; this would not always be via a `you said, we heard’ approach.

An emphasis on Corporate Services stories was welcomed; and

Consideration should be given to sharing a collection of stories at the Annual Members Meeting. **Action:** Trust Secretary/Deputy Trust Secretary to pursue.

**Trust Board:**

- Agreed to continue with patient stories at Trust Board meetings using the refreshed approach;
- Agreed to adopt a ‘You Said, We Heard’ approach as well as other approaches to use the power of the story to get key points across to key stakeholders;
- Approved the revised approach for wider communication with the media and review interest in the patient feedback web pages at the end of 2017; and
- Agreed to patient stories being shared at the next relevant Business Unit meeting to share learning and actions required.

**CORPORATE RISK REGISTER**

Dr Hussain reported the Trust Board task and finish group, established to review key strategic matters, would be reviewing the Corporate Risk Register (CRR) and Board Assurance Framework (BAF).

Dr Butler informed the Board she had raised concerns outside the meeting regarding the red risks relating to ligatures (risk numbers 1868 and 1913) and it had been concluded the language used to describe the risks required review. Dr Butler then pointed out the risks relating to recruitment had materialised and should, therefore, no longer be categorised as risks. Ms Lees added that as the Operational Plan 2017/19 had been published, all risks would be reviewed by the task and finish group. Dr McElligott considered it appropriate that the task and finish group also review the way in which the information within the CRR was presented.

**Trust Board:**

- Agreed the level of assurance was adequate for the CRR; and
- Confirmed that new versions of the risks would be redefined where necessary and presented to the Board.
Dr Butler reported the BAF was presented as at quarter four and the future format and use of the BAF would be considered by the Board task and finish group. Dr Butler believed that Workforce and Quality should be incorporated within the BAF.

**Trust Board noted the current content of the BAF as at the 2016/17 year end.**

**INTEGRATED PERFORMANCE REPORT (IPR) – MARCH 2017 DATA: EXCEPTION REPORTING**

The report assessed progress against the Trust’s key targets and performance indicators as at March 2017 (quarter four) and provided exception reports on areas that were currently off trajectory. The following key areas were discussed or noted during the meeting:

- The format and content of the Integrated Performance Report (IPR) was currently being reviewed. This was linked to ongoing work within Board task and finish groups and cyclical reporting review processes;
- Despite some major challenges, the majority of targets within the IPR had been met during the year which highlighted the high performing nature of the Trust;
- The Care Quality Commission (CQC) and NHS Improvement (NHSI) targets had been met and were rated green and all CQUIN targets were on track;
- The number of staff recommending the Trust as a place to work had dipped when compared to other quarters. Ninety-nine members of staff had completed the survey during the last quarter and those not recommending the Trust as a place to work equated to 3.46% of the total workforce. Feedback had been sought from staff by the Executive Management Team (during the Operational Plan presentations) about their issues and concerns and would continue to be sought during the Executive Management Team meetings being held at different Trust sites. Views would also be sought via Trust Board quality and safety visits;
- Consideration should be given to incorporating additional Appreciative Inquiry actions within the IPR;
- The ‘Labour Turnover’ slide did not contain data relating to the Learning Disabilities Service. **Action: Director of Nursing and Operations to rectify for future reports**;
- Learning should be captured in relation to Change Programme outcomes;
- The ratio of clients to staff within the Child and Adolescent Mental Health Service (CAMHS) was 42:1 against a recommended ratio of 40:1. Ms Lees queried whether this was a national issue or specific to the Trust. **Action: Director of Nursing and Operations to investigate**; and
- Despite projecting a £494k risk to delivery of the Trust’s internal 2016/17 Control Total of £1350k planned surplus at quarter three, sustained and positive financial recovery was reported for each of months 10 and 11, giving assurance that forecasts were accurate and the position robustly managed. This continued at
month 12 and the Trust subsequently reported achievement of the Control Total; with a £6k over achievement, excluding national incentives. Consequently, the Trust had been allocated £1,555k Sustainability and Transformation Funding (STF). This was £771k ahead of plan.

Trust Board:

- Noted the content of the dashboard and the issues highlighted by Board members; and
- Thanked Executive colleagues for overcoming significant challenges in order to deliver the plan.

3137 AUDIT COMMITTEE ANNUAL REPORT

A paper was presented containing the Audit Committee Annual Report 2016/17

Trust Board noted the Annual Report.

3138 ANNUAL PLAN 2017/18-2018/19

A paper was considered which formally presented the two year Operational Plan and full public facing document, which described the Trust’s business and service plans for 2017/18 and 2018/19 (as approved by the Board in March 2017). The Operational Plan had been published by the Trust in early April. Mrs Romaniak highlighted the following two key elements within the report:

- The Annual Members Meeting discussion in September 2016 had supported development of the Operational Plan priorities; coloured shading had been utilised within the Plan to highlight the themes emerging from the Annual Members Meeting; and
- Section three (page 14) highlighted the aspirations and ambitions for the Trust’s services. Mrs Romaniak encouraged Board members to read this section.

Trust Board noted the Trust’s final financial plan submission had been approved by NHS Improvement in early April with the Operational Plan therefore released for publication by the Trust in early April following approval by the Board in March 2017.

3139 NHS IMPROVEMENT QUARTERLY SUBMISSION

Mrs Romaniak introduced a paper which sought Board approval of the Quarter 4 submission to NHS Improvement. Mrs Romaniak reported a Use of Resources (UoR) rating of 1 had been achieved across all five indicators.
Trust Board approved the UoR Risk Rating and quarterly submission to NHS Improvement, noting the recommendation of the Finance, Business and Investment Committee (FBIC).

3140 HEALTH AND SAFETY ANNUAL REPORT 2016/17

During discussion about the paper, the following key points were made:

- The most significant health and safety issue throughout the year had been in relation to the ‘No Smoking’ policy. This was due to smoking related incidents occurring within the grounds and gardens as well as in the buildings;
- The Board had completed the Health and Safety checklist as part of the Board Development session on Corporate Manslaughter;
- Quarterly Health and Safety reports would be forwarded to the Quality and Safety Committee and the Finance, Business and Investment Committee, once consideration had been given to which indicators should be reviewed by which committee. Key issues would be highlighted to the Board;
- Consideration should be given to ensuring future reports focussed on impacts rather than outcomes; and
- The Safety, Risk and Resilience Manager had informed Dr McElligott the ‘safety huddles’ were having a positive impact; wards were safer than they were two years ago with objective evidence to back this up.

Trust Board:

- Approved the Health and Safety Annual Report for 2016/17; and
- Congratulated the Health and Safety team for winning the RoSPA award for the third successive year running.

3141 BOARD BUSINESS CYCLE

The Trust Secretary introduced the Board Business Cycle which outlined those items scheduled for future meetings. The following additions were agreed during the meeting:

- Clinical Leadership (June)
- Public Satisfaction Survey Update (July)

Trust Board noted the items contained within the Board work programme.
REGISTER OF BOARD MEMBER INTERESTS

An updated version of the Register of Board Members’ Interests had been received.

Trust Board:

- Noted the final Register of Board Members’ Interests; and
- Did not report any amendments to the Register.

COMMITTEE AND COUNCIL OF GOVERNOR APPROVED MINUTES

A paper was presented containing approved minutes from the Council of Governors meeting held on 10 February 2016, the Audit Committee meeting held on 20 February 2017 and the Mental Health Legislation Committee held on 19 January 2017.

Trust Board noted the contents of the Council of Governors and Committee approved minutes.

PROTOCOL FOR MATTERS RESERVED FOR PRIVATE BOARD MEETINGS

A paper was considered containing the proposed protocol for matters reserved for Private Board meetings.

Trust Board:

- Approved the protocol; and
- Agreed to review it in six months’ time.

ANY OTHER BUSINESS

There were no items of other business.

DATE AND TIME OF NEXT MEETING

The next meeting will be held at 1.30 pm on Thursday, 25 May 2017 at Lynfield Mount Hospital, Heights Lane, Bradford.

The meeting concluded at 4.00 pm.
<table>
<thead>
<tr>
<th>Ref No</th>
<th>Actions requested</th>
<th>Timescale</th>
<th>Progress</th>
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<tbody>
<tr>
<td>23/2/17-1</td>
<td><strong>Chief Executive’s Report</strong></td>
<td>One month</td>
<td>Ms Mirza to provide the Chair with contact details at the University.</td>
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<td></td>
<td><strong>Chair</strong> 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.</td>
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<td>23/2/17-4</td>
<td><strong>Integrated Performance Report – January 2017</strong></td>
<td>Two weeks</td>
<td>Update to be provided via the May Committee report.</td>
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<td><strong>Data</strong></td>
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<td><strong>Dr Butler</strong> to arrange for the deep dive into serious incidents to also focus on reporting timescales.</td>
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<td>30/3/17-1</td>
<td><strong>Patient and Carer Experience</strong></td>
<td>April 2017</td>
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<td><strong>Director of Nursing and Operations</strong></td>
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<td>i) determine from Glen how the Crisis Support service could be improved and</td>
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<td>ii) to signpost Glen to the Trust’s mental health employment service.</td>
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<td>30/3/17-2</td>
<td><strong>Matters Arising</strong></td>
<td>May Trust Board</td>
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<td><strong>Dr Butler</strong></td>
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<td>to ensure the May Quality and Safety Committee report incorporates an update about the deep dive into serious incidents.</td>
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<td>30/3/17-3</td>
<td><strong>Chief Executive’s Report</strong></td>
<td>One month</td>
<td>Timetabled for June 2017 Board</td>
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<td><strong>Director of Nursing and Operations/Trust Secretary</strong></td>
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<td>to timetable into the Board work programme a Five Year Forward View for Mental Health Programme progress update.</td>
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<td>27/4/17-1</td>
<td><strong>Patient and Carer Experiences</strong></td>
<td>One month</td>
<td>Agreement to share received from the STP Lead on 4/5/17</td>
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<td><strong>Chief Executive</strong></td>
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<td>to share Noel’s story with the West Yorkshire and Harrogate STP.</td>
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<td>27/4/17-2</td>
<td><strong>Matters Arising</strong></td>
<td>One week</td>
<td>Completed</td>
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<td><strong>Deputy Trust Secretary</strong></td>
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<td>27/4/17-3</td>
<td>Chief Executive’s Report&lt;br&gt;<strong>Director of Operations and Nursing</strong> to arrange for a summary of the Public Satisfaction report to be forwarded to the Strategic Reference Group for consideration. &lt;br&gt;<strong>Trust Secretary</strong> to timetable an update paper into the Board work programme.</td>
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<td>Two months</td>
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<td>27/4/17-4</td>
<td>Review of Patient and Carer Stories&lt;br&gt;<strong>Trust Secretary/Deputy Trust Secretary</strong> to determine how patient and carer stories might be shared via the Annual Members’ Meeting</td>
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<td>June 2017</td>
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<td>27/4/17-5</td>
<td>Integrated Performance Report: March 2017 Data&lt;br&gt;<strong>Director of Nursing and Operations</strong> 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.</td>
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<td>May 2017</td>
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