**BOARD MEETING**

**17 December 2015**

<table>
<thead>
<tr>
<th>Paper Title:</th>
<th>Minutes of the Trust Board Meeting held on 26 November 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section:</td>
<td>Public – Standing Items</td>
</tr>
<tr>
<td>Lead Director:</td>
<td>Michael Smith, Chair</td>
</tr>
<tr>
<td>Paper Author:</td>
<td>Paul Hogg, Trust Secretary</td>
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<tr>
<td>Agenda Item:</td>
<td>5</td>
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**EXECUTIVE SUMMARY:**

Attached are the minutes of the Trust Board meeting held on 26 November 2015.

**RECOMMENDATION:**

- The Board is asked **to approve** the minutes.
2817 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting. Apologies had been received from Ralph Coyle.

2818 DECLARATIONS OF INTEREST

There were no declarations of interests.

2819 ISSUES RECEIVED FROM THE PUBLIC

There were no items from the public.

2820 PATIENT AND CARER EXPERIENCES

This month’s patient and carer experience story was told by Gill Nottidge, Continence Nurse Specialist, on behalf of a 56 year old lady from Bradford who had moved from the area as a result of domestic abuse. When she returned she was admitted to the Bradford Royal Infirmary with an acute urinary tract infection. Whilst in hospital she presented with complex mental health problems and was subsequently transferred to Lynfield Mount. BDCFT received limited information on her transfer and staff noticed a catheter was still in place on her arrival, although this was not mentioned in her medical notes. It was decided to remove the catheter and inpatient staff liaised with
our district nursing service who visited the ward to undertake the procedure. Following this, the service user’s mental health condition rapidly improved, she was able to be discharged back into the community and is no longer suffering from bladder-related problems.

As a result of this case the Trust put in place a number of actions to support service users including regular liaison between inpatient staff and district nursing teams to help support those who may have continence issues; and the introduction (in conjunction with BTHFT) of a ‘catheter passport’ to support the transfer and discharge of continence patients across the district.

Board members highlighted:

- that our continence service was seen as a ‘flagship’ service that provided high quality care across the district;
- the importance of accurate medical records upon transfer;
- the need for local NHS organisations to better understand the connection between physical and mental health conditions; and
- that discussions would continue with BTHFT under the duty of candour process. 
  
  **Action: Deputy Chief Executive.**

2821 MINUTES OF THE MEETING HELD ON 29 OCTOBER 2015

The minutes of the meeting held on 29 October 2015 were agreed as a true and accurate record.

2822 MATTERS ARISING

Actions

- 30/7/15-5 – meeting with CCGs: a provisional date had been identified as 2.00pm on 26 January 2016;

2823 CHAIR’S ANNOUNCEMENTS

The Chair reported:

- the recruitment process to select a new Non-Executive Director would be underway shortly with a closing date of 15 January for applications;
- the Council of Governors had met on 12 November which included a workshop on the annual planning process;
- he had hosted a visit from the Lord Mayor to the Dementia Assessment Unit (DAU) on 3 November;
- he had attended an event at City Hall, Bradford to celebrate the promotion of living wage;
he and Nadira Mirza had represented the Trust at the opening of the Broadway Shopping Centre, Bradford; and

the Trust had been successful at the annual Yorkshire & the Humber Regional Leadership Recognition Awards. The Board of Directors were announced as the winners of the ‘Board/Governing Body of the Year’, Tracey Corner, Patient Experience and Friends and Family Test Lead was awarded the ‘Patient Champion of the Year’ accolade and Lisa Wright, Head of Equality and Work Experience won the Leader of Inclusivity of the Year award.

Trust Board:

- noted the Chair’s report.

2824  **CHIEF EXECUTIVE’S REPORT**

The Chief Executive presented his report which summarised key issues taking place across the health economy and contained links to more detailed information. Mr Large highlighted the following items:

- a report recently published by NHS England, the LGA and ADASS about people with a learning disability and/or autism being supported to lead more independent lives and have greater say about the support they receive. Central to the progress set out in the plan over the next three years was new, high-quality, community-based services and closure of inpatient facilities. The report predicted a national reduction of inpatient beds by up to 50%; and

- a new national whistleblowing policy was currently under consultation and once approved, would be shared with the Board through the Chief Executive report in February 2016. **Action: Director of HR/OD.**

Mr Vincent highlighted the recent King’s Fund report which proposed a new approach to tackling the challenges of growing financial and service pressures at a time of rising demand. It argued that NHS organisations needed to move away from a ‘fortress mentality’ whereby they acted to secure their own individual interests and future, and instead establish place-based ‘systems of care’.

Ms Mirza reported that Professor Murna Downs had recently been recognised with a Queen’s Award for Dementia for her work at Bradford University.

Trust Board noted the content of the Chief Executive’s report.

2825  **QUALITY AND SAFETY FEEDBACK FROM BOARD MEMBERS**

The Chair invited Board members to highlight any insights or observations raised during visits:
• Nadira Mirza reported she had visited the nursing development team at Hillside Bridge and had also met with the Chair of the Aspiring Cultures network as part of her mentoring role;
• The Chair and Deputy Chief Executive had visited the salaried dental service at Waddiloves Health Centre and learnt about how the service supported clients with learning disabilities or those with a dental phobia. Ms Lees highlighted the use of the Board in Brief document which had resulted in the dental service liaising with staff at the recently opened DAU to support dementia service users with their dental needs; and
• Sue Butler and Sandra Knight had visited the School Nursing service in Ilkley where staff had shared positive feedback about agile working, concerns about workload pressures and suggestions about the use of the nursery nurse role in future service plans.

Trust Board noted the information received from Board members.

2826 ASSURANCE REPORTS FROM COMMITTEE CHAIRS

The paper provided a short update on issues raised at the Finance, Business and Investment Committee meeting held on 28 October 2015 and assurances from the Quality and Safety Committee meeting held on 6 November 2015. Mr Vincent highlighted the following items from the November meeting:

• the need to widen the Trust’s consideration of service user experience and not rely solely on Friends and Family test data; and
• that a deeper dive had been commissioned into psychological therapies.

Trust Board noted the points highlighted from the various meetings.

2827 INTEGRATED PERFORMANCE REPORT (IPR) – OCTOBER 2015 DATA

The paper assessed progress against the Trust’s key targets and performance indicators as at November 2015 and provided narrative reports on areas that were currently off trajectory. The Chair referred to the key exceptions and invited comments about these. The following key areas were discussed or noted during the meeting:

• all Monitor performance requirements were being met;
• the Trust was working hard to achieve new national waiting times for IAPT services and discussions were ongoing with commissioners about an increased role for the Trust across wider services in district;
• sickness absence had risen again slightly but the Trust had received funding from NHS England to introduce IAPT services for those staff who needed additional support and also health checks for staff;
• work was underway with senior managers to examine the impact of the proposed Local Authority budget cuts and how this would impact on services in 2016/17;
• CPA 6 month follow-up was highlighted as this was expected to become the national target at some point in the future; and
• Monitor’s requirement for financial caps on Agency spending was being introduced from 23 November and HR and Finance colleagues were working with service managers to ensure Trust compliance.

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

2828 **BOARD BUSINESS CYCLE**

The Trust Secretary submitted the Board Business Cycle, outlining those items scheduled for future meetings and the proposed calendar of Committee meeting dates for 2016. The following addition to the Board programme had been identified during the meeting:

- Procurement award for clinical information system – December 2015 (private meeting);
- Mental health commissioning report – December 2015 (Private meeting);

**Trust Board:**

- noted the papers contained within the Board work programme; and
- approved the 2016 calendar for Committee meetings.

2829 **COMMITTEE APPROVED MINUTES**

A paper was presented containing approved minutes from the following Committees:

- Finance, Business and Investment Committee meeting held on 17 September;
  and
- Quality and Safety Committee meeting held on 18 September.

**Trust Board noted the contents of the Committee approved minutes.**

2830 **ANY OTHER BUSINESS**

No other issues were raised.

2831 **DATE AND TIME OF NEXT MEETING**

The next meeting would be held at 10.00am on Thursday, 17 December 2015, at New Mill, Saltaire. The Chair reminded Board members that staff who had been shortlisted or won regional/national awards during the year had been invited to join Board members over lunch to celebrate their success. The meeting concluded at 12.15 pm.
<table>
<thead>
<tr>
<th>Ref No</th>
<th>Actions requested</th>
<th>Timescale</th>
<th>Progress</th>
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</thead>
<tbody>
<tr>
<td>30/7/15-5</td>
<td>Board Assurance Framework <strong>Chief Executive</strong> to arrange a meeting between the Board and the Clinical Commissioning Groups. <strong>Commercial Director</strong> to ensure the next BAF deep dive focusses on strategic risk 1.1</td>
<td>Two months</td>
<td>Provisional date 26.1.16</td>
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<tr>
<td>24/9/15-2</td>
<td>Assurance Reports from Committee Chairs <strong>Deputy Chief Executive/Director of Nursing</strong> to circulate to Board members the report about Psychological Therapies.</td>
<td>Two weeks</td>
<td>Completed</td>
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<tr>
<td>29/10/15-1</td>
<td>Quality and Safety Feedback from Board Members <strong>Chair and Dr Butler</strong> to consider how to integrate into the Board Development programme the insights highlighted at the Patient Safety Safeguarding event.</td>
<td>Two months</td>
<td></td>
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<td>29/10/15-2</td>
<td>Assurance Reports from Committee Chairs <strong>Deputy Chief Executive/Director of Nursing</strong> to organise a review into the impact of introducing a smoke-free environment.</td>
<td>To be Considered at December QSC</td>
<td>Meeting arranged 18.12.15</td>
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<tr>
<td>29/10/15-3</td>
<td>Integrated Performance Report – September 2015 Data <strong>Deputy Chief Executive/Director of Nursing</strong> to incorporate an update in the IPR about action being undertaken to address ITC occupancy levels.</td>
<td>November IPR</td>
<td>On agenda</td>
</tr>
<tr>
<td>29/10/15-4</td>
<td>Fundamental Standards Progress Update <strong>Committee Chairs</strong> to give consideration to Fundamental Standard assurance requirements when setting Committee agendas.</td>
<td>2 months</td>
<td>Ongoing</td>
</tr>
<tr>
<td>26/11/15-1</td>
<td>Patient and Carer experiences <strong>Deputy Chief Executive</strong> to discuss patient story case with BTHFT.</td>
<td>One month</td>
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<td>26/11/15-2</td>
<td>Chief Executive’s Report <strong>Director of HR/OD</strong> to brief the Board on the new national whistleblowing policy via the CEO report.</td>
<td>February 2016</td>
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