

**BOARD MEETING**

**26 NOVEMBER 2015**

Paper Title:	Minutes of the Trust Board Meeting held on 29 October 2015
Section:	Public – Standing Items
Lead Director:	Michael Smith, Chair
Paper Author:	Paul Hogg, Trust Secretary
Agenda Item:	5

**EXECUTIVE SUMMARY:**

Attached are the minutes of the Trust Board meeting held on 29 October 2015.

**RECOMMENDATION:**

- The Board is asked **to approve** the minutes.

## **BRADFORD DISTRICT CARE TRUST**

### **Minutes of a Meeting of the Trust Board held at The Cellar Trust, Farfield Road, Shipley, BD18 4QP at 10.00 am on Thursday 29 October 2015**

Present:	Michael Smith	Chair
	Simon Large	Chief Executive
	David Banks	Non-Executive Director
	Ralph Coyle	Non-Executive Director
	Sue Butler	Non-Executive Director
	Nadira Mirza	Non-Executive Director
	Derrick Palmer	Non-Executive Director
	Rob Vincent	Non-Executive Director
	Nicola Lees	Deputy Chief Executive/Director of Nursing
	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
	Shay Corrigan	Mental Health Support Worker
	Clair	Service User (for the patient story)
	Colin Perry	Public Governor, Bradford West
	Michelle Eggett	Public Governor, Bradford South

2 members of the Trust and 3 members of the public

#### **2798 WELCOME AND APOLOGIES**

The Chair welcomed everyone to the meeting. There were no apologies.

#### **2799 DECLARATIONS OF INTEREST**

There were no declarations of interests.

#### **2800 ISSUES RECEIVED FROM THE PUBLIC**

There were no items from the public.

#### **2801 PATIENT AND CARER EXPERIENCES**

This month's patient and carer experience story was told by Clair, a service user of the Bradford City/District Assertive Outreach Team. Clair had suffered from epilepsy for 11 years and this impacted on her mental wellbeing and caused her to suffer from cognitive symptoms. Clair was referred to a special brain rehabilitation hospital in York but had difficulty settling into the hospital initially as she found the environment to be oppressive. After a difficult period, Clair began to respond to treatment and was discharged from the hospital in April 2015. Following support from the Assertive Outreach Team, Clair now lives in supportive accommodation, attends college two days each week and is training to become an Advocate. The Assertive Outreach Team expects to discharge Clair in the near future.

The Chair invited questions about the story from the Board and the following comments were made:

- The Assertive Outreach Team (which works with people that have complex and enduring mental health problems) maintained contact with Clair whilst she was being treated in York; and
- An earlier diagnosis of Clair's cognitive symptoms would have resulted in earlier intervention and treatment.

## 2802 **MINUTES OF THE MEETING HELD ON 24 SEPTEMBER 2015**

The minutes of the meeting held on 24 September 2015 were agreed as a true and accurate record.

## 2803 **MATTERS ARISING**

### Actions

- 24/9/15-2 – The Deputy Chief Executive/Director of Nursing confirmed the Professional Council Annual Report had been circulated to Board members;
- 24/9/15-3 - The Deputy Chief Executive/Director of Nursing reported that during September, there had been no Friends and Family Test (FFT) responses by service users of the Child and Adolescent Mental Health Service (CAMHS). A panel, consisting of young people and staff from the Trust, would be convened to consider ways in which young people might be encouraged to complete the test. Dr Butler added the Quality and Safety Committee had received a presentation about the different ways in which feedback was collected within CAMHS and it had been recognised that the FFT feedback model did not appeal to young people; and
- 24/9/15-4 – Dr Butler confirmed details about the Measuring and Monitoring Safety meetings had been circulated to Directors.

## 2804 CHAIR'S ANNOUNCEMENTS

The Chair reported:

- The Board had been shortlisted for the Leadership Academy Yorkshire and Humber 'Board of the Year' award;
- The majority of the Governors had attended a bespoke Governwell training session on 19 October 2015 at the Cellar Trust;
- The Trust had initiated and jointly delivered a district-wide young people's healthcare event which had been attended by approximately 500 14-17 year old secondary school children;
- The Council of Governors' Membership Development Committee had met during October to discuss the Membership Strategy; and
- Mr Palmer, Non-Executive Director (NED) would be standing down as a NED at the end of October. Consequently, there would be a NED vacancy on the Board and there had been some changes made to the Committees: Mr Banks would be chairing future Audit Committee meetings, Mr Vincent would chair the Finance, Business and Investment Committee and would also undertake the role of Senior Independent Director (SID).

### **Trust Board:**

- **noted the Chair's report; and**
- **approved the changes to Board Committees and the appointment of Mr Vincent as the new SID.**

## 2805 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 two items:

- **2015 Mental Health Community Survey** – The results of the 2015 community mental health survey published by the Care Quality Commission revealed the care provided by the Trust to be amongst the best in the country. The independent regulator of health and adult social care in England asked 226 local people receiving care from the Trust in 2014 what they thought of the care and treatment they had received. The Trust was rated as the highest in the country in eight areas including staff listening carefully (87%), service users being included in decisions about their treatment (80.4%) and people receiving the help they needed out of hours (77.6%); and
- **Consultation on national price caps for agency (and bank) staff working in the NHS** - Monitor and the NTDA had announced a four week consultation on proposals to cap the rates for agency staff and to extend application of these rates to bank staff to encourage workers back into better value substantive and bank roles. The consultation included a number of proposals to which the Trust would be responding.

The consultation would close on 13 November 2015 and, subject to the outcome, was expected to be implemented from 23 November 2015. The Trust, whilst supportive of the need to participate in the initiative, was mindful of the onerous and immediate reporting timescales.

Ms Mirza drew the Board's attention to the district-wide young people's event - 'Your Future, Your Health' and reported one of the stall holders had received feedback from 250 young people. This revealed a need to develop impartial advice and guidance around different professions in the NHS.

Dr Butler noted Trust staff had once again been nominated for a number of awards and believed this to be a reflection of work undertaken within the Trust during the last five years to deliver sustainable change. Mr Large added he had received feedback from staff about the importance of the organisation celebrating its good work through award entries. Mr Large had also received feedback that the Trust's culture of recognising achievements and encouraging award entries had resulted in a number of people applying to work for the Trust.

**Trust Board noted the content of the Chief Executive's report.**

## 2806 **QUALITY AND SAFETY FEEDBACK FROM BOARD MEMBERS**

The Chair invited Board members to highlight any insights or observations raised during visits:

- Dr Butler reported she had attended a Patient Safety Safeguarding event where the importance of the Board seeking assurance in relation to patient safety was highlighted. **Action: Chair and Dr Butler to discuss how to integrate into the Board Development programme the insights highlighted from the event;**
- The Deputy Chief Executive/Director of Nursing informed the Board she had undertaken a number of different service visits which had primarily been driven by a Safer Staffing initiative that indicated there was much greater complexity and acuity levels in particular in-patient services;
- Mr Banks reported that he and Mr Hogg had met with two managers from the Bradford North Community Mental Health Team (CMHT). One focus of the visit had been on the deeper dive undertaken into the complaints received about the Bradford North CMHT service. This revealed the majority of complaints were low level; and
- The Chair reported a number of Governors had expressed an interest in undertaking 15 Step Quality Challenge visits and would be undertaking training in due course.

**Trust Board noted the information received from Board members.**

## 2807 **ASSURANCE REPORTS FROM COMMITTEE CHAIRS**

The paper provided a short update on issues raised at the Mental Health Legislation Committee meeting held on 14 October 2015. The Chair of the Committee, Mr Coyle, highlighted the following key items which had been discussed at the meeting:

- Reporting against the fundamental standards; and
- The outcome of 'deep dives' in relation to: use of restraint; section 136; and section 17 leave. The deep dive into the use of section 17 leave had revealed that some service users were utilising this leave for smoking purposes. Mr Vincent believed a review should be undertaken into the impact of introducing a smoke-free environment. **Action: Deputy Chief Executive/Director of Nursing to pursue and to report the findings to the Quality and Safety Committee.**

Mr Banks reported the Finance, Business and Investment Committee had met on 28 October and that a report of the meeting would be forwarded via the Assurance Report to the November Board.

**Trust Board noted the points highlighted from the various meetings.**

## 2808 INTEGRATED PERFORMANCE REPORT (IPR) – SEPTEMBER 2015 DATA

The paper assessed progress against the Trust's key targets and performance indicators as at September 2015 and provided narrative reports on areas that were currently off trajectory. Mrs Romaniak informed Board members the report had been reviewed and now included an introductory sheet which summarised the key exceptions. Further information relating to these was contained within the main slides. Additionally, content which received scrutiny via different processes had been removed. The Chair then referred to the key exceptions and invited comments about these. During the discussion the following comments were made:

- The delay in the publication of the national Commissioning Guide would have a knock-on effect on the timing of discussions with commissioners relating to the additional resources required to achieve NICE compliant treatments for 2016/17;
- Work had begun to address issues relating to the recording and reporting of Improving Access to Psychological Therapies (IAPT) standards. This would be monitored by FBIC. Additionally, non-recurrent funding had been released to enable the Trust to address a backlog of Bradford District patients waiting for secondary therapy. Dr Butler reported a recent visit to the IAPT service had revealed that a number of the patients accessing the service were of a higher than expected risk and believed this could impact on recovery rates. Mrs Romaniak reported this issue would be discussed with Commissioners.
- One Duty of Candour incident had been reported in September 2015 relating to a possible inappropriate clinical intervention in the treatment of a pressure ulcer within a District Nursing team. The findings from an investigation into this matter would be reported to the Quality and Safety Committee (QSC);

- Action was being undertaken to address an increase in both long-term and short-term sickness absence levels. Investment by the Trust to provide support to those people suffering from Muscular-skeletal problems had resulted in this no longer being one of the top three reasons for staff absence;
- Safer staffing information had been consolidated into a reduced number of slides. The format and content of these slides would be further refined for the October IPR;
- Clustering performance continued to improve with performance reaching 90% against a trajectory of 95%;
- The Intensive Therapy Centre Change Programme was red rated and performance in this area was being scrutinised and monitored by FBIC. The Clinical lead at the Centre continued to promote the benefits of the service to Commissioners and a meeting had taken place with staff from the Centre to consider ways in which to increase admission rates. **Action: Deputy Chief Executive/Director of Nursing to incorporate a narrative about key actions being undertaken in the November IPR;** and
- The Trust had been informed that a blanket reduction of at least 6.2% would be deducted from all Trust contracts commissioned by the local authority in 2016/17. Consequently, the Trust was progressing work via the new Children's locality to assess the service impacts.

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

## 2809 **BOARD ASSURANCE FRAMEWORK (BAF)**

During her initial commentary about the BAF, Dr Butler highlighted the following key points:

- In view of the changes to the Trust's Annual Plan, it was important to review the relevance and future focus of the strategic risks for 2016/17; and
- Whilst the BAF framework at Appendix 1 contained links to assurances in place relating to each risk, it was important that the assurances were also summarised in the cover report.

In response to Dr Butler's comments, Mr Large reported the content and format of the BAF would be considered during the Board development meeting to consider the production of the 2016/17 Annual Plan. Mr Hogg referred to the suggestion in the paper that BAF deeper dives should be discontinued given there was work planned to align the BAF with the Trust's new strategic objectives for 2016/17.

## Trust Board:

- **noted the content of the BAF;**
- **agreed that deep dive discussions about the BAF should be discontinued at the private Board meetings in the light of the 2016/17 Annual Planning process.**

## 2810 CORPORATE RISK REGISTER

Mr Vincent highlighted the following initial observations:

- **Agile Working Programme** – whilst phase one of the change programme had been successful, there were concerns relating to the realisation of future benefits due to a lack of team by team data and information. This issue was being addressed by the Data and Information Task and Finish Group;
- **Clustering performance** – this matter had been discussed when the IPR had been considered (at agenda item 10); and
- **IM&T capacity and systems** – the Board had given detailed consideration to this matter during the Private Board meeting.

During ensuring discussion, the following key points were raised:

- Ms Mirza considered it important that the Board understood the reasons for recurring risks such as the risk relating to the national shortage of band 5 qualified nurses. In response, Ms Lees reported the Trust had undertaken a deep dive into this issue and an action plan had been produced to address areas of concern;
- The Chair outlined the importance of the Corporate Risk Register and BAF linking to the work of the Board and its Committees;
- Ms Mirza referred to the 'review of services leading to decommissioning and increased competitive market activity' risk and asked whether the Trust had the capacity to deal with tenders. In response, Mr Large reported the matter would be given further consideration during the Board Development meeting after the Board meeting; and
- The Chair reported some of the risks facing the Trust would be discussed with Governors during the Joint Annual Planning Awayday taking place on 12 November 2015.

## Trust Board:

- **Noted the content of and changes to the Corporate Risk Register;**
- **Noted the content of and changes to the red risks; and**
- **Agreed the level of assurance was adequate relating to the Corporate Risk Register and red risks.**

## 2811 MONITOR QUARTERLY RETURN AND DECLARATION

Mr Banks reported that the quarterly return had been discussed in detail during the Private Board meeting. Additionally, the Finance, Business and Investment Committee (FBIC) had considered, at its meeting on 28 October, the Monitor quarterly submission, the year to date and forecast outturn positions, Finance Sustainability Risk Rating (FSRR; this was previously referred to as the 'continuity of services risk rating') and key financial risks and mitigations. FBIC had concluded that the assessments within the paper were accurate and recommended to Board the return and FSRR rating of 4 for quarter two for submission to Monitor.

### **Trust Board approved:**

- **The current and projected Finance Sustainability Risk Rating (FSRR) of 4; and**
- **The FSRR and Quarterly Template for submission to Monitor including the Board Governance Statements as appended to the Board paper.**

## 2812 FUNDAMENTAL STANDARDS PROGRESS UPDATE

Mr Vincent provided his initial observations and highlighted that a Task and Finish Group had been established to consider the approach to assurance reporting at Committees and the way in which other existing assurances could be mapped to the standards. A review by the Group revealed the Trust had a wide range of assurance sources in place ranging from clinical audits to Board walkabouts. The Group believed a Fundamental Standards Assurance Matrix would aid reporting of a range of assurances against each of the Fundamental Standards. A copy of the proposed matrix was appended to the paper.

Mr Palmer believed a supplementary sheet should be produced detailing the main sources of assurance for each standard. Mr Large concurred and added Board Committees would have a role to play in identifying the sources of assurance. This would require the Committee Chairs and Lead Officers to determine assurance requirements prior to Committee papers being produced. **Action: Committee Chairs and Lead Officers to give this matter consideration during agenda setting meetings.**

## 2813 BOARD BUSINESS CYCLE

The Trust Secretary submitted the Board Business Cycle, outlining those items scheduled for future meetings. The following addition to the programme had been identified during the meeting:

- Fundamental Standards Progress Update to be considered at the March Board meeting.

**Trust Board noted the papers contained within the Board work programme.**

**2814 COMMITTEE APPROVED MINUTES**

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

- Quality and Safety Committee meeting held on 7 August 2015; and
- Mental Health Legislation Committee meeting held on 15 July 2015.

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

**2815 ANY OTHER BUSINESS**

**Mr Palmer, Non-Executive Director**

The Chair informed the Board that Mr Palmer would be retiring as a Non-Executive Director of the Board at the end of October, after eight years of service. Mr Palmer had made a significant contribution to the Board and, as a Senior Independent Director, had offered much support to the Chair. The Chair thanked Mr Palmer for his contribution and wise counsel.

No other issues were raised.

**2816 DATE AND TIME OF NEXT MEETING**

The next meeting would be held at 10.00 am on Thursday, 17 December 2015 at Silsden Town Hall. The meeting concluded at 12.15 pm.

**TRUST BOARD MEETING (PUBLIC)  
29 OCTOBER 2015**

ACTIONS

Ref No	Actions requested	Timescale	Progress
30/7/15-5	<u>Board Assurance Framework</u> <b>Chief Executive</b> to arrange a meeting between the Board and the Clinical Commissioning Groups. <b>Commercial Director</b> to ensure the next BAF deep dive focusses on strategic risk 1.1	Two months  November 2015 Board	Deep dives removed
24/9/15-2	<u>Assurance Reports from Committee Chairs</u> <b>Deputy Chief Executive/Director of Nursing</b> to circulate to Board members the report about Psychological Therapies.	Two weeks	Completed
29/10/15-1	<u>Quality and Safety Feedback from Board Members</u> <b>Chair and Dr Butler</b> to consider how to integrate into the Board Development programme the insights highlighted at the Patient Safety Safeguarding event.	Two months	
29/10/15-2	<u>Assurance Reports from Committee Chairs</u> <b>Deputy Chief Executive/Director of Nursing</b> to organise a review into the impact of introducing a smoke-free environment.	To be Considered at December QSC	
29/10/15-3	<u>Integrated Performance Report – September 2015 Data</u> <b>Deputy Chief Executive/Director of Nursing</b> to incorporate an update in the IPR about action being undertaken to address ITC occupancy levels.	November IPR	
29/10/15-4	<u>Fundamental Standards Progress Update</u> <b>Committee Chairs</b> to give consideration to Fundamental Standard assurance requirements when setting Committee agendas.	2 months	