

BOARD MEETING

24 NOVEMBER 2016

Paper Title:	Minutes of the Trust Board Meeting held on 27 October 2016
Section:	Public – Standing Items
Lead Director:	Michael Smith, Chair
Paper Author:	Stella Jackson, Deputy Trust Secretary
Agenda Item:	5

EXECUTIVE SUMMARY:

Attached are the minutes of the Trust Board meeting held on 27 October 2016.

RECOMMENDATION:

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

BRADFORD DISTRICT CARE TRUST

Minutes of a Meeting of the Trust Board held at Bradford District Care NHS Foundation Trust, New Mill, Victoria Road, Saltaire, Bradford at 10.00 am on Thursday 27 October 2016

Present:	Michael Smith	Chair
	Nicola Lees	Interim Chief Executive
	David Banks	Non-Executive Director
	Sue Butler	Non-Executive Director
	Nadira Mirza	Non-Executive Director
	Rob Vincent	Non-Executive Director
	Zulfi Hussain	Non-Executive Director
	Debra Gilderdale	Interim 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
	Emma Fraser	Programme Director, West Yorkshire Mental Health Vanguard
	Shaun Griffin	Team Leader, Older People's Mental Health Services (for agenda item 4)
	Colin Perry	Public Governor, Bradford West
	One member of the Trust (unit agenda item 10)	

3017 WELCOME AND APOLOGIES

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

3018 DECLARATIONS OF INTEREST

Ms Mirza reported she was a Trustee of Healthy Cycles (a young people's mental health charity) and the Chair reported he had been appointed to the Board of the NHS Confederation Mental Health Network. **Action: Trust Secretary to update the Register of Interests.**

There were no other declarations of interests.

3019 ISSUES RECEIVED FROM THE PUBLIC

There were no issues received from the public.

3020 PATIENT AND CARER EXPERIENCES

This month's patient story was told by Shaun Griffin and was about a 71 year old Trans Gender lady (E) who had vascular dementia and was evicted from her home due to her failing to abide by her contractual housing obligations and being deemed by the local authority and Housing Options to have the capacity to understand her situation. The Trust did not deem E to have the capacity and had concerns about her safety if left homeless. Consequently, she was admitted to Bracken Ward. An assessment of her condition whilst on the Ward revealed her vascular dementia had deteriorated further.

E was subsequently referred by the Community Mental Health Team (CMHT) to social services and a further assessment confirmed she did not have the capacity to understand her situation. E was, therefore, moved into 24 hour care and was happy and well. Lessons learnt from the situation had been shared between the Trust and local authority staff and an agreed protocol was now in place to ensure vulnerable adults such as E were not evicted from their homes inappropriately.

During ensuing discussion, the following key points were made:

- The format of the capacity statements utilised by different agencies were being reviewed; and
- It was important that all staff were able to effectively care for vulnerable people such as E who had complex care needs.

Trust Board thanked E for sharing her story.

3021 MINUTES OF THE MEETING HELD ON 29 SEPTEMBER 2016

The minutes of the meeting held on 29 September 2016 were agreed as a true and accurate record.

3022 MATTERS ARISING

- Item 3008: Assurance Reports from Committee Chairs – The Chair reported that at the September Board Development meeting, the Director of Finance, Contracting and Estates had alerted the Board that capital control totals, although expected, had still not been received. A number of high priority capital requests had been flagged to the Capital Planning and Investment Group (CPIG), including the cost of emergency estates work, relocation costs to effect the closure of Stoney Ridge (and cost improvement programmes) and further

telephony savings. The Board discussed the potential implications and agreed that priorities needed to be progressed and funded from Board approved resources in the absence of clarity on capital control totals. CPIG would be reviewing, prioritising and agreeing progress on 'high priority' areas; and

- Item 3010: Local Freedom to Speak Up Guardian Appointment – Ms Mirza, Mrs Knight and Mrs Hussain had met to discuss their respective roles in relation to Freedom to Speak Up issues. An update paper would be forwarded to the April Board meeting. **Action: Deputy Trust Secretary to add to the Board work programme.**

Actions

- 31/3/16-4: Staff Survey Results – The Director of Human Resources and OD had circulated the Staff Survey Results update for inclusion in the six month review of the Annual Plan; and
- 29/9/16-2: Assurances from Committee Chairs – Ms Mirza and Mrs Knight had met to discuss apprenticeship opportunities across the Trust. A paper would be considered by the Executive Management Team in December relating to use of the Apprenticeship levy.

3023 CHAIR'S ANNOUNCEMENTS

The Chair reported:

- The Board had received a presentation on 29 September about the latest guidance on corporate manslaughter. A self-assessment against the guidance would be completed by the Board;
- The Single Oversight Framework had been published. This replaced the Financial Sustainability Risk Rating and the scoring criteria had changed. A score of 4 now represented the highest risk and a score of 1 the lowest. Trusts had now been segmented. A score of 4 would result in intensive and mandated support by NHS Improvement whereas a score of 1 granted full autonomy. The Trust's score was 2 'limited support' due to adverse in-year financial performance;
- He had attended two workshops relating to Sustainability and Transformation Plans (STPs). Trust Boards were required to give due consideration to the delivery of control totals with a particular focus on agency costs;
- Assessment interviews would be taking place during the early part of November for the Chief Executive vacancy;
- He had attended the first meeting of the NHS Confederation Mental Health Network Board. The meeting had focussed on STPs and mental health parity of esteem; and
- The Trust featured on three occasions (for its best practice work) within the latest NHS Confederation mental health publication.

Trust Board noted the Chair's report.

3024 CHIEF EXECUTIVE'S REPORT

The Interim Chief Executive presented her report which summarised key issues taking place across the health economy and contained links to more detailed information. Ms Lees highlighted the following:

- **NHS Improvement Agency Staff Cost Controls, Reporting and Board Assurance** – Provider trusts had received two detailed communications about the strengthening of financial performance and agency expenditure controls. This included a new requirement to submit data and to publish details relating to agency costs. The Board would be required to self-certify around compliance with control totals in November;
- **Care Trust triumphs with award win at national Positive Practice Awards** – The Trust had been announced as the winner of the prestigious Crisis Care Pathway Award and had been highly commended for its work on Physical healthcare.
- **Look North Yorkshire covers the emergency facing Child and Adolescent Mental Health Services** – The Trust's AHP lead featured in the film coverage. Ms Lees also reported the Trust, in partnership with Creative Support and a voluntary care service, had opened a safe haven for young people to access between 10.00 pm and 10.00 am. There was much national interest in the initiative;
- **An Out of Area Placement in Mental Health for Adults in Acute Inpatient Care** – There would be a meeting between the three West Yorkshire mental health trusts to discuss out of area placements;
- **1 in 4 Art Exhibition** – The Trust had managed to secure, free of charge, a gallery at Salts Mill to display the artwork of mental health service users. A number of artists had attended the evening reception and the exhibition had also been well attended. It had received local and regional media coverage. A link to the artwork/event would feature on the website. The Chair commended both Mr Hogg's leadership of the event and the team that had put the exhibition together;
- **Health as a Social Movement – The Power of People in Movements** – Ms Lees encouraged Board members to read the report which highlighted the power of people in movements to improve health. It also proposed new models of engagement between institutions and social movements. Mr Hogg proposed consideration be given to generating discussion with Governors about the report. **Action: Mr Hogg and Ms Gilderdale to discuss further;** and
- **'Integration Really Works' – Positive Practice Mental Health Conference** – The Trust and Positive Practice Mental Health Collaboration had hosted the conference in Bradford on 3 October. Delegates heard from NHS England's National Mental Health Director, Tim Kendall, as well as Yorkshire based

collaborative members. All Vanguard leads had reported on their mental health workstreams.

Dr Hussain referred to the good work of the Trust as outlined within the report and considered it important that the Trust utilise social media to publicise its successes. Dr Butler believed it equally important that consideration be given to how the Trust might effectively engage all users (including those that lived outside of Bradford) about their wellbeing. Ms Lees added that as the Bradford STP was primarily focussed on prevention, the Integration and Change Board (ICB) also needed to consider the 'self-care' message.

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

3025 QUALITY AND SAFETY FEEDBACK FROM BOARD MEMBERS

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

- The Chair and Dr McElligott had visited the Assertive Outreach Team. The team worked with hard to engage groups of people that had complex health care needs. Staff members reported difficulties with getting (and keeping) the client group into secure housing. They also expressed concern about not being identified as a separate team within service line reporting. **Action: Ms Gilderdale to consider during the review of the Community Mental Health team;**
- Dr Butler and Mr Hogg had visited the Alcohol and Addiction service at Fieldhead Business Centre. An issue had been raised about the prescribing system. Mr Hogg reported he had discussed with IM&T the incorporation of the system into SystmOne and further assurance would be provided at the next Information Governance Group in November. The team, whilst generally positive about agile working, had also raised an issue about the resultant impact on appropriate meeting space availability; and
- Mr Vincent and Ms Lees had visited the Bradford City Early Intervention in Psychosis (EIP) team. Mr Vincent had been impressed by the staff safety system/process. The team had raised concerns about RiO not meeting all their needs and the proportion of their clients being refused funding for appropriate medication due to Home Office regulations. Ms Lees was investigating these matters. Ms Lees added a Staff Nurse in EIP had been redeployed from the Intensive Treatment Centre and was very positive about her new role.

Trust Board noted the information received.

3026 ASSURANCE REPORTS FROM COMMITTEE CHAIRS

The Chair invited the Committee Chairs to highlight key points from Committee meetings.

Mental Health Legislation Committee meeting, 19 October 2016

Ms Mirza gave a verbal update about the recent Mental Health Legislation Committee meeting where the following key items had been discussed:

- The First Response research report;
- Ethnicity data collection and the requirement to undertake further research relating to this;
- The use of Section 17 leave by those service users that smoked; and
- The Care Programme Approach (CPA) audit. The Committee had not been assured about the effectiveness of the approach. Ms Gilderdale added that since the meeting, a workshop had been held to consider how to improve this. As a result, each Team Leader and Ward Manager would undertake monthly deep dives into CPA performance.

Two Governors had observed the meeting and had commented positively about the holding to account questioning that had taken place.

Finance, Business and Investment Committee Meeting, 26 October 2016

Mr Vincent gave a verbal update about the recent Finance, Business and Investment Committee meeting where the following key matters had been discussed:

- The challenging financial position and the quarterly return to NHS Improvement, noting that the Trust did not propose to change the financial forecast at Quarter two;
- Corporate Manslaughter health and safety requirements;
- Capital disposal;
- Change Programme progress;
- Service line reporting;
- Use of bank and agency staff and e-rostering; and
- The Environmental Annual Report. This revealed the Trust's use of energy had increased as a result of more intense use of some buildings.

Trust Board noted the points highlighted from Committee meetings.

3027 2016/17 ANNUAL PLAN SIX MONTH REVIEW

The new approach to the six monthly review was welcomed and following key points were made:

- The update on the Staff Survey had been circulated to Board members separately. This provided assurance (along with feedback from Quality and Safety visits) that the Workforce plans, as detailed in the paper, were not having a detrimental impact on staff;
- Financial performance, which was RAG rated Red, had been discussed in detail at the Private Board meeting and would be discussed during the Public Board meeting at agenda item 15;
- The implementation of the Community Nursing specification in Bradford had resulted in negative feedback from primary care. Consequently, a map of equitable future service provision would be produced. There were lessons to be learnt from the CCG review of community nursing and the resultant consultation with GPs about this;
- GPs and Practice Nurses would be invited to join a steering group to consider effective ways of working to meet integration needs;
- It was important that the Trust was sighted at an early stage on key external risks (such as local authority funding cuts) affecting the achievement of its annual plan;
- Appendix 1 of the report highlighted a significant number of objectives and priorities had been achieved. Areas which were rated Red were subject to scrutiny by Committees and/or discussion at Board Development meetings.

3028 TRANSFORMING CARE PROGRAMME UPDATE

The Chair considered it appropriate that this matter be discussed ahead of the Integrated Performance Report in view of its links with that report.

The following key points were raised:

- Significant progress had been made against the programmes projects with 29 out of 38 rated Green;
- Three of the transformational programmes were rated Amber and one was rated Red. The latter programme related to document storage and had not been achieved due to a national inquiry into child abuse which had resulted in instructions not to destroy records and potential new requirements on the length of time records had to be retained. Consequently, the programme was deferred until 2017/18;

- The Informatics Telephony savings would not be achieved during the financial year as had previously been highlighted. However, it was now envisaged that greater recurrent efficiencies would be achieved in this area from 2017/18;
- The 2016/17 Agile Working programme efficiencies were being achieved. However, this programme was rated Amber due to failure to identify 2017/18 recurrent targeted savings; and
- Investment in/use of technology and skill mix were key to achieving 120 minutes per clinician per day of freed up time. Dr McElligott had recently visited Bradford University and Mrs Knight had visited NHS Digital to try to develop an understanding of how the Trust might make better use of its technology. The use of technology would also be the focus of a Board Development meeting.

Trust Board noted the action underway to mitigate the risks to delivery of the transformation programme.

3029 **INTEGRATED PERFORMANCE REPORT (IPR) – SEPTEMBER 2016 DATA: EXCEPTION REPORTING**

The presentation slides assessed progress against the Trust's key targets and performance indicators as at September 2016 and provided narrative reports on areas that were currently off trajectory. The following key areas were discussed or noted during the meeting:

- A new slide relating to Accident and Emergency waiting times at Airedale NHS Foundation Trust and Bradford Teaching Hospitals NHS Foundation Trust had been incorporated into the report. The Trust had discussed with the West Yorkshire Vanguard how it might support those trusts to achieve their performance targets in this area;
- The Single Oversight Framework came into force on 1 October. Shadow reporting of operational/quality and new financial metrics was provided in the dashboard. The financial risk scores had reversed from the Risk Assessment Framework with 1 now being the lowest risk compared to 4 previously. The Trust's current score was 2 as a result of adverse in year performance. Consequently, it was subject to limited support by NHS Improvement; and
- The key risks faced by the Trust related to: use of local medial staffing, workforce, maintaining progress with Meridian, managing CMHT overspend, mandatory training and delivery of Procurement and Estates cost improvement plans (CIPs).

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

3030 **BOARD ASSURANCE FRAMEWORK (BAF)**

The Chair reported the BAF would be considered in detail at the Board Development meeting taking place at 1.30 pm.

3031 **CORPORATE RISK REGISTER**

The Chair reported the Corporate Risk Register would be considered in detail at the Board Development meeting taking place at 1.30 pm.

3032 **NHS IMPROVEMENT QUARTERLY SUBMISSION**

Mr Vincent provided the following initial reflections:

- The Trust continued to face financial pressures and was currently experiencing an adverse plan variance of approximately £900,000. Mrs Romaniak added that whilst mitigations were in place to address the variance, all mitigations and CQUINs would need to be realised throughout the year in order to achieve the forecast year end out-turn;
- The Finance, Business and Investment Committee had scrutinised the NHS Improvement Quarterly return at its meeting on 26 October and concluded the Financial Sustainability Risk Rating (FSRR) score should remain at a '3' and the forecast outturn unchanged;
- Future returns would reflect the Single Oversight Framework (SOF) which superseded the FSRR on 1 October 2016.

The Chair thanked the Finance team for the significant amount of work being undertaken in order to maintain a grip on the financial situation. Mrs Romaniak welcomed the vital support of Operational colleagues and Deputy Directors in monitoring the situation and implementing mitigations.

3033 **BOARD BUSINESS CYCLE**

The Trust Secretary submitted the Board Business Cycle which outlined those items scheduled for future meetings.

The following additions were agreed:

- Agency self-certification paper (November 2016);
- Approval of the Governance Manual (November 2016); and
- Freedom to Speak Up Guardian Update (April 2017).

Trust Board noted the items contained within the Board work programme.

3034 COMMITTEE APPROVED MINUTES

A paper was presented containing approved minutes from the Mental Health Legislation Committee meeting held on 20 July 2016.

Trust Board noted the contents of the Committee approved minutes.

3035 ANY OTHER BUSINESS

There were no items of other business.

3016 DATE AND TIME OF NEXT MEETING

The next meeting will be held at 10.00 am on Thursday, 24 November 2016 at Bradford City Training Services, 39/41 Chapel Street, Bradford.

The meeting concluded at 12.45 pm.

**TRUST BOARD MEETING (PUBLIC)
27 OCTOBER 2016**

ACTIONS

Ref No	Actions requested	Timescale	Progress
31/3/16-4	<u>Staff Survey Results</u> Director of HR/OD to include an update on progress within the Annual Plan 6-monthly review.	October 2016	Update circulated to Board members
30/6/16-1	<u>Patient and Carer Experiences</u> Deputy Chief Executive/Director of Nursing to review the effectiveness of actions in place following Patricia's complaint.	January 2017	Audit to be undertaken by the Complaints team in January 2017
29/9/16-1	<u>Integrated Performance Report – August 2016 Data</u> Director of Finance, Contracting and Estates to arrange a review of general car parking arrangements.	January 2017	
29/9/16-2	<u>Assurances from Committee Chairs</u> Nadira Mirza to discuss with Mrs Knight the opportunities for apprenticeships across the Trust	Two months	Reported as completed at Trust Board on 27/10/16
27/10/16-1	<u>Matters Arising</u> Deputy Trust Secretary to add Freedom to Speak Up report to the April Board meeting agenda.	One month	Completed
27/10/16-2	<u>Declarations of Interest</u> Trust Secretary to incorporate Ms Mirza's and the Chair's declared interests within the Register of Interests.	One week	Declaration sent to both Board members for completion
27/10/16-3	<u>Chief Executive's Report</u> Trust Secretary and Interim Director of Nursing and Operations to consider how to engage Governors with the 'Health as a Social Movement – The Power of People in Movements' report.	One month	Agenda item to be added to the Y&YCSRG agenda in December

27/10/16-4	<u>Quality and Safety Feedback from Board Members</u> Director of Nursing and Operations to take account of feedback from the Assertive Outreach Team (during the review of the Community Mental Health team) regarding the separate classification of the team within service line reporting.	Two months	
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