

**BOARD MEETING**

**27 OCTOBER 2016**

Paper Title:	Minutes of the Trust Board Meeting held on 29 September 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 29 September 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 29 September 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
	Helen Tate	Principal Dental Nurse (for agenda item 4)
	Jacqueline	Former Carer (for agenda item 4)

One member of the Trust (agenda items 9-17)

#### **2999 WELCOME AND APOLOGIES**

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

#### **3000 DECLARATIONS OF INTEREST**

There were no declarations of interests.

#### **3001 ISSUES RECEIVED FROM THE PUBLIC**

There were no issues received from the public.

## 3002 PATIENT AND CARER EXPERIENCES

This month's patient story was told by Jacqueline who described the difficulties of living with and caring for her sister who had Downs Syndrome and, in later life, developed dementia. Jacqueline outlined some of the obstacles to receiving quality care. She was very complimentary about the support received from Waddiloves and about the work undertaken by the Community Dental Service to make the services more dementia-friendly.

During ensuing discussion, the following key points were made:

- Jacqueline had received a carers assessment which had proved beneficial to her;
- The work undertaken by the Community Dental Service to make the service more dementia friendly was wide-ranging. This included: changes to toilet signage and clocks; completion of Dementia Awareness training at Bradford College; inviting a representative from Alzheimers to talk to staff about dementia; and creating close links with Dementia Access Alliance. The team had also arranged for a dementia equivalent 15 step quality challenge to be undertaken in November; and
- Local people with learning disabilities benefitted from having a specialist learning disabilities service at Waddiloves.

**Trust Board thanked Jacqueline for sharing her story.**

## 3003 MINUTES OF THE MEETING HELD ON 28 JULY 2016

The minutes of the meeting held on 28 July 2016 were agreed as a true and accurate record.

## 3004 MATTERS ARISING

### Actions

- 28/7/16-1: Patient and Carer Experiences – The Interim Director of Nursing reported the Research and Development team was investigating whether any neurological studies into stammering were being undertaken and, if so, would investigate the Trust's possible involvement; and
- 28/7/16-2: Integrated Performance Report – June 2016 Data – The Interim Director of Nursing reported a deep dive into the consistency of performance, in relation to the measurement of cardio metabolic assessment and treatment, would be undertaken by the Quality and Safety Committee in November.

## 3005 CHAIR'S ANNOUNCEMENTS

The Chair reported:

- The Annual Members' Meeting (AMM) and Annual General Meeting (AGM) had taken place on 27 September at Bradford City Training Services. The format had been more interactive than that at previous AGMs and this had proven to be beneficial. Extra time had been allocated to the question and answer session with the Board and the round table discussions about the year ahead had been enlightening. A common theme arising from those discussions related to the need for the Trust to have more visibility in the community. Board members recognised the contents of the welcome pack were predominantly mental health focussed and outlined a need for community services to be featured in future years;
- The Chief Executive recruitment process was underway and the closing date for applications was 3 October 2016;
- He had been elected to become a member of the Mental Health Network Board; and
- The 1 in 4 Mental Health art exhibition would be taking place at Salts Mill from 6 to 10 October. Directors were invited to attend the opening reception.

**Trust Board noted the Chair's report.**

## 3006 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. The report was presented in a revised format and would be used as part of the Board in Brief briefing process. Ms Lees highlighted the following:

- **Safe Haven** – This service opened on 9 August and provided a space for vulnerable people to access urgent mental health support. It was envisaged that the service would assist in reducing some of the pressure on Accident and Emergency services;
- **Social Care for Older People** – The Kings Fund and the Nuffield had published a joint report which considered the current state of social care services for older people living in England. The report highlighted work needed to address the major challenges in shaping the development of social care over the next five years. This included a requirement for organisations to work more closely together;
- **Single Oversight Framework** – NHS Improvement had published the new Single Oversight Framework (SOF). This contained a number of changes to the finance metrics that were helpful and consistent with Trust feedback via the consultation. However, the lack of metrics within the framework relating to community services remained unchanged. The Board noted separately that the

Trust would be developing its own metrics for assessing Community Services as part of the 'outstanding' work plan. Two of the operational performance metrics were a cause of concern: one related to sustained month on month achievement of cardio metabolic assessments (the Quality and Safety Committee would be undertaking a deep dive into this area) and the other related to ICD10 Coding (this was being reviewed by the Executive Management Team);

- **Twitter** – Members of the Executive Management Team (EMT) and senior managers had attended a Twitter masterclass. This was part of plans to increase the Trust's use of social media. Mr Hogg added a workshop would be taking place relating to social media from a leadership context and invited Board members to attend. Mr Hussain outlined the importance of the Trust being able to respond quickly to negative responses received in response to tweets; and
- **First Mental Health Trusts Rated Outstanding by the CQC** – Northumberland, Tyne and Wear FT and East London FT had become the first mental health trusts in the country to achieve an outstanding rating by the Care Quality Commission (CQC). Directors had been encouraged to visit the trusts and consideration would be given to inviting a CQC inspector to share their learning with the Trust.

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

### 3007 **QUALITY AND SAFETY FEEDBACK FROM BOARD MEMBERS**

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

- Ms Mirza reported she had visited the Staff Bank with Ms Lees. The Bank was having a positive impact and was decreasing the reliance on agency staff. Issues raised related to the booking of holidays and the provision of staff to work night shifts. Ms Lees added a few teething problems had been identified since the visit and these were being addressed;
- Ms Mirza also reported she had visited the Improving Access to Psychological Therapies (IAPT) service at Somerset House with Dr McElligott. It had been highlighted that 60% of the service users were receiving high intensity therapy. An issue was raised relating to communication difficulties between staff and those service users from Eastern European communities that did not speak English. In response, Ms Lees reported the Trust was reviewing its interpreter services. Dr McElligott added the staff had also raised an issue about an inability to refer relevant service users directly to chronic pain services and he was looking into this;
- Mr Hogg informed the Board he had undertaken a visit to the Heather Ward following a report to the Quality and Safety Committee. The huddle had confirmed the strong teamwork approach by the ward staff with a focus on managing incidents and risk. He also reported he had observed a governance

- meeting of EIP/AOT services which had been well attended by clinicians and demonstrated the complexity of clients being supported in the community;
- Mr Vincent reported that both he and Mrs Knight had visited Hillside Bridge. Staff had raised concerns about IT issues which were now being addressed. As a result of a shortage of District Nurses, the team had put in place a Health Care Support programme to upskill Healthcare Assistants and a Staff Nurse development programme to support career progression into district nursing;
  - Mr Banks highlighted he had attended his first Health and Safety Group meeting. Some concerns had been raised which were estates focussed and these were to be considered by the Finance, Business and Investment Committee (FBIC); and
  - Mr Banks also highlighted he had attended an HFMA Conference in London. A Non-Executive Director had addressed the conference about research he had undertaken into links between housing issues and poor health. Mr Banks would be meeting with him in due course.

**Trust Board noted the information received.**

### 3008 **ASSURANCE REPORTS FROM COMMITTEE CHAIRS**

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

*Quality and Safety Committee meeting, 16 September 2016*

Dr Butler gave a verbal update about the recent Quality and Safety Committee meeting where the following key matters had been discussed:

- Equality and Diversity – the Committee had been assured that the Trust was meeting its statutory obligations in the absence of the Equality and Diversity lead, who was on maternity leave. However, the Committee did express concern about some important items of work which were not being undertaken;
- The mortality review;
- The deep dive into pressure ulcers; and
- Service user and carer engagement. The service user representative on the Committee had given assurance that service users were involved in the development of the new You and Your Care strategy and in the Chief Executive recruitment process.

*Audit Committee Meeting, 5 September 2016*

Dr Butler believed the paper highlighted the key points.

Mr Vincent highlighted the following key points:

- The principal discussion at the meeting had focussed on the financial position and mitigations in place to address this. At month four, the Trust was £561k adrift from the profile designed to reach the Trust's planned surplus. Mrs Romaniak added the underlying position had not improved at month five. However, the closure of the Intensive Therapy Centre meant the net trading loss would reduce to minimal asset holding cost. A number of national CQUINS were phased in quarter four and other mitigating actions (such as the implementation of the estates action plan) were targeting improvement in subsequent periods. Should the Trust not achieve the year-end target, it would not receive the £790k of Sustainability and Transformation funding. Mrs Romaniak had appraised NHS Improvement of the position earlier in the week including the key areas of risk around medical locums, the Meridian review and reducing discretionary expenditure; and
- The Committee received the results of the deep dive into the Trust's workforce challenges and responses. These highlighted that challenges over turnover and recruitment to posts, particularly Band 5 nurses and consultants, were likely to remain for the foreseeable future. Work was underway within the Trust to explore new balances of skill mix, particularly those which maximised the impact of high level professional expertise by lowering professional barriers and developing support staff. Mrs Knight added the Committee had requested information about future retirement projections and the potential impact that these would have on service provision as this would support the development of actions to mitigate risks and ensure future workforce capacity and capability. It was envisaged the information would enable the Trust to support the development of actions to mitigate risks and ensure future workforce capacity and capability. Ms Lees believed the Trust needed to develop a vision for the future and to shape its workforce around that vision. She also believed that the national Agenda for Change payment system required review. Ms Mirza suggested the Committee request an update about the number of Apprenticeship opportunities offered by the Trust. **Action: Ms Mirza to discuss with Mrs Knight.**

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

### **3009 INTEGRATED PERFORMANCE REPORT (IPR) – AUGUST 2016 DATA: EXCEPTION REPORTING**

The presentation slides assessed progress against the Trust's key targets and performance indicators as at August 2016 and provided narrative reports on areas that

were currently off trajectory. The following key areas were discussed or noted during the meeting:

- The Patient-Led Assessment of the Care Environment (PLACE) slide on page 20 was new and would be incorporated into the IPR on an annual basis. The combined score for food was lower than the previous year driven by the organisational food score. This reflected the need for work on nutritional policy and to respond immediately to special dietary needs rather than within 24 hours. Issues arising from PLACE visits were captured and addressed through an action plan. Ms Lees added car parking had been raised as an issue during the PLACE visits and asked if a plan was in place to address car parking concerns. **Action: Director of Finance, Contracting and Estates to arrange a review of general car parking arrangements;**
- The Service User Experience slide (21) showed a downward trend in performance. This was as a result of a fluctuation in results for Inpatient Services, Dental and Administration (ISDA). A peer review of the unit had identified that workforce issues (such as the use of Bank and Agency staff) were leading to a lack of involvement. The main issue identified in the Dementia Assessment Unit related to staffing numbers. The Quality and Safety Committee had agreed that a deep dive would be undertaken into this area to determine the impact this was having on quality;
- The Change Programme summary slide (23) highlighted the Estates document storage rationalisation was rated red and the CIP would not be achieved. Work was in progress to agree a substitution CIP saving for non-clinical records but this was unlikely to fully mitigate the situation. Dr Butler requested that the narrative within the Change Programme slide be simplified and focussed on assurance; and
- The key risks within the financial slides had been discussed in detail earlier in the meeting. Additionally, the local authority cash payment terms had now been agreed and the Board was required to discuss the implications of not having received a confirmed Capital Control Total on prioritised Board approved expenditure plans. This discussion would take place at the Board Development meeting later in the day.

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

### 3010 LOCAL FREEDOM TO SPEAK UP GUARDIAN APPOINTMENT

As a result of the Francis Report, the Standard NHS Contract for 2016/17 contained a requirement for Local Freedom to Speak Up Guardians to be appointed in every trust. Following a paper and discussion at EMT, an assessment was made that a full-time person was not required at the Trust to undertake this role, given the culture and size of the organisation. It was proposed that the post would sit well within the Complaints and Litigation Manager's role, where, following the development of her team, there was capacity to undertake the role. The Board was also informed that the Trust's Hearing the Concerns of Workers policy had been reviewed against the national policy and was

compliant. It would now be updated with details of the Trust's Guardian and other key roles.

A national Guardians office had also been established which would bring together Local Guardians to share good practice. It was envisaged a regional network of Guardians would be established in the near future.

#### **Trust Board:**

- **Approved the following appointments which would commence within the next month:**
  - **Local Freedom to Speak Up Guardian – Louise Hussain, Complaints and Litigation Manager**
  - **Executive Lead for FTSU issues – Sandra Knight, Director of Human Resource and OD**
  - **Non-Executive Lead for FTSU issues – Nadira Mirza, Non-Executive Director; and**
  
- **Noted the national Guardianship arrangements and compliance of the Trust's Freedom to Speak Up policy with the national policy.**

#### **3011 WORKFORCE RACE EQUALITY STANDARDS 2016 REPORT**

Ms Mirza provided the following initial key reflections:

- The Workforce Race Equality Standards (WRES) required the Trust to self-assess against nine indicators;
- On the whole, the experiences of black and white staff were not too dissimilar. However, indicator 8 highlighted that 16% of BME staff as opposed to 5% of white staff experienced bullying; and
- The action plans were focussed on the BME workforce and needed to relate to the workforce as a whole.

During ensuring discussion, Board members highlighted the following:

- It was important for the Trust to determine why different groups within the workforce did not perform the same and how it might develop an environment that provided all staff with equal opportunities and experiences;
- Staff should be provided with guidance about how to effectively prepare for interviews with people from different communities;
- The action plan contained a long list of actions and would benefit from key headings and sections; and

- The Trust needed to recognise cultural differences both in terms of delivery of services and in the way it treated staff.

**Trust Board:**

- **Noted the draft WRES data submission;**
- **Noted the proposed actions to address the findings from the self-assessment; and**
- **Supported the implementation of the action plan.**

**3012 BOARD BUSINESS CYCLE**

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

The following amendments were agreed:

- The ICB update would be included in the Chief Executive's papers;
- The Local Freedom to Speak Up Guardian had been discussed at the September meeting and would not be discussed again at the October meeting;
- The Lightning Review would be considered by the Quality and Safety Committee rather than at Trust Board.

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

**3013 ANNUAL AUDIT LETTER**

**Trust Board noted the Annual Audit Letter for the one month ended 30 April 2015.**

**3014 COMMITTEE APPROVED MINUTES**

A paper was presented containing approved minutes from the:

- Finance, Business and Investment Committee meeting held on 27 July 2016;
- Quality and Safety Committee meeting held on 5 August 2016; and
- Charitable Fund Committee held on 8 February 2016.

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

**3015 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, 27 October 2016 at New Mill, Victoria Road, Saltaire, Shipley.

The meeting concluded at 12.35 pm.

**TRUST BOARD MEETING (PUBLIC)  
29 SEPTEMBER 2016**

ACTIONS

Ref No	Actions requested	Timescale	Progress
31/3/16-4	<u>Staff Survey Results</u> <b>Director of HR/OD</b> to include an update on progress within the Annual Plan 6-monthly review.	October 2016	
30/6/16-1	<u>Patient and Carer Experiences</u> <b>Deputy Chief Executive/Director of Nursing</b> 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
28/7/16-1	<u>Patient and Carer Experiences</u> <b>Deputy Chief Executive/Director of Nursing</b> to determine whether any neurological studies into stammering are being undertaken and, if so, to investigate the Trust's possible involvement.	September 2016	Research and Development team pursuing
28/7/16-2	<u>Integrated Performance Report – June 2016 Data</u> <b>Deputy Chief Executive/Director of Nursing and Dr Butler</b> to discuss the timetabling of a deep dive into the consistency of reporting in relation to the measurement of cardio metabolic assessment and treatment of patients with psychosis.  <b>Director of Human Resources and OD</b> to ensure themes arising from exit interviews are incorporated into the workforce planning deep dive.	August 2016  August 2016	Deep dive to take place at the November Quality and Safety Committee  Paper submitted to FBIC
29/9/16-1	<u>Integrated Performance Report – August 2016 Data</u>  <b>Director of Finance, Contracting and Estates</b> to arrange a review of general car parking arrangements.	January 2017	
29/9/16-2	<u>Assurances from Committee Chairs</u> <b>Nadira Mirza</b> to discuss with Mrs Knight the opportunities for apprenticeships across the Trust	Two months	