

BOARD MEETING

28 JULY 2016

Paper Title:	Minutes of the Trust Board Meeting held on 30 June 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 30 June 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 College, Great Horton Road, Bradford at 10.00 am on Thursday 30 June 2016

Present:	Michael Smith	Chair
	Simon Large	Chief Executive
	David Banks	Non-Executive Director
	Sue Butler	Non-Executive Director
	Nadira Mirza	Non-Executive Director
	Rob Vincent	Non-Executive Director (for agenda items 1-8 and 13-22)
	Zulfi Hussain	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
	Sandra McIntosh	Public Governor, Bradford South
	Colin Perry	Public Governor, Bradford West
	David Spencer	Public Governor, Bradford West
	Hazel Chatwin	Public Governor, Craven
	Ann West	Public Governor, Shipley
	Cathy Woffendin	Non-Clinical Staff Governor and Deputy Director, Nursing, Childrens & Specialist Services
	Louise Hussain	Patient Advice and Complaints Manager (for agenda item 4)
	Magda O'Connell	Patients Advice and Complaints Officer (for agenda item 4)
	Patricia	Carer (for agenda item 4)

Two members of the Trust and three members of the public

2945 WELCOME AND APOLOGIES

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

2946 DECLARATIONS OF INTEREST

There were no declarations of interests.

2947 ISSUES RECEIVED FROM THE PUBLIC

The Trust Secretary reported the Board had received an email from a carer about the services provided by a community mental health team. Due to the confidentiality of the issue, the matter was being dealt with outside the meeting and the Deputy Chief Executive/Director of Nursing would be meeting with the carer following an investigation of the matter.

2948 PATIENT AND CARER EXPERIENCES

This month's patient story from Patricia (a carer) was told by Louise Hussain and was about Patricia's experiences of mental health services. Patricia initially raised a complaint with the Trust about a lack of appropriate support for her daughter. Whilst the investigation of the complaint concluded that Patricia's daughter had been offered appropriate support in response to her needs, action was taken to improve Patricia's experiences as a carer. This included a fresh carers assessment, to include Patricia in future Care Programme Approach (CPA) reviews, to offer her a role in evaluating SPA services and to invite Patricia to take part in future service reviews.

During ensuing discussion, the following key points were made:

- Whilst the story demonstrated how the Trust responded positively to complaints, it was important that any actions implemented as a result of a complaint were subsequently reviewed to ensure these remained effective **Action: Deputy Chief Executive/Director of Nursing to review the effectiveness of the actions in place following Patricia's complaint;**
- The Trust recognised there was a need to increase the number of service users and carers taking part in service redesign steering groups. There was also a need to improve communication processes with carers. Additionally, the Board was aware that, due to confidentiality reasons, carers were not as involved as they might be in a service user's care; and
- The Trust worked closely with other agencies (such as the police) to ensure the care needs of those people suffering from mental health problems were met.

Trust Board thanked Patricia for sharing her story.

2949 MINUTES OF THE MEETING HELD ON 26 MAY 2016

The minutes of the meeting held on 26 May 2016 were agreed as a true and accurate record, subject to the following amendment:

Item 2934: Chief Executive's Report – the last sentence of the penultimate paragraph to read 'Mrs Knight added the Engaging Leaders programme had been shortlisted for a National Health Management award'.

2950 **MATTERS ARISING**

Actions

- 28/4/16-3: Chief Executive's Report – Mr Large reported Claire Murdoch was unable to attend the Mental Health Taskforce event but would be visiting the Trust in August 2016;
- 26/5/16-1: Minutes of the Meeting Held on 28 April 2016 – Dr McElligott reported the Corporate Risk Register as a whole had been reviewed by EMT and a revised version would be presented to Trust Board in July;
- 26/5/16-2: Assurance Reports from Committee Chairs – Ms Lees reported the pressure ulcers deep dive incorporated information about the number of pressure ulcers transferred to the Trust following the deregistration of a number of nursing homes; and
- 26/5/16-3: Nursing Strategy – Ms Lees reported that reference to the Workforce Strategy had been incorporated into the Nursing Strategy. The action plan would be considered by the Nursing Council at its meeting in July 2016.

2951 **CHAIR'S ANNOUNCEMENTS**

The Chair reported the Chief Executive had announced he would be retiring at the end of August 2016. Ms Lees would be appointed as the Interim Chief Executive.

Trust Board noted the Chair's report.

2952 **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:

- **Care Quality Commission Strategy 2016-2021** – The CQC had published a new 5-year strategy relating to a more targeted, responsive and collaborative approach to regulation. The Strategy was based around four key themes: i) encourage improvement, innovation and sustainability in care; ii) deliver an intelligence-driven approach to regulation; iii) promote a single shared view of quality; and iv) improving efficiency and effectiveness; and
- **Lightening Review** - this report was produced by the Children's Commissioner and highlighted issues in relation to Child and Adolescent Mental Health Service (CAMHS) referrals, access and waiting times. Mr Large reported a review of

similar issues within the Trust's Child and Adolescent Mental Health Services (CAMHS) was being undertaken and an update would be provided at a future Board meeting (October). Mr Large added the Trust had expressed an interest with NHS England to manage tier four CAMHS beds as part of a wider West Yorkshire bid.

Mrs Knight referred to the item within Mr Large's report relating to the 'NHS Workforce Race Equality Standards (WRES) 2015'. She reported a paper, highlighting action taken by the Trust in response to the report, would be forwarded to the September Board meeting.

Mrs Romaniak informed Board members that since the Chief Executive's report had been circulated, NHS Improvement had recently published its new single oversight framework for consultation with responses required by early August 2016. Subject to the outcome of this process, the Framework would replace Monitor's risk assessment framework. The scope of the framework was broader than the RAF and represented more connected regulatory monitoring and oversight by NHS Improvement and CQC.

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

2953 **QUALITY AND SAFETY FEEDBACK FROM BOARD MEMBERS**

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

- Dr Butler reported that she had visited the Ashbrook Ward with Dr McElligott. They had found the atmosphere within the ward to be calm. An issue was raised relating to the effectiveness of the Trust's recruitment processes in preparing candidates for the work they would be undertaking. Dr McElligott added the mental health inpatient wards within Bradford and Airedale were working together more effectively to improve service provision. Dr McElligott believed it important that specialist inpatient wards join this 'single operating' style of approach;
- Ms Mirza informed Board members she had attended the Lynfest event at Lynfield Mount hospital and believed the service users had thoroughly enjoyed the occasion;
- Mrs Knight and the Chair had undertaken a quality and safety visit to the Clinical Audit team. Concerns had been raised about the ownership, quality, number and effectiveness of action plans. Dr Butler informed Board members action plans had been the focus of a discussion at a recent Quality and Safety Committee meeting. The conclusion had been reached that these needed to be more succinct. Ms Lees added the Committee also considered it appropriate that individual action plans focus on two or three key areas. Dr Hussain considered it appropriate that actions be prioritised, categorised and subject to a 'so what' test; and

- Dr Butler reported that both she and Ms Lees had undertaken a follow up visit to the Older People's Mental Health team based at Meridian House. The visit had been very positive and a number of issues identified during the previous visit had been addressed.

Trust Board noted the information received.

2954 **ASSURANCE REPORTS FROM COMMITTEE CHAIRS**

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

Quality and Safety Committee meeting, 17 June 2016

Dr Hussain had chaired this meeting in Dr Butler's absence. The Committee received a number of comprehensive annual reports which provided the Committee with assurance about the work being undertaken as identified in the reports. The Committee had discussed the issue of risk registers which did not have risks identified. Further assurance work would be progressed through the Deputy Director's meeting. The Committee had also had a lengthy discussion about safeguarding adults and children.

Finance, Business and Investment Committee meeting, 20 June 2016

In Mr Vincent's absence, Mrs Romaniak highlighted the following key points:

- There had been a detailed discussion at the meeting about the challenging financial position. This had been considered by the Executive Management Team and would be subject to further review at future FBIC meetings and at the EMT time-out meeting on 20 July;
- The Committee had also discussed revised NHS Improvement reporting and identified some concerns relating to the reporting timescales which FBIC had agreed would be raised with NHS Improvement;
- Options to bring forward and substitute efficiency savings had been discussed and would be reviewed again in July;
- The Trust had accepted an increased control total but had not yet been provided with eligibility criteria for accessing STF funding. This was a cause for concern;
- A review of the ITC closure had provided the Committee with assurance that the actions were being delivered and well managed and that the anticipated trading cost pressure was being mitigated;
- The Committee had commenced a programme of work to review corporate and estates costs and had completed the second stage of work that would support 2017/18 annual planning and explore options to bring forward savings into 2016/17;

- The Committee had noted clustering levels had improved and that leadership of the group had transferred to the Deputy Director of Operations; and
- Discussion had also taken place about a number of estates cost pressures that would need to be managed.

Trust Board noted the points highlighted from Committee meetings.

2955 **INTEGRATED PERFORMANCE REPORT (IPR) – MAY 2016 DATA:
EXCEPTION REPORTING**

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

- The Financial Sustainability Risk Rating (FSRR) remained at a 3 but as a consequence of the challenging financial position, provided very little I&E margin variance headroom before the Rating would drop to an FSRR of 2. due to the challenging financial position. This was being closely monitored through the Board, Finance, Business and Investment Committee, EMT and individual Business Unit meetings. A reduction to a FSRR of 2 would result in greater scrutiny by NHS Improvement. Ms Lees added the Trust was targeting new actions to review and reduce bank and agency costs in inpatient areas. Mrs Romaniak reported that discussions were ongoing with the local authority to agree revised terms and conditions in relation to cashflow and 'in-month' payments;
- The labour turnover slide (16) revealed a high turnover of staff in a number of areas, particularly those which were mental health related. This was not unusual within mental health and community organisations but work was underway to gather more data from staff about their reasons for leaving the Trust. It was noted that some of the percentages on the slide provided a misleading picture due to the small number of people working in some teams. **Action: Director of Human Resource and OD to ensure that future reports highlight numbers as well as percentages;** and
- The service user experience scores linked to the Friends and Family Test were generally positive but there were lower scores relating to the categories of feeling safe and involved across the Inpatient Services, Dental and Administration Business unit. Further work was being undertaken over the next few months to understand the data and identify suitable actions.

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

2956 JOHN'S CAMPAIGN CQUIN

Ms Mirza provided the following reflections about the paper:

- The CQUIN for John's Campaign related to the support provided to those people caring for a person that was accessing the Trust's inpatient Dementia services. It required the Trust to be flexible around visiting times and to recognise the contribution a carer could make to a service user's daily care routine. A leaflet and visiting time card had been produced in support of the CQUIN which represented a potential £348K income for the financial year 2016/17;
- The leaflet content required improvement to make it more appealing to carers.

Both Mr Large and Dr Butler considered it appropriate that the initiative be rolled out to other inpatient wards.

Trust Board:

- **Approved the content of the John's Campaign leaflet and acknowledged that further improvements would be made throughout the year in response to further consultation and feedback from carers/commissioners following implementation of the resources within the Trust; and**
- **Supported the concept and additional resources produced (poster, carer's passport) in support of the campaign.**

2957 BME DIVERSITY IN EMPLOYMENT STRATEGY UPDATE

Dr Hussain introduced the paper and reported the Strategy contained an aspirational target to achieve a workforce that was reflective of the wider population. The paper proposed that the timescale for achievement of this target be extended by five years to 2025 due to the Trust needing to recruit an additional 402 BME staff and labour turnover being around 11%. Board members considered it important that the target timetable be maintained. They also outlined the importance of the aspiration being reflected within the Workforce strategy.

Trust Board noted the progress that had been made in delivering the strategy.

2958 SAFER STAFFING LEVELS SIX MONTHLY REVIEW

Dr Butler provided the following initial reflections:

- The information contained within the report provided assurances in relation to the recommendations; and
- Board members had an opportunity to verify the assurances received about staffing levels during their service visits.

During ensuing discussion, the Deputy Chief Executive/Director of Nursing made the following key points:

- The national reporting guidance relating to safer staffing levels required review as achievement of the targets did not guarantee the staffing levels were safe; Ms Lees informed the Board she would be raising this issue at national level;
- An independent review of the Dementia Assessment Unit staffing levels would be undertaken;
- Specialising within Meridian House was being reviewed; and
- EMT would be reviewing, at the end of August, work undertaken on the development of the acuity tool for inpatient wards.

Trust Board:

- **Was assured that the analysis demonstrated current staffing levels were providing the cover needed to deliver safe and good quality care;**
- **Noted the increasing levels of acuity within inpatient areas and the need to adjust the baseline staffing ratio in response on a case-by-case basis, supported by the new peripatetic workers and in-house staff bank;**
- **Noted an effective e-rostering system was currently being introduced and would ensure the accuracy of date; and**
- **Was assured of the impact of introducing the in-house staff bank, peripatetic team and five hour overtime standard.**

2959 COMPLIANCE AGAINST CQC REGISTRATION

Dr McElligott believed the following provided evidence of the Trust's compliance with CQC registration requirements:

- The Trust's Intelligent Monitoring Report did not contain any elevated risks;
- Key Lines of Enquiry (KLOEs) self-assessments had been completed by services; and
- Committee papers identified whether the content provided assurance against specific CQC Fundamental Standards.

Trust Board:

- **Recognised the improved process and continuing work to provide assurance against CQC requirements; and**
- **Confirmed it was sufficiently assured with performance against the five key questions as reflected in the report.**

2969 **MEDICAL APPRAISAL AND REVALIDATION ANNUAL REPORT OF THE RESPONSIBLE OFFICER**

Dr McElligott believed the paper provided assurance that the Trust had effective governance systems in place in respect of medical appraisal and medical revalidation. The completed appraisal rate in 2015/16 was 92%. There were concerns about the conduct of two doctors which were investigated, addressed and remedied without the need for formal disciplinary action or GMC referral.

Trust Board:

- **Agreed the report was an accurate record of the Trust's medical appraisal and revalidation systems during 2015/16; and**
- **Approved the 'statement of compliance' confirming that the Trust, as a Designated Body, was in compliance with the Medical Profession (Responsible Officer) Regulations.**

2970 **2016/17 IN-YEAR MONITORING RETURNS TO NHS IMPROVEMENT**

Mr Vincent introduced the paper which outlined the impact of new and much earlier deadlines for submission of detailed monitoring templates for NHS Improvement (formerly Monitor). The paper sought to secure Board approval (on the recommendation of FBIC) of revised processes for sign off and submission of quarter end monitoring submissions. It also sought to inform the Board of EMT approved processes for sign off and submission of monthly monitoring submissions.

Trust Board:

- **Considered the FBIC recommendations and approved the revised processes for sign off and submission of quarter end monitoring submissions to NHS Improvement;**
- **Noted EMT approved processes for sign off and submission of monthly monitoring submissions (detailed templates and narrative) to NHS Improvement; and**
- **Noted the agreement by FBIC to provide feedback to NHS Improvement on potential impacts arising from an abridged submission timeline.**

2971 **ANNUAL PLAN STATEMENTS**

Mr Banks believed the paper (and Committees) provided assurance around the robust levels of corporate governance operating across the Trust. He also believed the Governor training programme and Governor performance evaluation results provided evidence that Governors had been given training which enabled them to understand their roles.

Trust Board:

- **Considered the evidence provided in the paper and at Appendix 1; and**
- **Approved the statement (at Appendix 2) to be submitted to NHS Improvement.**

2972 BOARD BUSINESS CYCLE

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

The following additional items had been agreed at the Board meeting:

- Lightening Review Update (October);
- Workforce Race Equality Standards 2015 Report (September);
- Review of IM&T Arrangements (September – private paper).

Trust Board noted the items contained within the Board work programme and approved the Board Development and Forward to Excellence programmes.

2973 ANNUAL REPORT BY THE SENIOR INFORMATION RISK OWNER (SIRO)

Mr Hogg informed the Board this was the first written annual report to the Board from the SIRO. Previous reports had been via verbal updates to the Information Governance Group. The annual report would, in future, be presented to the Board at the same time as the Annual Report.

Trust Board noted:

- **The assurances provided in the paper; and**
- **The information governance objectives for 2016/17.**

2974 COMMITTEE APPROVED MINUTES

A paper was presented containing approved minutes from the Quality and Safety Committee meeting held on 6 May 2016, the Audit Committee held on 11 April 2016 and the Finance, Business and Investment Committee held on 27 April 2016.

Trust Board noted the contents of the Committee approved minutes.

2975 ANY OTHER BUSINESS

There were no items of other business.

2976 **DATE AND TIME OF NEXT MEETING**

The next meeting will be held at 10.00 am on Thursday, 28 July 2016 at Mind the Gap in Bradford.

The meeting concluded at 12.30 pm.

**TRUST BOARD MEETING (PUBLIC)
30 JUNE 2016**

ACTIONS

Ref No	Actions requested	Timescale	Progress
31/3/16-3	Deputy Chief Executive to produce a report about IAPT and tertiary psychological therapy services.	3 months.	To be considered at July Board
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.	
28/4/16-2	<u>Matters Arising</u> Deputy Chief Executive/Director of Nursing to share the evaluation of the no-smoking initiative with Board members	3 months	To be considered at July Board
28/4/16-3	<u>Chief Executive's Report</u> Chief Executive to invite Claire Murdoch and Tim Kendall to the Mental Health Taskforce event.	1 month	Tim Kendall invited to the National Mental Health Event. Claire Murdoch to visit the Trust in August 2016
	Trust Secretary to review media coverage levels with the Ilkley Gazette	2 weeks	Paper to be forwarded to July Board
26/5/16-1	<u>Minutes of the Meeting Held on 28 April 2016</u> Director of Human Resources and OD to reword the CRR risk description relating to the national shortage of band 5 qualified nurses.	One month	Revised CRR to be presented to Board in July 2016
26/5/16-2	<u>Assurance Reports from Committee Chairs</u> Deputy Chief Executive/Director of Nursing to ensure that the pressure ulcers deep dive incorporates information about the number of pressure ulcers transferred to the Trust following the deregistration of a number of nursing homes.	One month	Reported as completed at June Board
26/5/16-3	<u>Nursing Strategy</u> Deputy Chief Executive/Director of Nursing to ensure reference to the Workforce Strategy is incorporated into the Nursing Strategy.	One month	Reported as completed at June Board

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
30/6/16-2	<u>Integrated Performance Report (IPR) – May 2016 Data</u> Director of Human Resources and OD to ensure the labour turnover slide incorporates numbers as well as percentages.	July 2016	