

BOARD MEETING

29 September 2016

Paper Title:	Assurance Reports from Committee Chairs
Section:	Public - Information
Lead Director:	Committee Chairs
Paper Author:	Committee Chairs
Agenda Item:	9
Presented For:	Assurance

EXECUTIVE SUMMARY:

To update the Board on any significant issues arising from Board Committee meetings since the last Board meeting in July 2016.

RELATED RISK(S):

None.

FINANCIAL IMPLICATION:

There are no financial implications arising from the content of this paper.

Revenue Capital

RECOMMENDATIONS:

That the Board:

- note the issues highlighted from the various meetings, seeking any further clarification from the Committee Chairs.

LEGAL IMPLICATIONS:

None.

PREVIOUS MEETINGS/COMMITTEES:

Highlight whether the paper has been discussed at any of the following meetings:

Audit Committee	<input checked="" type="checkbox"/>	Quality & Safety Committee	<input checked="" type="checkbox"/>	Remuneration Committee	<input type="checkbox"/>	Finance, Business & Investment Committee	<input checked="" type="checkbox"/>
Executive Management team	<input type="checkbox"/>	Directors Group	<input type="checkbox"/>	Charitable Funds Committee	<input checked="" type="checkbox"/>	MH Legislation Committee	<input type="checkbox"/>

Assurance Reports from Committee Chairs

Background

This paper provides a short update on any significant issues raised at Board Committees since the last Board meeting in July 2016. The following items are highlighted for information.

Quality and Safety Committee meeting, 5 August 2016

The Committee dashboard presented a generally very positive picture:

Highlights:

- Increased uptake of Carer's Assessments. This improvement will become embedded as the Trust works toward the Carer's Trust Kitemark - a three year programme including service users, carers and staff.
- Only one Hearing the Concerns of Workers issue raised over the last year. The committee questioned whether this was a highlight or should lead us to question the openness of our culture.

Exceptions:

- Achievement on 3 day CPA follow-up below target. The committee was assured that CMHT and IHTT have reviewed their processes and that IHTT now have a dashboard in place which is also displayed on wards.
- A rise in both suicides and pressure ulcers. It is possible that the former is associated with the First Response Service having increased involvement with service users in crisis. The Trust is establishing a Suicide Prevention group in addition to the Vanguard work on suicide prevention.
- The committee has commissioned a deep dive into the management of pressure ulcers from the perspective of community nursing teams.
- Safety thermometer achievement continues to be just below target. Work is taking place to understand what proportion of harm is incurred within Trust services.
- Friends and Family Test: there has been no uptake in some service areas. Business Units are now being provided with FFT information on a team by team basis to support improvement work.
- Mandatory training: two professions are considerably below target and have been asked to provide a progress report in the next dashboard.

Business Unit reports:

i) Mental Health Acute and Community Services

Safety: The committee received a report from a front line clinician on inpatient ward which took part in the Measuring and Monitoring Safety programme. Activities have included fostering a proactive approach to safety, Safety Huddles and a new approach to reporting and investigation of safety incidents by clinical teams. This has been associated with a 54 day period (at the time of the meeting) without an incident of violence and aggression on the ward.

Staffing: work to understand and address staffing pressures continues. An external peer review of staffing of the Dementia Assessment Unit has been commissioned and Meridian has undertaken pilot work with the Community Mental Health teams. Reviews of the Allied Health Professions, which commenced recently with dietetics, are exploring the benefits of working together across service areas and across professions.

Patient Experience: 14 volunteer “meeters and “greeters” are supporting inpatient staff. Amongst other benefits to service users and carers they have the potential to reduce the number of complaints relating to staff attitude. Service Users are now signposted to, and helped to use if necessary, a new website giving information about prescription medication in plain English. This is one response to low achievement on receiving information in the community mental health service user survey.

ii) Specialist Inpatients

The Board has separately received information about Lynfest and assurance that capacity and demand issues in the IAPT service are being addressed.

Single Point of Access: the committee was assured that average response times are now good. A small proportion of callers continue to receive slow responses. A technological quirk creating the potential for callers to be caught in a queue while newer callers unwittingly “queue jump” is being removed. The clinical lead is working with services to address concerns that service users are being handed on through more than one service. The committee was assured that service user experience is being closely monitored including by mystery shoppers.

Children’s Services

The committee was assured by a deep dive that risks to quality and safety are being robustly managed during the redesign of children’s services.

NICE Guidance:

There has been an increase in the number of guidelines assessed and, where appropriate, implemented with increased embedding of the relevant processes in

Business Unit governance. The committee has asked for reports in their next dashboard from clinical leads for the small number of guidelines which have been in progress for several years.

Audit Committee meeting, 5 September 2016

The Audit Committee:

- Received 9 significant reports and one limited report from internal audit (on IT Asset Management);
- was informed that West Yorkshire Audit Consortium and North Yorkshire Audit Services were to merge to form Audit Yorkshire and that Liz Romaniak would be a member on the new Audit Yorkshire Board;
- considered the follow up performance against internal audit actions;
- received KPMG's Audit Letter for the one month period under which the organisation had operated as a NHS Trust;
- received the Charitable Fund Annual Report and Accounts for 2015/16, prior to submission to the Charitable Funds Committee; and
- received positive assurance reports on counter fraud work and the 2016 Fraud Self-Review Toolkit.

Charitable Funds Committee meeting, 5 September 2016

The Committee:

- Approved the audited Annual Report and Accounts for 2015/16;
- reviewed expenditure on fund accounts, encouraging certain fund managers to be more proactive in identifying areas of spend; and
- reviewed the performance of investments noting that JP Morgan had given notice on managing the Trust's investment portfolio and that a further options report would be provided to the next Committee meeting.

FBIC Committee meeting, 12 September 2016

Financial position and mitigation plan

The committee concentrated on those parts of its dashboard that related to the trust's financial position. At month five we are £561k adrift from the profile designed to reach our planned surplus. This is a small improvement on the previous month's position, and there had also been an improvement in the Trust's cash flow following an agreement over public health payments from the Council.

The mitigation plan developed by the executive now shows the need to mitigate risks amounting to just under £900k. A positive outcome to work on VAT exemptions for external payments has made a substantial contribution and, with other actions now agreed, the plan is currently forecast to deliver £840k. A number of major areas are still being explored, including the implementation of staffing reductions associated with the Agile project.

It was noted that Meridian had assessed the potential savings from e-rostering at £800k in a full year, significantly higher than we currently expect. The Executive is

awaiting NHSI approval before committing to this work.

We also reviewed Change Programme and CRR updates. It was noted that the full potential of savings through the Records Administration Review was limited by requirements to keep paper records which emanated from the National Independent Inquiry into Child Sexual Abuse.

Annual reports

We considered, and signed off, four annual reports: Health and Safety, Fire Safety, Local Security Management, and Procurement Strategy. All provided positive assurance, but two issues emerged which should be noted by Board:

- ⤴ the number of smoking-related incidents remained high. It was noted that a review of the impacts of the Non-Smoking Policy was to be reported to QSC later in the year. The committee suggest that this include attention to the impact on fire risk; and
- ⤴ the procurement collaboration with Airedale Hospital FT is working well, but the Carter review suggests attention to procurement collaboration at sub-regional level. This possibility is being explored as a strand of the WY STP.

Workforce strategy

We received the results of a deep-dive into the trust's workforce challenges and responses.

The challenges emerged as being stark, and as constituting a serious risk to the delivery of services. Current, known, challenges over turnover and recruitment to posts, particularly Band 5 nurses and consultants, are likely to remain for the foreseeable future. They may be exacerbated by national difficulties of recruiting and retaining members in the clinical professions and by immigration restrictions. Our own age profiles show a highly skewed picture, with the prospect of high numbers of retirements. We agreed that it would be helpful to model these impacts and quantify the scale of our potential vacancy levels.

We noted, and applauded the wide range of responses already being pursued. Board should note the particular importance of:

- ⤴ ensuring that BDCT is presented as as attractive a place as possible to work
- ⤴ work to explore new balances of skill mix, particularly those which maximise the impact of high level professional expertise by lowering professional barriers and developing support staff
- ⤴ work on e-rostering and other digital systems is complemented by work on the leadership and management competences throughout the organisation which would ensure that these tools are fully used.

Market Development Plan

The committee considered the latest summary of work on bids and tenders. We were assured by recent positive outcomes from some tender exercises, and positive prospects for others. It went on to consider a draft of a new Market Development Plan. It was assured that this was shaping strongly, and it supported the proposal that SMART targets should be incorporated into the emerging work streams.

We discussed the importance of developing collaborative approaches as new expectations of STPs and ACOs emerged. We also confirmed the need to continue to address core costs and efficiencies. The plan will be on the agenda for the October board meeting.

