BOARD MEETING

31 MARCH 2016

Paper Title: Minutes of the Trust Board Meeting held on 25 February 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 25 February 2016.

RECOMMENDATION:

- The Board is asked to approve the minutes.
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
Ralph Coyle 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
Colin Perry Public Governor, Bradford West

2869 **WELCOME AND APOLOGIES**

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

2870 **DECLARATIONS OF INTEREST**

There were no declarations of interests.

2871 **ISSUES RECEIVED FROM THE PUBLIC**

There were no items from the public.
PATIENT AND CARER EXPERIENCES

The Deputy Chief Executive/Director of Nursing introduced a DVD which contained recorded interviews with a number of people that had experienced services within the Trust’s Children’s directorate. The Comments Campervan had been utilised to record the interviews which were largely positive.

During discussion, the following key points were highlighted:

- The role of School Nurses was diverse and they worked closely with the local authority and Child and Adolescent Mental Health Service (CAMHS);
- Positive feedback about the School Nursing service was obtained at a recent young people’s event;
- Staffing levels within the School Nursing service was highlighted as a risk given the capacity and demand issues the service was experiencing;
- The number of people accessing CAMHS had significantly increased over the last three years (with current waiting times of around eight weeks).

MINUTES OF THE MEETING HELD ON 28 JANUARY 2016

The minutes of the meeting held on 28 January 2016 were agreed as a true and accurate record, subject to the following amendments to page five:

- `CQV Visit’ to read `CQC Visit’; and
- `Date protection governance’ to read `Data protection governance’.

MATTERS ARISING

Item 2856: Chair’s Announcements – Mrs Romaniak reported the Loss Adjuster had informed the Trust that any insurance monies awarded to the Trust would be based on reinstatement remedies rather than alterations. Consequently, the Trust would need to fund any additional works or changes, as well as flood resilience measures, from the Capital budget. Mr Vincent considered it appropriate that the Trust and residents submit joint concerns to the Environment Agency about the damaged wall to the rear of New Mill.

Actions

- 26/11/15-2: Chief Executive’s Report - The Director of Human Resources and OD reported an update about the new national Whistleblowing policy had been incorporated into the Chief Executive’s Report;
• 28/1/16-2: Quality and Safety Feedback from Board Members – The Trust Secretary reported corporate manslaughter would be discussed at a Health and Safety meeting on 7 March 2016;

• 28/1/16-3: Assurance Reports from Committee Chairs – The Deputy Chief Executive/Director of Nursing informed Board members three other mental health Trusts had undertaken an evaluation into the impact of the no-smoking policy and that one of these would be evaluating clinical outcomes. Two trusts reported the evaluation had revealed an increase in periods of leave. Mr Large considered it appropriate that the Academic Health Science Network (AHSN) be asked to evaluate the impact. **Action: Deputy Chief Executive/Director of Nursing to pursue;**

• 28/1/16-4: Integrated Performance Report – December 2015 Data – The Trust Secretary reported the reason for the referral to dental treatment slippage was included in February’s Integrated Performance Report;

• 28/1/16-5: Quality and Safety Effectiveness Review Report to Monitor – The Trust Secretary reported the Chairs of the Trust’s Board Committees would be considering whether any recommendations contained within the evaluation report could be applied to other Committees;

• 28/1/16-6: Corporate Risk Register – the Trust Secretary confirmed the tendering report had been forwarded to Board members; and

• 28/1/16-7: Board Business Cycle – the Trust Secretary informed Board members that it had not been possible to incorporate onto today’s business agenda any business items scheduled for March.

**2875 CHAIR’S ANNOUNCEMENTS**

The Chair reported:

• The Council of Governors had approved the appointment of Dr Zulfi Hussain as a Non-Executive Director, with effect from 1 March 2016;

• The Council of Governors had met on 11 February. At that meeting, Governors had:
  o received a presentation about the work of the Finance, Business and Investment Committee (FBIC);
  o discussed matters relating to the Intensive Therapy Centre and the Improving Access to Psychological Therapies service. Mr Vincent added an assumption had been made that as the ITC was not operating at full capacity, the service was failing and Governors had been made aware this was inaccurate;
  o agreed the Membership Strategy; and
  o agreed a process of evaluation of the Council of Governors.

Trust Board noted the Chair’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 items:

- **5 Year Forward View for Mental Health – Taskforce Report**: the 5 Year Forward View for Mental Health was published on 15 February 2016. This national strategy, which covered care and support for all ages, signified the first time there had been a strategic approach to improving mental health outcomes across the health and care system, in partnership with the health arm’s length bodies. The report contained recommendations for the six NHS arm’s length bodies to achieve the ambition of parity of esteem between mental and physical health and wider action on tackling health inequalities;

- **Lord Crisp Commission**: the Independent Commission was set up in 2015 to address the issues facing patients in England needing acute care for mental health problems. The Commission’s report recommended significant changes to how mental health services are commissioned, organised and monitored across the whole mental health system; and

- **Carter Review**: Lord Carter’s review of efficiency in hospitals looked at productivity and efficiency in English non-specialist acute hospitals, which accounted for half of the total health budget, using a series of metrics and benchmarks to enable comparison. Whilst the main focus of the review was directed at Acute Trusts, there would be areas where BDCFT could consider efficiency in relation to the benchmark of reference costs used in this report. This would be considered as part of the annual planning process and specifically through the Trust’s Procurement Group. The Airedale Supplies/Procurement Team would also be considering the review recommendations.

During ensuing discussion about these reports, the following key points were made:

- The Trust’s services had featured in the Taskforce Report on mental health as one of the national examples of best practice. This report focused on mental illness and recovery and recommendations within the report presented the Trust with a number of opportunities. Whilst the report contained a recommendation relating to the reduction of out of area placements, there was no reference to a reduction in out of area placements for specialist services such as the ITC;

- Ms Lees considered it appropriate to benchmark the Trust against the recommendations contained within the Lord Crisp report;

- Dr McElligott, whilst welcoming a future focus on the Taskforce report and the Crisp review, felt it important that the Board also retain a sharp attention on community services;

- Dr Butler expressed disappointment that the reports contained little emphasis on value for money solutions;
• The Trust Secretary highlighted that many areas in the report were being addressed by the Trust but the most important issue was to understand how national priorities would be translated locally and how the Board could support and influence local commissioners around this agenda; and
• Board members considered it appropriate that a future Forward to Excellence session focus on the Taskforce report and that Clinical Commission Groups be invited to attend. Action: Chair/Chief Executive/Trust Secretary to schedule into the Forward to Excellence work programme.

Mr Coyle also referred to the item in the Chief Executive’s Report relating to `Raising Concerns/Whistleblowing/Freedom to Speak Up Guardians’. This report highlighted that the national Freedom to Speak Up (FTSU) Guardian, Dame Eileen Sills OBE, was appointed in January 2016 following the end of a consultation on a draft single national whistleblowing policy. The Trust’s current policy already met the suggested standards set out in the proposed policy although it would require review when the final national policy was released. All Trusts were expected to appoint local guardians and an options paper about this appointment would be developed and discussed at the Executive Management Team (EMT prior to approval by the Board.

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

2877 QUALITY AND SAFETY FEEDBACK FROM BOARD MEMBERS

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

• Ms Mirza reported that she had visited the Health Visitors at Shipley Health Centre with Mrs Knight. The team had highlighted issues relating to: staff shortages due to sickness absence and maternity leave, IT connectivity problems and a need to acknowledge when 100% targets had been achieved. Mrs Knight added the latter issue would be raised with Deputy Directors and a letter of acknowledgement would be sent to the team;
• Ms Mirza also reported she had visited the Bracken Ward with Mr Hogg. The visit highlighted the connection of physical and mental health when supporting older people in an inpatient setting;
• Mr Banks informed Board members that both he and Mr Large had visited the Pressure Ulcer team. The team had highlighted issues relating to: funding from the Bradford CCGs being non-recurrent; deregistration of nursing homes to care homes (an issue the Board was already sighted on); and responsibility for the monitoring of action plans in relation to pressure ulcers. Ms Lees reported the CCGs had informed the Trust it intended to continue to fund the Pressure Ulcer service. Mr Large informed Board members he had informed the Pressure Ulcer team he believed the monitoring should be undertaken by them, as pressure ulcer specialists. Ms Lees added all pressure ulcers were logged as serious incidents and that such incidents were monitored by the Serious Incident Forum and reported through the Quality and Safety Committee; and
• Dr Butler reported that both she and Ms Lees had visited the Dementia Assessment Unit. The carers they spoke to during the visit were very complimentary about the service. The team raised issues about soundproofing within the unit which sometimes made it difficult for the team to hear service users when they became distressed. This issue was exacerbated by staffing pressures within the service and the team was liaising with the Volunteering lead to consider support from volunteers.

Trust Board noted the information received from Board members.

2878 ASSURANCE REPORTS FROM COMMITTEE CHAIRS

The paper provided an update on matters raised at the Quality and Safety Committee (QSC) meeting held on 5 February 2016 and the Audit Committee held on 8 February 2016.

Dr Butler reported the Quality and Safety Committee had considered a diverse range of important issues, including the Board Walkabout Programme for 2016/17. Mr Large noted there were a number of free slots on the programme and believed it important that visits be planned to those corporate services that had been affected by the floods. Action: Dr Butler/Deputy Director of Quality Governance to timetable into the programme.

Mr Banks referred to discussion at the Audit Committee about declarations of interest and highlighted that whilst declaration levels had improved, the Trust needed to remind staff of the requirement to complete individual returns.

Trust Board noted the points highlighted from the meetings and approved the Board Walkabout Programme for 2016/17.

2879 INTEGRATED PERFORMANCE REPORT (IPR) – JANUARY 2016 DATA: EXCEPTION REPORTING

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

• All Monitor performance requirements were being met (slide 1);
• Whilst the referral to treatment dental performance (slide 4) remained above trajectory, a decline in performance had been experienced in recent months. This was driven by an increase in the number of referrals of young children requiring tooth extractions where an elevated proportion required treatment under general anaesthesia, thereby increasing the number requiring specialist intervention via the Trust’s hospital based theatre lists;
• New national waiting time standards for Improving Access to Psychological Therapies (IAPT) would apply from 1 April 2016 (slide 5);
• A revised Friends and Family Test slide had been introduced (slide 11) and Ms Lees invited comments on the new format. Whilst Board members generally liked the format, they considered it appropriate that a small number of indicators be incorporated into future reports. Mr Hogg considered it appropriate that the You and Your Care Strategic Reference Group (YYCSRG) give consideration to the indicators to include. **Action: Deputy Chief Executive/Director of Nursing to programme this discussion into the YYCSRG work programme**;
• Steps were being taken to increase the number of temporary staff undertaking Information Governance training (slide 12). Board members considered it appropriate that agency staff be required to complete the training before being appointed into a temporary role. **Action: Director of Human Resource and OD to inform the agencies of this requirement**;
• The moving and handling figure for the Medical Directorate (slide 13) was inaccurate and Dr McElligott reported he would arrange for this to be reviewed. **Action: Medical Director**;
• Sickness absence performance during January was recorded as 5.60% against a 15/16 target of 4% (slide 16). Short term absences had increased during this period whilst the number of long term absences had reduced;
• The narrative on data extracts regarding staffing levels on 13 wards in January (slide 19) highlighted one non-compliant shift on the Bracken Ward. This was the first time a non-compliant shift had been reported. The same slide highlighted an increase in incident reports relating to staffing shortages and 16 of the 27 reported incidents were as a result of agency staff failing to report for booked shifts. It was envisaged this position would improve once the staff bank was fully reinstated in-house;
• The ‘Safer Staffing: Inpatient Services’ slide (20) needed to clarify which requirements (local or national) they were benchmarked against. **Action: Deputy Chief Executive/Director of Nursing to arrange for this information to be incorporated in future slides**;
• The Trust was still forecasting attainment of the majority of key financial targets. However, the cash flow position was £0.7m below plan due to a number of in-year phasing issues. The forecast remained to achieve the planned cash balance for 2015/16.

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

2880 BOARD BUSINESS CYCLE

The Trust Secretary submitted the Board Business Cycle which outlined those items scheduled for future meetings. Mr Hogg reported he would arrange to meet with Committee Chairs to review the scheduling of Committee Annual Reports.
It was noted that the March Chief Executive report would contain an update about the imposing of the junior doctor’s contract and the impact of any resultant industrial action. **Action: Medical Director to write the update.**

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

2881 **COMMITTEE APPROVED MINUTES**

A paper was presented containing approved minutes from the Quality and Safety Committee meetings held on 6 November 2015 and 18 December 2015 and the Audit Committee meeting held on 30 November 2015.

Trust Board noted the contents of the Committee approved minutes.

2882 **ANY OTHER BUSINESS**

No other issues were raised. The meeting concluded at 12.10 pm.

2883 **DATE AND TIME OF NEXT MEETING**

The next meeting will be held at 10.00 am on Thursday, 31 March 2016 at Bradford District Care Foundation Trust headquarters, New Mill, Victoria Road, Saltaire, Shipley, BD18 3LD.
<table>
<thead>
<tr>
<th>Ref No</th>
<th>Actions requested</th>
<th>Timescale</th>
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<tbody>
<tr>
<td>26/11/15-2</td>
<td>Chief Executive’s Report Director of HR/OD to brief the Board on the new national whistleblowing policy via the CEO report.</td>
<td>February 2016</td>
<td>Completed at February Board</td>
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<tr>
<td>28/1/16-1</td>
<td>Patient and Carer Experiences Deputy Chief Executive/Director of Nursing to arrange for the Quality and Safety Committee to consider a paper about the key themes raised by service users and carers about mental health services.</td>
<td>Planned for March 2016</td>
<td>Discussed at meeting on 18.3.16</td>
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<tr>
<td>28/1/16-2</td>
<td>Quality and Safety Feedback from Board Members Chair/Trust Secretary to timetable a discussion about corporate manslaughter into the Board Development programme</td>
<td>2 weeks</td>
<td>Awaiting date from external speaker</td>
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<td>28/1/16-3</td>
<td>Assurance Reports from Committee Chairs i) Deputy Chief Executive/Director of Nursing to determine whether any trusts have undertaken an evaluation into the impact of the no smoking policy on recovery rates; and ii) Chair/Trust Secretary to arrange for the March Forward to Excellence session to focus on Agile Working.</td>
<td>February 2016</td>
<td>Update provided at February Board March 2016</td>
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<tr>
<td>28/1/16-4</td>
<td>Integrated Performance Report (IPR) – December 2015 Data: Exception Reporting Deputy Chief Executive/Director of Nursing to determine the reason for the referral to treatment dental performance slippage.</td>
<td>February 2016</td>
<td>Information Incorporated into February’s Integrated Performance Report</td>
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<td>28/1/16-5</td>
<td>Quality and Safety Effectiveness Review – Report to Monitor Chair to arrange a meeting with NEDs to consider whether any recommendations contained within the evaluation report apply to other Board Committees.</td>
<td>Two weeks</td>
<td>Committee Chairs to review- on committee agenda</td>
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| 28/1/16-6 | **Corporate Risk Register**  
*Director of Finance, Contracting and Estates* to arrange for the tendering report to be forwarded to Board members.                                                                          | Two weeks | Reported as completed at February Board                                                    |
| 28/1/16-7 | **Board Business Cycle**  
*Chair/Chief Executive/Trust Secretary* to consider whether any business items scheduled for March can be transferred to February’s Board agenda.                                    | One week  | Reported as completed at February Board                                                    |
| 25/2/16-1 | **Matters Arising**  
*Deputy Chief Executive/Director of Nursing* to determine whether AHSN would be prepared to undertake an evaluation into the impact of the No-Smoking policy in Mental Health trusts. | One month |                                                                                             |
| 25/2/16-2 | **Chief Executive’s Report**  
*Chair/Chief Executive/Trust Secretary* to schedule a discussion into the Forward to Excellence programme about the 5 Year Forward View for Mental Health Taskforce Report. | Two months |                                                                                             |
| 25/2/16-3 | **Assurance Reports from Committee Chairs**  
*Dr Butler/Deputy Director of Quality Governance* to timetable, into the Board Walkabout programme for 2017, visits to those corporate services affected by the floods. | One month | Actioned at Committee meeting 18.3.16                                                    |
| 25/2/16-4 | **Integrated Performance Report – January Data**  
*Deputy Chief Executive/Director of Nursing* to:  
   i) Arrange for the You and Your Care Strategic Reference Group to consider potential indicators for inclusion in the revised Friends and Family Test slide; and  
   ii) Ensure the `Safer Staffing: Inpatient Slide’ clarifies which requirements the data has been benchmarked against. | March 2016 |                                                                                             |
| 25/2/16-5 | **Director of Human Resources and OD** to inform the temporary staffing agencies of the need for temporary staff to have completed Information Governance training prior to any temporary appointments with the Trust. | One week  | Letter has been issued                                                                      |
| 25/2/16-6 | **Medical Director** to review the accuracy of the `moving and handling figure’.                                                                                                                                     | March 2016 |                                                                                             |
| 25/2/16-5 | Board Business Cycle  
**Medical Director** to provide an update, through the Chief Executive’s report, about the potential impact of the imposing of the junior doctor contract | March 2016 |