Trust Board

Date: 28 March 2019
Time: 1.30 pm
Venue: Room 2.10, New Mill, Saltaire

PUBLIC MINUTES

Present:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<tr>
<td>Michael Smith</td>
<td>Chair</td>
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<tr>
<td>Brent Kilmurray</td>
<td>Chief Executive</td>
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<tr>
<td>Rob Vincent</td>
<td>Non-Executive Director</td>
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<tr>
<td>Gerry Armitage</td>
<td>Non-Executive Director</td>
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<tr>
<td>Carole Panteli</td>
<td>Non-Executive Director</td>
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<tr>
<td>Zulfi Hussain</td>
<td>Non-Executive Director</td>
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<tr>
<td>Liz Romaniak</td>
<td>Director of Finance, Contracting &amp; Facilities</td>
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<tr>
<td>Sandra Knight</td>
<td>Director of HR &amp; OD</td>
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<tr>
<td>Debra Gilderdale</td>
<td>Director of Nursing and Professions</td>
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<tr>
<td>Andy McElligott</td>
<td>Medical Director</td>
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<tr>
<td>Patrick Scott</td>
<td>Chief Operating Officer</td>
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<tr>
<td>Tim Rycroft</td>
<td>Associate Director of Informatics/Chief Information Officer</td>
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<tr>
<td>Paul Hogg</td>
<td>Associate Director of Corporate Affairs</td>
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In Attendance:

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
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<tr>
<td>Sarah Jones</td>
<td>Board Advisor</td>
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<tr>
<td>Sid Brown</td>
<td>Public Governor, Shipley</td>
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<tr>
<td>Carla Smith</td>
<td>Clinical Lead, District Nursing (for item 5)</td>
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<tr>
<td>James Cooke</td>
<td>Service Manager, District Nursing (for item 5)</td>
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<tr>
<td>Kate Gorse-Brightmore</td>
<td>Care Quality Commission (items 1-12)</td>
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<tr>
<td>Chris Storton</td>
<td>Care Quality Commission</td>
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<td>Two members of the public</td>
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<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
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<tr>
<td>3512</td>
<td>Welcome and Apologies for Absence</td>
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<tr>
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<td>Apologies had been received from David Banks and Simon Lewis. The Chair</td>
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<td>welcomed everyone to the meeting including staff from the Care Quality</td>
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<td></td>
<td>Commission (CQC).</td>
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<td>3513</td>
<td>Declarations of Interest</td>
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<tr>
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<td>There were no declarations of interest.</td>
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### Issues Received from the Public

There were no issues from the public.

### Patient and Carer Experiences

Carla Smith and James Cooke presented a number of slides relating to work undertaken to help improve patient experiences in receipt of insulin. They explained the role of district services in administering insulin, that prevalence of Type-2 diabetes was higher in Bradford than the national average, and incidents relating to insulin errors (October 2017 to September 2018) had been reviewed to look at any causal factors leading to improvements in the service. The review had resulted in engaging district nursing teams in safety huddles, exploring capabilities within SystmOne and further benchmarking work to be undertaken with the National District Nursing Network (NDNN). A quality improvement Rapid Process Improvement Workshop was also planned to support the aspiration of reducing the small number of insulin errors further.

During ensuing discussion, the following key points were highlighted:

- It was positive that the team were looking at contributory factors as part of the review and this should be shared more widely across the Trust;
- Staff had identified areas such as handovers, staff seeing patients regularly, and communications (particularly during weekends) as areas to focus on;
- The review had raised the profile of this work; Mr Cooke confirmed relevant training was undertaken with new staff and there was a positive learning culture within the service; and
- The Medical Director noted that no patient came to any harm as a result of the recorded insulin errors and it was encouraging that the Trust was working with the NDNN to promote wider patient safety and improved patient experience.

Trust Board thanked Carla and James for sharing this story.

### Minutes of the Public Trust Board Meeting Held on 28 February 2019

The minutes of the Public Trust Board meeting held on 28 February 2019 were agreed as a true and accurate record of the meeting.

### Matters Arising from the Public Trust Board Meeting Held on 28 February 2019

**Actions**

- 31/1/19/3: the Director of HR & OD reported that a staff diversity video had now been commissioned and staff were being identified to reflect different services across the Trust.
**Chair’s Report**

Mr Smith highlighted a number of areas within the report, including:

- Progress on the 19/20 Operational Plan;
- The recent workshop held on 26 March to discuss the management of strategic risks;
- The forthcoming Governor election results;
- Meetings attended across the West Yorkshire and Harrogate Health and Care Partnership;
- The 10th anniversary celebrations of Champions Show the Way; and
- The recruitment process of appointing his successor, through open competition.

*Trust Board noted the Chair’s report.*

**Chief Executive’s Report**

Mr Kilmurray presented a report which summarised key issues taking place locally, across the health economy and nationally. The following key points were highlighted:

- Consultation by NHS England/NHS Improvement about possible changes to legislation across the NHS;
- The introduction of a monthly staff recognition scheme aligned to the Trust’s new values; and
- Work being undertaken with the CCGs to tackle health inequalities across the Bradford city area, including a business case for investment which the Trust was developing.

*Trust Board noted the Chief Executive’s report.*

**Committee Chairs’ Report**

The Board received written update from the recent Audit Committee and Finance, Business and Investment Committee meetings. A verbal update from Dr Hussain about the last Mental Health Legislation Committee meeting highlighted the following:

- The shortage of medical locums nationally and the Trust’s plans for its medical workforce;
- Progress against the actions recommended in the external review of the Committee’s effectiveness; and
- A presentation from Hempsons would be arranged on restrictive practices.

*Trust Board noted the issues highlighted from Board Committee meetings.*
### 3521 Health and Social Care Network Contract update

The Chair reported that this agenda item had been deferred to the next Board meeting.

### 3522 Staff Survey results (incl. benchmarking)

The Director of HR & OD presented a paper which provided a summary of the progress of the 2018 Staff Survey results that had been shared in November, benchmarking of the Trust’s results and recommendations around embedding the Staff Survey findings into ongoing engagement and improvement work across the Trust. Mrs Knight specifically highlighted:

- The Trust response rate of 45% (down from 54% the previous year but still within the average range for NHS organisations);
- The new national scoring methodology which resulted in the Trust’s staff engagement score increasing by 1.2% to 6.98, with 5 of the 9 questions seeing an improvement; and
- How the results had been cascaded to service teams and that this feedback would be presented to the Senior Leadership Group by the end of April 2019.

Board members commented on the results as follows:

- It was positive to hear that face-to-face discussions with staff were being held and that engagement was improving;
- The introduction of crowdsourcing may have impacted on the lower response rate as many staff had comments about working in the Trust as part of the organisational strategy and Mr Lewis suggested that multiple engagement approaches with staff were necessary; and
- The Chair was interested to see a summary of staff feedback from team meetings reported back to Board (via the Chief Executive’s report) once they had been received via FBIC. **Action: Director of HR & OD.**

**Trust Board:**

- Considered the key messages of the Trust-wide survey, which connected with the new vision and values;
- Encouraged services and teams to explore their locality results, noting the results would be feedback to SLG and then FBIC and Board;
- Agreed the corporate response to the Staff Survey should focus around the themes of staff engagement, quality of care and safety culture;
- Noted the 2018 methodology would be reviewed in September to help
determine the most effective approach to the 2019 Survey; and

- Approved the monitoring of both corporate and locality responses through quarterly updates to SLG and an update to Board in the Autumn.

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<th>3523</th>
<th>Gender Pay Gap</th>
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<td>The Director of HR &amp; OD presented a paper which fulfilled the trust’s requirements, under the Equality Act 2017, to publish its gender pay gap and bonus gender pay gap information on an annual basis. Mrs Knight reported that the Trust’s figures were 7.07% and 19.02% respectively. The gender pay gap had increased from 3.02% in 2017/18. In response to the paper, Professor Armitage reported that information was being presented in detail to the Quality and Safety Committee the next day.</td>
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**Trust Board:**

- Noted the reported figures and the associated analysis;
- Noted that despite the increase of 4.68% the Trust had a lower than average gender pay gap;
- Approved the proposed activity set out in section 7 of the report; and
- Approved the report for publication compliance following and subsequent discussions at the Quality and Safety Committee.

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<td>The report assessed progress against the Trust’s key targets and performance indicators as at February 2019 and provided exception reports for areas that were currently off trajectory. Mrs Romaniak highlighted the following issues:</td>
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- IAPT performance (slides 4 and 5);
- The breach in inappropriate out of area placements (slide 5);
- Some improvements in compliance against various staff training figures, supported by the introduction of weekly ‘report-outs’ as part of the QI methodology (slides 9 and 10);
- The consolidation of CPA-related training targets by the end of May, which be reported in 2019/20 (slide 11);
- Safer staffing compliance, with one shift identified as non-compliant in February (slide 14);
- Performance against KPIs relating to the Informatics Directorate (slides 23 and 24); and
- Performance against KPIs relating to Estates and Facilities (slides 25-28). |
The following points were highlighted in discussion:

- Mr Rycroft reported that the number of requests for personal information was increasing and the response time for Subject Access Requests had been reduced from 40 to 30 days, adding pressure on both the IMT team and operations services;
- The Chair highlighted that there seemed to be a reducing trend on cleanliness audits. Mrs Romaniak reported this was primarily concerning landlord facilities but would investigate further. **Action Mrs Romaniak**;
- Mrs Jones highlighted the reporting of fire incidents in service user homes; Mrs Romaniak reported that Trust tracked these incidents to explore whether there was any wider learning associated for the Trust; and
- It was noted that work was underway across different services to look at the quality of ligature risk assessments.

**Trust Board noted the content of the Integrated Performance Report.**

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<th>3525</th>
<th>Board Business Cycle - Discussion on frequency of Board and development meetings</th>
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<td>The Chair introduced this paper, which suggested a number of changes to the frequency and format of Board meetings as a result of the recent well-led report. During the discussion the following points were made:</td>
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- Board members were supportive of moving to bi-monthly public Board meetings from May 2019, and that insight presentations from Care Groups, twice a year, would be useful to triangulate issues across services;
- The proposal to have set Walkabout dates every two months was endorsed and Board members suggested this could be themed so multiple pairings could visit similar services and report back at the next public Board meeting to triangulate learning; the new programme should be populated for June 2019. **Action: Director of Nursing and Professions to review the existing walkabout programme**;
- The proposal to maintain monthly private Board meetings was supported;
- Monthly Board development sessions were supported with the draft programme to be finalised and confirmed in May; **Action: Chair/Chief Executive**;
- the proposal to identify set Committee dates was deferred and would be discussed at a future NEDs meeting;
- there was an appetite to use the BAF and CRR to determine areas for future reporting;
- Board members wished to continue with Board meetings held ‘On the Road’ which had benefits for working with both stakeholders and staff. **Action: Director of Corporate Affairs.**
Trust Board:

- Approved the changes to public and private Board meetings, Board development and walkabout programmes, as set out above; and
- Noted the revised work programmes at Appendix 2.

3526 Quality and Safety Feedback from Board Members

Board members reported on the following visits:

- Professor Armitage and Dr McElligott had visited the Special Needs School Nursing team, which had highlighted a passionate, innovative and well-led team. They had heard that resources had been increased by commissioners given the demonstrable need in the local area and this service would be featured in next month’s Board story; and
- Dr Hussain and Mrs Knight had visited the City Community Mental Health Team and it was clear from discussions that the team were managing some complex caseloads and an increased risk profile with some clients. Issues around lone working and security at certain Trust sites were being explored as a result of the visit.

Trust Board noted the update.

3527 Committee and Council of Governor Approved Minutes*

A paper was presented containing approved minutes from the following meetings:

- Mental Health Legislation Committee meeting, held on 24 January 2019.

Trust Board noted the content of the Committee approved minutes.

3510 Any Other Business

Mrs Jones highlighted that she would be circulating a further evaluation survey to Board members to inform the forthcoming Board session on business development and asked that all Board members could complete this. **Action: Trust Board.**

3511 Date and time of next meeting

Thursday 25 April 2019 at 1.30 pm at New Mill, Victoria Road, Saltaire, Shipley, BD18 3LD.
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<th>Ref No</th>
<th>Actions requested</th>
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| 29/11/18-1   | Matters Arising from the Public Trust Board Meeting Held on 25 October 2018  
**Director of Nursing and Operations** to provide progress updates through the Safer Staffing report regarding levels of student recruitment and placements from universities within West Yorkshire. | Six months        | Scheduled for May 2019                            |
| 29/11/18-3   | Safer Staffing Levels Six Month Review  
**Director of Nursing and Operations** to incorporate information into future reports regarding the impacts/consequential impacts of Brexit on staffing levels. | Six months        | Scheduled for May 2019                            |
| 31/1/19-3    | Actions from the Board meeting on 28 November  
**Director of HR and OD** to explore the production of a staff diversity video to help promote and celebrate the Trust’s diverse workforce and report back to Board. | Two months        | Video has been commissioned and would be shared with the Board once produced. |
| 31/1/19-4 (linked to 29/11/18-4) | **Director of Informatics** to timetable the benefits analysis work relating to the introduction of SystmOne, 6-8 months after the introduction of the system | By June 2019      |                                                    |
| 31/1/19-9    | **Integrated Performance Report**  
**Mrs Knight** to review the thresholds for role specific training for 2019/20.                                                                                                                            | Action now identified for June / July 2019 |                                                    |
| 28/2/19-1    | **Committee Chairs’ Report**  
**Mrs Romaniak** to circulate a copy of the 0-19 Children’s Services contract to Board members.                                                                                                                                 | Once signed      | Expected to be signed in next two weeks           |
| 28/2/19-2    | **Any Other Business**  
**Chief Executive/Director of HR & OD** to start arrangements for the recruitment process for a new Director of Nursing and present a paper at the Board’s Nominations Committee. | 2 months          | Job description reviewed and recruitment process agreed, with interview date targeted for early June. |
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| 28/3/19-1 | **Staff Survey results**  
**Director of HR & OD** to include a summary of staff feedback from team meetings reported back to Board (via the Chief Executive’s report) once they had been received via FBIC. | Two months      |
| 28/3/19-2 | **Director of HR & OD** to present an update paper to Trust Board on the progress with, and impact from, corporate and locality responses to the Staff Survey. | Autumn (month to be agreed) |
| 28/3/19-3 | **Integrated Performance Report**  
**Mrs Romaniak** to investigate the reported cleanliness audits to the next meeting. | April 2019      |
| 28/3/19-4 | **Frequency of Board meetings**  
**Director of Nursing and Professions** to review the existing walkabout programme to allow for a ‘themed’ programme to commence on 27 June 2019 and notify Board members/clinical teams accordingly. | May 2019        |
| 28/3/19-5 | **Chair and Chief Executive** to finalise the Board development programme and report back to Board in May. | May 2019        |
| 28/3/19-6 | **Director of Corporate Affairs** to coordinate the ‘Board on the Road’ programme for 2019/20. | 3 months        |
| 28/3/19-7 | **All Board members** to complete the next business development questionnaire.         | Once issued     |