

SEPT
MINUTES OF PUBLIC BOARD OF DIRECTORS
PART 1
held on 27 February 2013 at
The Rufus Centre, Flitwick, Bedford, MK45 1AH

Members Present:

Lorraine Cabel	Chair
Janet Wood	Vice-Chair
Steve Cotter	Non-Executive Director
Alison Davies	Non-Executive Director
Dr Dawn Hillier	Non-Executive Director
Steve Currell	Non-Executive Director
Sally Morris	Executive Director of Specialist Services/ Contracts/Deputy Chief Executive
Ray Jennings	Executive Chief Finance Officer
Nikki Richardson	Director of Corporate Services/Customer Care
Dr Milind Karale	Executive Medical Director
Amanda Reynolds	Executive Director of Partnerships & Social Care

Also Present:

Teresa Matthews	Board Secretary (Minutes)
Richard Winter	Executive Director of Integrated Services – Beds & Luton
Faye Swanson	Director of Compliance & Assurance
Sarah Browne	Assistant Director Clinical Governance
Dee Hunnie	Communications
Maggie Nicholls	Audit Department
Joanne Halliday	SEPT
Katie Roy	Community OT
Grace Pearce	Speech & Language Therapy SPLD
Janice Mason	SPLD
Lynn Gudgin	Clinical Compliance Lead
Debra Ellison	Team Manager 0-19 Team
Tony West	Mandatory Trainer
Gary Smith	Governor
Lynda Lees	Governor
Paula Grayson	Public Governor Bedford
Sue Warner	CAB
Terri Dorman	LD Service
John Jones	Governor
Jessica Haslam	SEPT

Lorraine Cabel welcomed members of the public, staff and Governors to the meeting.

Members were reminded of the Trust's Vision Statement.

040/13 APOLOGIES FOR ABSENCE

Apologies were received from Dr Patrick Geoghegan, Randolph Charles, Dr Pauline Roberts, Peter Wadum-Buhl

041/13 DECLARATIONS OF INTEREST

There were no declarations of interest.

211/13 PRESENTATION by Terri Dorman, Practice Development Nurse on Health Facilitation Service in Bedfordshire & Luton

Terri Dorman updated on the Health Facilitation Service and advised this was launched in March 2012. The service includes a Lead Nurse Specialist with two Acute Learning Disability Liaison Nurses, clinical support workers and a Practice Development Nurse.

The challenge of the team is 'To achieve full inclusion of people who have a learning disability in mainstream healthcare services'.

Terri then explained what has been achieved in year one as follows:

- Wide publicity across the county with visits to every General Practice (GP) surgery, information on the service shared with independent service providers
- Increase in the number of live Health Action plans (113)
- Increase in the uptake of annual health checks (38)
- Supporting people with healthcare appointments
- Supporting people to follow advice to facilitate their health and wellbeing
- Bedford Hospital DVD completed
- Liaison Nurse at Bedford Hospital achieved the Star Award for Service User involvement
- Training delivered to colleagues
- Service evaluation taking place in collaboration with Anglia Ruskin University (ARU)
- Successful bid put forward to the Bedfordshire & Hertfordshire Workforce Group

Terri then explained what the aspirations are for the next year as follows:

- Evaluation of the health facilitation service will be completed and this will then determine the next steps
- Two of the Clinical Support Workers will commence the Associate Practitioner Course
- Regional Network for Health Facilitators will be set up
- The Commissioner led review of services for people who have a Learning Disability will be completed
- Increase the number of Liaison nurses to cover a 7 day week at both Acute Hospitals
- Extend the hours of the Community Health Facilitators

Terri updated on the National Screening programmes and advised the aim is to:

- Work in partnership with colleagues in primary and acute healthcare services
- Develop robust resources to support access to the national screening programmes
- Work in partnership with the University of Bedfordshire to ensure the needs of people who have a learning disability feature in appropriate training courses
- Facilitate information events across the County for service users, carers and healthcare providers

Alison Davies asked what involvement there has been from the independent sector? Terri Dorman advised information has been shared with them and there has been full engagement to date.

Dawn Hillier congratulated Terri and her team on the service they provide and asked what the number of live health action plans was before the project commenced. Terri explained there has been a significant increase but full details will be available as part of the evaluation process. However, Richard Winter offered to send Dawn current data.

Sally Morris commented this was an excellent presentation and pleased the Trust is providing such a valued service for people with a learning disability to access mainstream healthcare, but is disappointed the service is required as mainstream health services have not met the needs of this vulnerable client group.

Lorraine Cabel thanked Terri for an excellent presentation to the Board.

ACTION – Richard Winter to send Dawn Hillier data on health action plans

212/13 MINUTES OF THE last meeting held on 30 January 2013

With some minor amendments the minutes of the meeting held on 30 January 2013 were agreed and will be signed by Lorraine Cabel, as an accurate record.

213/13 MATTERS ARISING**i) Definition of 'when appropriate'**

Alison Davies confirmed she has met with Richard Winter regarding this and is satisfied there is a clear definition of 'when appropriate'.

(ii) Draft Workforce Strategy

Nikki Richardson confirmed she has received some comments and these will be incorporated into the Strategy and forwarded to Lorraine Cabel to take Chair's action.

(iii) Integrated Care

Amanda Reynolds advised that under the previous Trust Secretary's report the Board discussed the Trust preparing a narrative in relation to Integrated Care. Amanda advised that the Foundation Trust Network's (FTN) response suggested that Foundation Trusts adopt the narrative already in place and Amanda agreed to prepare an update for the March Board meeting.

THE BOARD

1 AGREED that Amanda Reynolds would prepare an update for the March Board meeting

214/13 PERFORMANCE AND FINANCE SCRUTINY COMMITTEE

Lorraine Cabel presented the above report giving assurance to Board members that the performance (operational and financial) as at Month 10 January 2013 was subject to scrutiny by the Committee and the hotspots and emerging risks were discussed in detail. Lorraine confirmed the Committee were satisfied with the action being taken to mitigate risks on any underperformance.

Sally Morris updated on some of the hotspots as follows:

Complaints Resolved within the agreed timescales and number of complaints open over 180 days – Sally confirmed that action is being to address this with individual Directors and it has been agreed a six monthly report specifically relating to complaints would be presented to the Board.

Mandatory Training – The Committee had raised concern at the Performance & Finance Scrutiny Committee that this figure has not improved since the last

report. Sally advised that Executive Directors have been instructed to take action to improve performance and to apply the Trust's Conduct & Capability Policy where necessary. Sally also confirmed that 70 staff have been terminated from the Trust's Bank Bureau as a result of failing to undertake mandatory training. The national training system was also out of action for two weeks and this may impact on the February performance but it was acknowledged by the Committee this is out of the Trust's control.

Improved Access to Psychological Therapies – Sally confirmed that last month it was reported a Performance Notice had been received. Following discussions with the PCT an Excusing Notice will be issued cancelling the Performance Notice as the performance indicators referred to were not in the contract.

Sickness Absence - Steve Currell commented in relation to sickness absence, has the Trust looked at using the ambulance service approach to reduce sickness absence by 25%. Nikki Richardson confirmed the Bradford tool has been adopted across the organisation as research has demonstrated this is an effective tool and also gives good benchmarking information.

Dawn Hillier commented the overall position may be masking some specific hot spot areas and this needs to be taken into account. Nikki Richardson commented all Directorates are advised of their sickness absence position and Managers are dealing with individuals as part of supervision.

THE BOARD

1 DISCUSSED and NOTED the content of the report

215/13 FINANCIAL PERFORMANCE

Ray Jennings updated Board members on the Month 10 position as at January 2013 and confirmed the Trust's surplus position has decreased as planned as non recurrent expenditure for Quarter 4 has commenced. The surplus is currently above plan due to additional income in respect of CQUIN and slippage on some non recurrent schemes. These are expected to be implemented in Month 11 and therefore should decrease in line with the plan by year end.

Ray confirmed there are no new hotspots in Month 10, however, the Trust's Cost Improvement Programme (CIP) continues to underperform this year. The shortfall is covered non-recurrently this financial year but there is a £3.9M recurrent shortfall which will be added to the cost reduction target for the next financial year.

Ray commented that there has been a hot spot throughout the year in relation to Essex older people's inpatient services who continue to have high levels of observation. This has increased the use of agency and bank staff that has contributed to the overspend position in month 10. Ray confirmed he and the Operational Director will continue to monitor this closely.

Ray then updated on the emerging risk relating to West Essex commissioners where the Trust has been advised that they are expecting to reclaim income reduction of approximately £750K from the 2012/13 contract. This relates to non-delivery of QIPP schemes, underachievement against contracted activity levels and breaches of waiting time targets. This matter is therefore being dealt with via the Contracts Department, however, as the contract is a block contract there are no mechanisms for the Commissioners to reclaim the income.

Ray confirmed that cash and working capital remains on target for the current year and the Trust's current risk rating for January 2013 is 4.

Ray advised that as the Board has now approved, in principle, the commencement of the Bedford Health Village development we would be seeking assurance from the Bedfordshire & Luton Clinical Commissioning Groups (CCGs) in writing on a number of key requirements. Once this is received we can proceed with construction which will take approximately 12 months.

Steve Currell commented on the delegated budget information and that most of the reasons for a underspend relates to vacancies and asked whether this is impacting on patient safety. Ray Jennings confirmed that the Trust always ensures it provides safe services for our patients and therefore positions are covered via bank and agency staff. There are some vacancies where services are going through organisational change but there is no freeze on recruitment to any vacancies. Richard Winter gave assurance that he is currently recruiting to any active vacancies as is the case across the organisation.

THE BOARD

- 1. CONSIDERED and DISCUSSED the above report**
- 2. NOTED the content of the Finance Report**

216/13 BOARD ASSURANCE FRAMEWORK

Faye Swanson presented an update on the current position of the Board Assurance Framework (BAF) as at February 2013. Faye confirmed the Board Assurance Framework was reviewed by the Executive Team Operational Committee on 18 February.

Faye commented the Executive Chief Finance Officer has recommended to reduce the risk scoring for the following risk and that it is therefore removed from the BAF:

Financial Plan – 20% slippage year on year

This was approved by the Board.

THE BOARD

- 1 DISCUSSED and NOTED the above Board Assurance Framework as at February 2013**
- 2 APPROVED the removal of the above risk from the Board Assurance Framework**

217/13 SUB-COMMITTEES

(i) Executive Team Operational Committee

Sally Morris presented the minutes of the Executive Team Operational Committee held on 21 & 28 January and 4 & 11 February 2013.

THE BOARD

- 1 NOTED the minutes of the meetings held on 21 & 28 January and 4 & 11 February 2013**

(ii) Integrated Quality Governance Steering Committee

Dawn Hillier presented an update of the discussions that took place at the meeting held on 7 February 2013. Dawn advised that the Executive Director of Strategy & Business Development confirmed that the pathway mapping to national competencies is underway and linked to the work that the Director of Clinical Governance & Quality is undertaking in relation to job descriptions. The Board were pleased with the progress being made.

THE BOARD

- 1 DISCUSSED AND NOTED the above**

(iii) Audit Committee

Janet Wood presented minutes of the meeting held on 22 November 2012 for information and the revised Terms of Reference which have been amended to include a member of the Audit Committee should have 'relevant' financial experience.

Steve Cotter commented on the funding spent on legal fees and although this figure is reducing asked whether there are controls in place or whether expenditure is reviewed on a regular basis to ensure value for money.

Ray Jennings confirmed that the Trust's legal advisers are subject to a market testing process and rates are agreed in advance. Ray also confirmed only certain members of staff can access legal advice throughout the Trust and advised that the costs are not high compared to the size of the organisation. The Audit Committee also monitor expenditure very closely.

Nikki Richardson commented the Trust is currently undertaking a review of legal services to see if some can be provided in house. This was supported by Board members who advised that legal advice is only sought for complex cases or where specialist legal knowledge is required.

THE BOARD

1 DISCUSSED AND NOTED the above

218/13 TRUST POLICIES

Lorraine Cabel advised members of the public, staff and governors that the Trust Policies are presented to the Board for final approval after going through a robust governance process.

i) Sickness Absence Policy

Nikki Richardson presented the above policy which has gone through the correct governance process.

THE BOARD

APPROVED the Sickness Absence Policy

ii) Recruitment & Retention Premia Policy

Nikki Richardson presented the above policy which has gone through the correct governance process.

THE BOARD

APPROVED the Recruitment & Retention Premia Policy

iii) Remediation Policy

Dr Milind Karale presented the above policy which has gone through the correct governance process.

THE BOARD

APPROVED the Remediation Policy**iv) First Aid Policy**

Faye Swanson presented the above policy which has gone through the correct governance process.

THE BOARD**APPROVED the Integrated First Aid Policy****v) Operating Cash Management Policy**

Ray Jennings presented the above policy which has gone through the correct governance process

THE BOARD**APPROVED the Operating Cash Management Policy****v) Research Conduct & Processes Policy**

Sarah Browne presented the above policy which has gone through the correct governance process

THE BOARD**APPROVED the Research Conduct & Processes Policy****219/13 REPORT FROM TRUST SECRETARY**

Cathy Lilley presented the above report which highlights various communications from our Regulators and also a number of consultation documents from Monitor, CQC and the FTN.

Cathy advised that under 2.4 in the main report the last sentence should refer to the performance of the Board not the Trust in relation to the joint Board of Director and Council of Governors Awayday on 28 March 2013.

Cathy also confirmed that Ray Jennings and Faye Swanson are preparing a formal response on behalf of the Trust to the Risk Assessment Framework (RAF) consultation from Monitor. Lorraine Cabel confirmed this will also form part of the discussions at the Board Development Session on 13 March 2013.

Dawn Hillier advised that the NHS Sustainable Development Strategy 2014-20 and the Sustainable Development group are holding an extraordinary meeting to review this to ensure a response is submitted on behalf of the Trust.

THE BOARD

1 DISCUSSED and NOTED the above**220/13 DRAFT CORPORATE OBJECTIVES/AIMS 2013/14**

Faye Swanson presented the final draft corporate aims for 2013/14 and advised the Trust has undertaken a comprehensive planning process with approximately 900 stakeholders engaged in the planning process. A number of Board of Directors Seminar discussions have taken place, 5 Directorate planning events, 2 stakeholder events, extensive contract negotiations with Commissioners and dialogue with members and Governors via constituency meetings across the organisation.

At the recent Board Development Session held on 19 February 2013 Board members considered the emerging themes and determined priority areas for action. They also carried out a high level governance challenge in line with best practice to ensure the priorities cover essential elements of corporate governance. Board members identified 12 corporate aims.

Lorraine Cabel commented on 3.1 and requested the Local Authorities are identified in this section as we work in partnership with them and they will be holding the public health funding as from 1 April 2013. Amanda Reynolds commented it would also be useful to include reference to the NHS Commissioning Board. Faye agreed to amend this.

With the above amendment the Corporate Aims for 2013/14 were approved.

THE BOARD**1 APPROVED the Corporate Aims for 2013/14 subject to the above amendment****221/13 FRANCIS REPORT**

Faye Swanson presented a summary of the recommendations and initial response by the Government and Department of Health in relation to publication of the Robert Francis QC final report of the Mid Staffordshire NHS Foundation Trust Public Inquiry.

The report was published on 6 February 2013 and makes 290 recommendations. Faye reminded Board members that the recommendations have not formally been received by the Prime Minister and therefore subject to final ratification.

Faye also gave assurance that the Trust does not have high mortality rates and therefore will not be subject to investigation. In relation to poor scores on Friends and Family test the CQC have been impressed with our organisation.

Sarah Browne advised that Executive Directors met on the day the report was published and identified 15 actions to be taken forward immediately. Briefings were given to the Board of Directors on 19 March and Council of Governors on 20 March 2013. Sarah also confirmed that information has been circulated to staff asking them to reflect on their practice. Information is continuing to be gathered against the 290 recommendations and this will be mapped against the work already in place.

Sally Morris commented the Francis Report will have a major impact on the NHS but believes that the Trust is 'ahead of the game' and we will continue to deliver high quality, safe services to our patients.

Dr Milind Karale suggested a presentation on progress to date and Lorraine agreed this should be at the April Board meeting.

Faye advised the Secretary of State has written to all Chairs & Chief Executives asking them to hold listening events with staff and patients but Faye confirmed this is already in place within the Trust and was put in place as part of our Customer Service Strategy and will be completed by the end of March 2013.

Lorraine Cabel also advised Board members not to forget the Trust already has a range of engagement events ie Take it to the Top, constituency meetings, staff meetings, Let's talk about it etc.

THE BOARD

- 1 NOTED the above**
- 2 AGREED a presentation would be given on progress to date at the April Board meeting**

222/13 CQC 136 ACTION PLAN FOR BASILDON MENTAL HEALTH UNIT

Amanda Reynolds presented an update on the Care Quality Commission (CQC) review of the above Unit and actions taken as a result of the visit. Amanda advised Board members that following receipt of the report the Trust raised a number of concerns with the CQC. The CQC have accepted that not all the actions identified are for SEPT and agreed to send a follow up amended report but to date this has not yet been received.

Steve Currell commented under the section in relation to people detained using police powers, a report is being presented to the Associate Mental Health Act

Managers Committee to discuss this. Steve commented as Chair of the Committee he is satisfied that this is work in progress.

Steve also commented that in terms of assurance in respect of information provided to the Associate Hospital Managers Committee that more focused data would be provided to the Committee to enable effective assurance that the actions were being addressed. Amanda Reynolds agreed to amend this section to reflect this.

Dr Milind Karale commented a number of actions do not apply to SEPT and asked whether the CQC will keep this action plan open until completion of the actions by other organisations. Amanda commented we have accepted the recommendations verbally and a formal response will be submitted within the agreed timeframe. Faye Swanson commented SEPT can discharge its responsibilities by stating we have actioned our specific responsibilities.

Lorraine Cabel commented it is important that the CQC are aware of what actions SEPT are responsible for and this should be highlighted in the formal response.

THE BOARD

- 1 **DISCUSSED AND NOTED** the above
- 2 **AGREED** that Amanda Reynolds would prepare the Trust's response ensuring the CQC are made aware that not all actions are relevant to SEPT

223/13 USE OF CORPORATE SEAL

Sally Morris advised the Corporate Seal has been used on the following occasion since the last meeting:

Counterpart Lease – 25 Western Road, Southend on Sea, Essex Ss1 1BB
Lease – 51-53 Mollands Lane, South Ockendon, Essex, RM15 6DA

THE BOARD

- 1 **NOTED** the above

224/13 CORRESPONDENCE CIRCULATED TO BOARD MEMBERS SINCE THE LAST MEETING

Lorraine Cabel thanked Board members for supporting Chair's action with regard to the Rochford Hospital CQC Compliance report that was circulated on 6 February 2013.

225/13 NEW RISKS IDENTIFIED THAT REQUIRE ADDING TO THE TRUST RISK REGISTER OR REMOVED FROM THE REGISTER

None.

226/13 QUESTIONS FROM MEMBERS OF THE PUBLIC/ STAFF/GOVERNORS

John Jones, Governor asked the following questions:

Executive/Non Executive Directors - As part of Monitor requirements there should be a balance of Executives/Non Executive Directors and what are the plans to correct the current imbalance. Lorraine Cabel stated the Constitution allows for up to 10 Executives and 10 Non Executive Directors and when we acquired community services we ran with more Executive Directors for a short period of time but put in place measures to ensure balanced voting should the need have arisen. The current position is there is now an even number of voting Executives/Non Executive Directors on the Board. The voting Directors are highlighted on the Trust's website.

Attendance at Part II Board Meetings of Elected Governors – Are there any plans for Governors to attend Part II Board meetings as observers. Lorraine Cabel advised this should be discussed with the wider Council of Governors and therefore will put this on the agenda for the Council of Governors/Board of Directors Awayday on 28 March 2013

Safer Mental Health Services Toolkit - this is a toolkit developed by the University of Manchester and asked whether SEPT use this toolkit in relation to patients with drug and alcohol dependencies. Sarah Browne advised that the Trust has a Suicide Prevention Strategy in place and has undertaken a self assessment of the Safer Services toolkit. The organisation has not identified any gaps. Sally Morris confirmed she Chairs a Task & Finish Group looking specifically at the Suicide Prevention Strategy and a number of workstreams are taking forward specific pieces of work in line with the toolkit.

John also asked whether the Trust uses outside agencies to treat drug and alcohol patients. Amanda Reynolds commented we are commissioned to provide services in Southend, Essex, Thurrock & Luton and this includes working with adult mental health services around dual diagnosis. In Bedfordshire we only provide detox inpatient beds as the Bedfordshire services were re-tendered and are now with a new provider. Sally Morris confirmed that funding for this

service is via the Bedfordshire CCG and will sit with Local Authorities as part of the public health expenditure as from 1 April 2013.

District Nursing Service Issues – John asked whether Managers from Saffron Walden have been moved to Harlow to address district nursing issues. Sally Morris advised Malcolm McCann, Director of Integrated Services Essex is not clear what question this is referring to and asked whether the Governor could forward more details to Cathy Lilley who will arrange for a response from Malcolm.

Paula Grayson asked the following question:

Compromise Agreements – How many staff within SEPT have signed a Compromise Agreement in 2011/12 and 2012/13. Of these how many have included a clause which restricts the member of staff from disclosing information. Nikki Richardson confirmed there were 2 Compromise Agreements issued in 2011/12 and none to date in 2012/13.

Nikki reminded members that SEPT's Compromise Agreements do not include clauses restricting disclosure of information, but that they are often used as part of consultations in a positive way to help members of staff. Janet Wood commented the Audit Committee has also received assurance in relation to the issuing of such Agreements within the Trust.

Michael Dolling asked the following questions:

Memory Clinics – when GPs refer people to the Memory Clinics there is a 1 to 12 week waiting list and asked whether we addressing the 12 week waits. Dr Milind Karale commented a lot depends on whether the patient already has test results and agreement is reached with the GPs and Commissioners on the best pathway. Dr Karale confirmed that treatment is given at the earliest opportunity.

Mental Health Lead Workers in Surgeries- If named lead workers were available in GP surgeries this would help GPs and patients. Richard Winter commented lead/link workers are identified for all GP surgeries and discussions are taking place with Commissioners whether they want to commission more specific link workers. Dr Karale commented this is currently a pilot in some surgeries to look at any benefits. Richard Winter agreed to forward information on this to Cathy Lilley to send out to Governors.

227/13 ANY OTHER BUSINESS

Brockfield House CQC Compliance Review

Sally Morris presented the final report received from the Care Quality Commission (CQC) following inspection of services at Brockfield House The

review found all standards compliant. Lorraine Cabel stated this was excellent news and wished to congratulate the service on behalf of the Board.

228/13 DATE AND TIME OF NEXT MEETING

The next meeting will take place on Wednesday 27 March 2013 at Little Havens, Thundersley, Essex, SS7 2LH

Signed Date