

SEPT
MINUTES OF PUBLIC BOARD OF DIRECTORS
PART 1
held on 27 March 2013 at
Little Havens, Thundersley, Essex

Members Present:

Lorraine Cabel	Chair
Steve Cotter	Non-Executive Director
Alison Davies	Non-Executive Director
Dr Dawn Hillier	Non-Executive Director
Steve Currell	Non-Executive Director
Randolph Charles	Non-Executive Director
Dr Patrick Geoghegan OBE	Chief Executive/Executive Nurse
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
Dr Pauline Roberts	Medical Director
Peter Wadum-Buhl	Executive Director of Strategy & Business Development

Also Present:

Teresa Matthews	Board Secretary (Minutes)
Cathy Lilley	Trust Secretary

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

Members were reminded of the Trust's Vision Statement.

070/13	APOLOGIES FOR ABSENCE
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Apologies were received from Janet Wood

071/13	DECLARATIONS OF INTEREST
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There were no declarations of interest.

072/13 PRESENTATION by Karen Hussey, Associate Director of Engagement on the Results of the Staff Survey

Karen Hussey updated on the results of the annual national staff survey which takes place between September and December which includes set questions. The survey is carried out on a random sample of 850 staff covering all areas of the Trust in terms of geographical and speciality.

Karen reminded members the survey was carried out at a time of significant change in the NHS and the Trust within a financially unstable environment and while a significant number of restructures, acquisitions etc. were taking place.

The Trust response rate was 49% compared to the national response rate of 50% and SEPT scores were 8 in the best 20% of results and 12 better than average and no results were included in the worst 20%.

In relation to staff engagement the Trust scored 3.78 which was above average compared to other similar organisations. Karen reminded members that the Trust is still being compared to other mental health organisations that do not include community services and therefore this must be taken into account.

The Trust scored above average in the staff able to contribute to improvements and staff motivation. In relation to staff having work related stress the national average was 41% and the Trust scored 33% which is significantly lower than average. This is an excellent score when taking into account the significant changes taking place in relation to restructures.

The Trust was one of the highest scoring organisations for equality and diversity training and staff witnessing harmful errors and near misses has reduced significantly which is very positive.

Karen updated on some of the scores that deteriorated i.e. percentage of staff working extra hours but explained the question is "Do you work extra hours" and does not take into account staff wanting to work extra hours or how many hours worked. The percentage of staff believing the Trust provides equal opportunities score has reduced but compared to the national figure this is not a poor performing area. Support from managers has reduced but the Trust is still above average. The appraisal score is 86% but this figure does not match the reported figures.

Karen commented in summary the Trust has a high level of engagement, high level of motivation and high job satisfaction. The results highlight that SEPT is a good place to work and the Trust received a high score in the care of service users is top priority.

Andy Brogan asked whether there is a breakdown of staff groups. Karen confirmed further analysis is being undertaken especially if an area is showing low or poor results this will be monitored.

Dr Patrick Geoghegan commented he was very pleased with the results and that staff still feel motivated at a time of significant change. Patrick also stated he was pleased that the care of patients is given top priority by the staff. Dr Milind Karale supported this and stated that the results show that staff feel the changes are positive for the organisation.

Steve Cotter requested information on the national results which will help with comparing organisations. Karen advised it is difficult to compare the data as we are not very similar to other Trusts but will include as much national information as possible in future presentations.

Dawn Hillier commented the results only relate to approximately 400 respondents and the Trust has over 6000 staff and this must be taken into account. Dr Patrick Geoghegan gave assurance to the Board this is not the only way the Trust measures staff satisfaction. This is evident from the performance report, sickness absence, turnover, appraisal and supervision, mystery shopper feedback, service user suppers with Consultant staff. There are also Take it to the Top events held with staff, the Chief Executive Ask Patrick facility via the Intranet. Karen also advised that she has held 27 workshops with staff and service users linked to the Customer Service Strategy and the Francis report and feedback is that the Trust is providing an excellent service and we do always put patients first. Patrick requested that Karen provides an update on the outcome of the workshops at the May Board meeting.

Dawn Hillier also commented the survey does not indicate the quality of appraisals carried out. Karen explained the survey has set national question and the Trust cannot change these. Nikki Richardson commented the results in relation to engagement are key and the Trust scored very well in this area.

Dr Pauline Roberts commented the results are excellent and this can be backed up by the high number of applicants the Trust receives via the recruitment process especially at Consultant level. This was also highlighted by the Deanery visit to the Trust from an external panel where we received a no conditions report. The Trust is the most popular rotational place to work for trainees in the East of England.

Lorraine Cabel commented she was very pleased with the results but asked what action would be taken in relation to the scores that have deteriorated. Dr Patrick Geoghegan advised that these areas will be focused on to ensure improvement in the next survey.

Karen advised the next steps are to promote the results widely across the organisation, further analyse the data and identify any hot spot areas for further action.

Patrick commented he will ensure that the results are shared with the Clinical Commissioning Groups (CCGs) and our partners. Sally Morris confirmed that during the contracting process a summary of the results are shared with the Commissioners. Patrick therefore requested Nikki Richardson prepare a letter in the Chair & Chief Executives name with a summary of the results that can be sent to the CCGs and partner agencies.

Karen also advised members that the Trust has received a Certificate of Achievement from NHS Employers. Karen presented this to the Chair. Lorraine Cabel thanked all staff for this achievement.

Lorraine thanked Karen Hussey for an excellent presentation.

073/13 MINUTES OF THE last meeting held on 27 February 2013

With some minor amendments the minutes of the meeting held on 27 February 2013 were agreed and will be signed by Lorraine Cabel, as an accurate record.

074/13 MATTERS ARISING

i) Health Action Plans

Dr Patrick Geoghegan confirmed Elspeth Clayton is actioning this.

(ii) Draft Workforce Strategy

Lorraine Cabel confirmed Chairs action has been taken to approve the Workforce Strategy.

(iii) CQC 136 Action Plan – Basildon Mental Health Unit

Amanda Reynolds confirmed a response has been sent in relation to the above report.

v) District Nursing Service Issues

Sally Morris commented that Malcolm McCann has not yet been contacted by the Governors in relation to this issue.

vi) Lead Workers in GP Surgeries – Information

Cathy Lilley confirmed this information has been circulated to Governors.

075/13 PERFORMANCE AND FINANCE SCRUTINY COMMITTEE

Lorraine Cabel advised the meeting was very positive with robust debate. Dr Patrick Geoghegan presented assurance from the Performance & Finance Scrutiny Committee in relation to performance issues as at Month 11 (February 2013).

Patrick advised an action log is in place which was reviewed by the Committee on 21 March 2013. The Committee agreed to defer an action relating to undertaking an educational seminar for CCGs until October in light of the current commissioning environment. In relation to medical staffing productivity it was noted that the Medical Director will be preparing a report for the Executive Team Operational Committee to consider.

Lorraine Cabel commented minor changes were made to the Terms of Reference.

Dr Patrick Geoghegan presented the hotspots agreed by the Committee as follows:

Falls – Patrick advised there have been 15 falls year to date identified as meeting the serious incident reporting criteria. No trends had been identified as the falls had occurred in various SEPT locations in Essex and Bedfordshire. The reporting criteria has changed and therefore a direct comparison with previous performance was not available at this time. Patrick gave assurance to Board members that if funding is required to purchase equipment to minimise any risk this would be made available. In addition Andy Brogan assured Board members that a Trustwide Falls Group has been established to identify lessons learned and oversee implementation of any change in practice.

Unexpected deaths – Patrick advised that the Essex Quality Surveillance Group had raised concern regarding the number of unexpected deaths of mental health community patients in the Essex locality between November 2012 and January 2013. Patrick confirmed that the Trust has received confirmation from the CCG that this has now been reviewed independently by the Essex Public Health Lead who has confirmed that the reporting of Serious Incidents within SEPT was average and there is not a systematic under reporting. The available national data indicates that the suicide rate among users of SEPT's mental health services is similar to other organisations. Patrick also suggested that as had been done in the past he would commission an external review of some of the recent unexpected deaths to ensure our investigations are thorough and to seek an independent view on any improvements that can be made with our investigations.

Absent without leave – The Committee were advised that there has been an apparent increase in patients reported as Absent without leave (AWOL) year to

date compared to last year. There has been changes in the definition and strengthening of processes in the Mental Health Act Office. The Committee received assurance that no harm had resulted from any of the incidents reported but has requested that further work be undertaken to validate data to provide an accurate comparator baseline.

Steve Currell requested assurance that when patients do return after being AWOL they are reviewed. Andy Brogan gave assurance that this is part of the Trust's policy but reminded members that most of the AWOLs are patients not returning from agreed leave which is less of a risk than those who abscond.

% complaints resolved within agreed timescales and complaints resolved with (notional) 30 day target - Patrick stated he expressed his disappointment that performance against the national target has not improved despite assurance that action has been taken by Directors to address this. Patrick advised he has ensured that monitoring against the 30 day target be put in place to encourage quick resolution. The Committee raised concern in relation to investigation of complaints by medical staff not being resolved within the agreed timeframe and asked Dr Milind Karale to provide an update on action he is taking to ensure improvements are made and that we do adhere to Trust policy at the next meeting.

Did not attends (First appointment) – This was identified as a hot spot as performance has been lower than available benchmarks during January and February 2013. The Committee noted that project groups have been set up in Essex and Bedfordshire and the new model of service is currently being negotiated with CCGs in Essex and Bedfordshire.

Data Consistency (10.9% shift between January and February, consultant activity Essex) – The Committee raised concern that the data consistency measure had improved in February but was still above target. Patrick confirmed an internal audit has been commissioned to review the controls in place and the results will be shared with the Committee.

Mandatory Training - Patrick commented he was disappointed that performance had only increased by 2% since last month. It was noted that the national training system (OLM) had been out of use for a number of days during February and performance had still increased. It was also noted that Essex, Bedfordshire and Luton have been ranked second and fifth in a league table of usage of OLM comparing providers across the East of England despite being live for only 2 months. Lorraine commented she raised concern at the resources available as from 1 April and supported funding being made available on a non-recurrent basis to ensure the new systems are fully embedded.

Access to healthcare for people with a learning disability – The Committee noted and discussed the results of the annual self-assessment of compliance with the six criteria.

076/13 FINANCIAL PERFORMANCE

Ray Jennings updated Board members on the Month 11 position as at February 2013 and confirmed the surplus position has reduced as per plan due to the implementation of the non-recurrent quarter four schemes. A further decrease is expected in Month 12 as these schemes are completed in line with planned performance.

Working capital and cash balances remain strong and the delegated budgetary position continues to be underspent.

Ray confirmed there are no new hot spots in Month 11 but the Trusts CIP programme continues to under perform with the shortfall being met non-recurrently. The recurrent shortfall remains at £3.9m and this will be added to next year's cost reduction target. High observation levels have continued within the Older People Inpatient Services resulting in the use of agency and bank staff which has increased the overspend position in Month 11.

Dr Patrick Geoghegan assured Board members that this was raised at the Finance & Performance Scrutiny Committee and members have made it clear to the Director concerned that from April this budget must work within allocated resources.

Ray advised that previously West Essex commissioners had advised that they would reclaim approximately £750K from the 2012/13 contract, however, some of these issues have now been resolved and the Trust has agreed a £0.1m refund to the PCT as a goodwill gesture.

Ray confirmed at the end of Month 11 The Trust's cash balance was £37.7m compared to plan of £29.5m. The variance is mainly due to the slippage in capital spend of £4.2m relating to expenditure on the Bedfordshire & Luton transformation programme and IT infrastructure.

THE BOARD

1 DISCUSSED and NOTED the above

077/13 BOARD ASSURANCE FRAMEWORK

Dr Patrick Geoghegan presented an update on the current position of the Board Assurance Framework (BAF) as at March 2013 which was reviewed by the Executive Team Operational Committee on 18 March.

Patrick proposed the removal of aim 1.1 in relation to demonstrating robust governance and assurance systems.

Patrick also proposed that aim 5.3 if engagement is not effective with CCGs and Health & Well Being Boards then the organisation may not be able to respond to local commissioning requirements, should have the risk score increased from 10 to 15. Both proposals were agreed by the Board.

Patrick also updated on the outcome of the Board development session on 13 March where each corporate aim was impact rated in line with the Trusts Risk Management Framework. Of the 12 corporate aims 5 were impact rated high (10 or above) and these will form the basis of the Board Assurance Framework for 2013/14. This was approved by the Board.

THE BOARD

- 1 DISCUSSED and NOTED the above Board Assurance Framework as at February 2013**
- 2 APPROVED the recommended changes to the Board Assurance framework.**
- 3 APPROVED the impact rating of non achievement of objectives agreed at the 13 March Board development session**
- 4 AGREED the risk rating against next year's objectives**

078/13 SUB-COMMITTEES

(i) Executive Team Operational Committee

Dr Patrick Geoghegan presented the minutes of the Executive Team Operational Committee held on 18 & 25 February and 4 & 11 March 2013.

Dawn Hillier commented on the discussions in relation to the Mid-Staffordshire report and asked how the role of the support worker will be taken forward. Dr Patrick Geoghegan commented the response from the Government to the Francis Report has just been published. The Trust will now map the responses and a formal presentation will be given at the April Board meeting.

THE BOARD

- 1 **NOTED the minutes of the meetings held on 18 & 25 February and 4 & 11 March 2013**

079/13 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) Freedom of Information Act 2000 Policy

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

THE BOARD

APPROVED the Freedom of Information Act 2000 Policy

080/13 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 commented that since preparing the report further publications from Monitor have been issued and agreed to send the links/electronic versions to Board members for information.

Dr Patrick Geoghegan commented in relation to the Health Committee report on Monitor where the FTN has concerns about the overlapping remits between the CQC and Monitor and requested Board members are aware of this document. Cathy Lilley agreed to circulate this to Board members for information.

THE BOARD

- 1 **DISCUSSED and NOTED the above**

081/13 NHS COMMISSIONING BOARD NARRATIVE FOR INTEGRATED CARE

Amanda Reynolds advised that following the publication by the NHS Commissioning Board on 11 December of "a narrative for person centred co-

ordinated (integrated care) the Board requested a SEPT response to the consultation.

Amanda confirmed the narrative has been developed by the NHS Commissioning Board in response to the Health & Social Care Act 2012 and has been shared widely. SEPT is well placed to respond to this narrative of integrated care as we have a strategic priority in place and this was also discussed as part of a Board development session.

Peter Wadum-Buhl commented the narrative does not include clarity on the Trusts aspirations. Amanda commented the Trust has already done a significant amount of work in this area and will share this with Commissioners. Dawn Hillier commented the response has some gaps in relation to integrated care and this is a system wide issue that must be addressed.

Dr Patrick Geoghegan commented that the Trust will be moving towards integrated structures within the Trust and advised the Executive Team will take this forward and update at the May Board on the next steps.

THE BOARD

- 1 NOTED the above**
- 2 AGREED an update on Integrated Care Structures would be presented to the May Board meeting**

082/13 VOLUNTEER UPDATE

Nikki Richardson presented an update on progress made with the volunteer service. All volunteer information has now been validated and there are 224 active volunteers registered with 113 volunteers in community services and 108 in mental health services.

Nikki confirmed that since the re-launch of the volunteer service 96 are currently going through the engaging process, all of whom have been matched to existing job roles. The Trust is currently actively advertising job roles with the local area agencies as well as via the SEPT website.

Nikki advised that the Trust has been working very closely with the Mickey Payne Memorial Foundation to pilot a 'dementia buddy' scheme, a web page went live on 1 October 2012 and one of the corporate objectives this year will be to aim for 50% of our interview panels across the Trust to have a volunteer/service user participating in the recruitment of staff.

The next steps are to ensure all volunteers complete the induction programme, promote the volunteer service across the organisation, engage with all service

areas and identify further volunteer job roles, continue to engage new volunteers and continue to work with partnership voluntary organisations.

Randolph Charles congratulated the Trust for such a comprehensive volunteer policy but stated it is important volunteers are supported by the Board to undertake their volunteering duties.

Steve Cotter asked whether the volunteer numbers are proportionate to localities. Nikki Richardson commented this is in place as far as possible but there is now a Volunteer Ambassador in place who will ensure all localities are covered.

Steve Currell asked whether Associate Mental Health Act Managers could attend the SEPT Volunteer induction programme in addition to the Associate Mental Health Act Managers programme being prepared by Anthea Hockly. Nikki Richardson supported this.

Dr Patrick Geoghegan updated members on the Mickey Payne Memorial Foundation which now has 15 volunteers and agreed to ask Caroline Pearson the founder of the Foundation to attend a future Board meeting and update members.

Alison Davies asked whether the volunteer database will include information on equality and diversity. Nikki Richardson confirmed the engagement process collects this data.

Lorraine Cabel thanked Nikki Richardson and her team for the work done in this area. This was re-echoed by Board members.

THE BOARD

1 NOTED the above

083/13 CARERS STRATEGY UPDATE

Amanda Reynolds updated the Board of an additional priority on Young Carers within the Trust's Carers Strategy after presentation to the Board in January 2013.

Amanda confirmed the action plan has also been amended to reflect this new priority and to confirm focussed commitment to improving support for young carers.

Randolph Charles commented he was pleased with the extra priority as this recognises the input from young carers.

Dr Patrick Geoghegan requested Amanda Reynolds update the timeframe to ensure the timescales are up to date. Amanda agreed to action.

Dawn Hillier asked whether this covers carers in community services. Amanda confirmed this covers all carers across the organisation and will amend the narrative to reflect this. Dr Patrick Geoghegan gave assurance to Board members that he and other Directors/Senior Staff already attend a number of carers events in the community within all specialities.

THE BOARD

- 1 APPROVED the additional priority to be included in the carers strategy**

084/13 PATIENT SURVEY ACTION PLAN UPDATE

Dr Patrick Geoghegan advised this has been deferred to the April Board meeting.

THE BOARD

- 1 NOTED the above**

085/13 DELIVERING SINGLE SEX ACCOMMODATION

Peter Wadum-Buhl presented confirmation of the action taken by the Trust to ensure compliance with the Department of Health standards in relation to Eliminating Mixed Sex Accommodation (EMSA).

Peter confirmed that all providers of NHS funded care are expected to eliminate mixed sex accommodation except where it is in the overall best interest of the patient or reflects their patient choice. All providers must routinely report breaches of sleeping accommodation and each a declaration of compliance is required.

The Trust reported one breach in the year in Bedfordshire Mental Health Services but this was agreed with Commissioners as it was in the best interest of the patient. Dr Patrick Geoghegan commented he was disappointed that the Commissioners then fined the Trust for this even though they agreed this was the best option for the patient based on clinical need.

Dr Patrick Geoghegan wished to put on record his thanks to Chris Howlett and his team for their work in this area.

THE BOARD

NOTED progress against the EMSA plan 2012/13
APPROVED the actions for the Trust contained in the revised EMSA Plan 2013/14
APPROVED the submission of the Declaration of Compliance

086/13 BASILDON MENTAL HEALTH UNIT CQC COMPLIANCE REPORT

Dr Patrick Geoghegan presented a report following an inspection by the Care Quality Commission (CQC) of Basildon Mental Health Unit in November 2011.

Patrick was pleased to confirm the Trust is now compliant with all standards.

THE BOARD

1 NOTED the above

087/13 FINANCIAL PLAN

Ray Jennings confirmed a detailed discussion has already taken place in Part II of the Board meeting but reminded members that the Financial Plan will be submitted as part of the Annual Plan submitted to Monitor. Ray advised the Trust is facing a very difficult year with changes in commissioning arrangements and the contracting process.

Ray commented there is an £18m shortfall for next year in relation to the Cost Improvement Programme (CIPs). As discussed at previous planning events some of this shortfall will be taken from back office functions but this will still mean reductions in operational services.

All proposals will go through a Quality Impact Assessment (QIA). Dr Milind Karale commented the QIA process ensures quality of the service, safety of the services and is an independent robust process carried out by the Medical Director and Director of Clinical Governance & Quality. Each scheme is scored based on clinical impact and quality of service and not financially driven.

THE BOARD

1 NOTED the above

088/13 PLACE PROCESS

Ray Jennings updated the Board on the revised annual national process for assessing the patient environment. In previous years the patient environment was subject to annual inspection under the Patient Environment Assessment Team (PEAT) and this is now being replaced by Patient Led Assessment of the Care Environment (PLACE).

Ray confirmed the new process is to be patient led with at least 50% of the audit team comprising of patients or their representatives and will cover four key areas of the patient environment including cleanliness, food, patient well-being and facilities management.

Chris Howlett commented that due to the new scoring system there will be no direct comparator between PEAT and PLACE results. The process of recruiting and training patient representatives has commenced.

Lorraine Cabel asked how many members will make up the inspection team. Chris Howlett commented the proposal is 4 members with two patient or patient led representatives. Chris confirmed names have already been put forward via PALs and ward stakeholder groups. Lorraine Cabel was pleased with the assurance that the patients and patient's representatives will be independent.

Sally Morris welcomed the involvement of patients as part of the process but stated it is important appropriate training and support is in place. Sally also stated SEPT's patients are used to high quality services and this information will be benchmarked nationally and therefore this must be taken into account. Chris Howlett commented the data will be included within the Performance Dashboards and the results published in September.

Steve Cotter asked whether the scores will be collective or independent. Chris confirmed the scores are independent by each member of the team. The results are collected by the Trust and input into an on line system.

Randolph Charles commented the profile within Bedfordshire & Luton must be taken into account as the diverse population may have a different perspective. Chris confirmed there are some culturally related questions included in the assessment i.e. provision of ethnic foods and provision of place of worship and the Trust will be well represented by ethnic groups on the PLACE teams.

THE BOARD**1 NOTED the above**

089/13 REVIEW OF STANDING ORDERS

Cathy Lilley presented an updated version of the Board of Directors Standing Orders following annual review. The Standing Orders have been amended to reflect the changes to the Trust's Constitution and have been approved by the Executive Team and Audit Committee. The Trust's Solicitors have also reviewed the changes and have confirmed they comply with the Trust's Constitution and Health & Social Care Act 2012.

THE BOARD**1 APPROVED the revised Standing Orders****090/13 REVIEW OF STANDING FINANCIAL INSTRUCTIONS, RESERVATION OF POWERS TO THE BOARD AND DELEGATION OF POWERS AND DETAILED SCHEME OF DELEGATION**

Ray Jennings presented an updated version of the Board of Directors Standing Financial Instructions Reservations of Powers to the Board and Delegation of Powers and Detailed Scheme of Delegation following annual review.

Ray confirmed these have been reviewed by the Executive Team Operational Committee and Audit Committee.

Ray outlined the main changes to the documents and mainly relate to changes arising from the Health & Social Care Act 2012 in respect of income from non-primary purposes.

THE BOARD**1 APPROVED the revised Standing Financial Instructions, Reservations of Powers to the Board and Delegation of Powers and Detailed Scheme of Delegation****091/13 HEATH CLOSE CQC COMPLIANCE REPORT**

Dr Patrick Geoghegan presented the Board with a report following a CQC visit to Heath Close. Patrick was pleased to confirm that the Trust are compliant with all standards.

THE BOARD

1 NOTED the above

092/13 USE OF CORPORATE SEAL

Dr Patrick Geoghegan advised the Corporate Seal has been used on the following occasion since the last meeting:

- Transfer of Title Registration document for Flitwick Health Centre, Highlands, Flitwick
- Licence to Alter, Charter House, Alma Street, Luton, LU2 2PJ

THE BOARD

1 NOTED the above

093/13 CORRESPONDENCE CIRCULATED TO BOARD MEMBERS SINCE THE LAST MEETING

Lorraine Cabel thanked Board members for supporting Chair's action in relation to the Draft Workforce Strategy.

094/13 NEW RISKS IDENTIFIED THAT REQUIRE ADDING TO THE TRUST RISK REGISTER OR REMOVED FROM THE REGISTER

None.

095/13 QUESTIONS FROM MEMBERS OF THE PUBLIC/ STAFF/GOVERNORS

Louise Hembrough commented on the recent adverse publicity in relation to Basildon Hospital and asked that as we provide services on the site will this impact on the Trust. Dr Patrick Geoghegan commented no issues have been raised to date and SEPT continues to provide high quality services via the Mental Health Unit. Patrick also confirmed that SEPT will help where possible to support Basildon Hospital colleagues.

Peter Wadum-Buhl also reminded Board members that the Trust does have a representative on the Board of Governors at Basildon Hospital and we will give support via this route if necessary.

227/13 ANY OTHER BUSINESS

Government Response to the Francis Report

Dr Patrick Geoghegan confirmed the Government response to the Francis report recommendations has now been published and the Executive Team will be considering this and taking appropriate action.

Patrick advised the Executive Team have established a Task & Finish Group to review the report and recommendations and undertake a mapping process on where the Trust is against the recommendations with a formal presentation at the April Board meeting.

Patrick also advised that to ensure this is cascaded across the organisation sessions will be run in all wards and departments to ensure staff are kept up to date on the recommendations and what action the Trust needs to take.

Dr Pauline Roberts, Medical Director Retirement

Lorraine Cabel advised this is Dr Pauline Robert's last Board meeting before her retirement. Lorraine wished to put on record her thanks for Pauline's leadership and commented she has been instrumental in the success of SEPT and has provided excellent Clinical Leadership. Lorraine wished Pauline health and happiness for her retirement. This was re-echoed by Board members.

Dr Pauline Roberts thanked Board members for their support over the years.

096/13 DATE AND TIME OF NEXT MEETING

The next meeting will take place on Wednesday 24 April 2013 at Stockwood Discovery Centre, Luton, LU1 7HA.

Signed Date