

SEPT
MINUTES OF BOARD OF DIRECTORS MEETING
PART I
held on Wednesday 29 May 2013
at The Bell Hotel, High Road, Bell Common, Epping CM16 4DG

Members Present:

Lorraine Cabel	Chair
Andy Brogan	Interim Director of Clinical Governance & Quality
Steve Cotter	Non-Executive Director
Steve Currell	Non-Executive Director
Randolph Charles	Non-Executive Director
Alison Davies	Non-Executive Director
Dr Patrick Geoghegan OBE	Chief Executive/Executive Nurse
Dr Dawn Hillier	Non-Executive Director
Ray Jennings	Executive Chief Finance Officer
Dr Milind Karale	Medical Director
Malcolm McCann	Executive Director of Integrated Services – Essex
Sally Morris	Executive Director of Specialist Services/ Contracts/Deputy Chief Executive
Nikki Richardson	Executive Director of Corporate Services & Customer Care
Peter Wadum-Buhl	Executive Director of Strategy & Business Development
Richard Winter	Executive Director of Integrated Services – Bedfordshire & Luton
Janet Wood	Non-Executive Director/Vice-Chair

Also Present:

Cathy Lilley	Trust Secretary
Brian Arney	Public Governor
Marie Barker	Administrative Officer Podiatry
Heather Beach	Director of Integrated Services West Essex
Joy Das	Appointed Governor
Caroline Dearson	Mickey Payne Foundation
Sue Demon	Community Dental Nurse Team Manager
Jackie Gleeson	Public Governor
Paula Grayson	Public Governor
Alexandra Green	Integrated Services Manager West Essex
Manfred Hennessy	Assistant Director Integrated Services West Essex
Judy Hurry	Head of Universal Services
Chris Jennings	Compliance Officer, SEPT
Sharan Johal	Project Manager Quality & Governance
John Jones	Lead Governor
Shona Little	Integrated Clinical Lead, Secure Services
Sarah Lowry	Assistant Director Business Reporting
Zitha Mayo	Substance Misuse Nurse
Ann Nugent	Head of Clinical Quality

Signed (in the chair for the meeting held 29 May 2013)

Mollie Pattenden	Patient Rep CCG/PAH Service Carer
Patrick Sheehan	Governor
Theresa Smith	Director of Children's Services (Essex)
Lesley Wackett	Corporate Business Support Manager
Carol Wilson	Business Analyst West Essex
Kate Witham	Communications Officer, SEPT

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

Members were reminded of the Trust's vision statement.

135/13 APOLOGIES FOR ABSENCE

Apologies were received from Amanda Reynolds, Executive Director of Partnerships & Social Care.

136/13 DECLARATIONS OF INTEREST

There were no declarations of interest.

137/13 PRESENTATION: DEMENTIA BUDDIES by Caroline Dearson, Mickey Payne Foundation

Caroline Dearson, founder of the Mickey Payne Foundation, described the background on the Foundation whose aim is to create more awareness of Dementia particularly from a family's point of view, and to create a better support system.

Caroline explained that the Dementia Buddy Scheme is designed to improve the hospital experience of dementia patients by offering an enhanced befriending service for people with Dementia and their families. The Scheme is being supported by SEPT and is initially being rolled out in Meadowview Ward on the Thurrock Community Hospital site. The first volunteers, who are CRB checked, have undertaken SEPT induction and Dementia awareness training, and will be commencing work this month.

The aim of the service is for named volunteers to befriend people with dementia during hospital stays when their family, friends or carers are not available. Caroline described how she came up with the idea following her experiences with her father who had Vascular Dementia and in particular her experiences in A&E where staff were trained fully to deal with emergency issues but not emergency and Dementia issues.

Caroline pointed out that she hoped to extend the service to include video links, hosted by the Buddies, on iPads or laptops, when the Buddies have settled into their new role. She stressed that the Buddies would be fully supported and their care and protection would be paramount.

All Board members praised Caroline for the work that she and the Foundation was doing in improving the hospital experience of Dementia patients. They thanked

Signed (in the chair for the meeting held 29 May 2013)

Caroline for her presentation and in particular for sharing the stories of her experience with her father which powerfully illustrated the importance of remembering that 'human' side of people with Dementia. Board members were confident that the project would help achieve the aim of providing the best safe care and maintaining the dignity of people with Dementia.

Board members unanimously agreed that the Trust would provide the research funding for the evaluation of the project as it was hoped that the outcomes would support the Foundation in gaining further funding and charitable status, and Dr Patrick Geoghegan agreed to action this. A meeting would be arranged between Caroline, Andy Brogan and Dr Milind Karale to support the pilot.

Caroline agreed to provide an update on progress to the Board at a later meeting.

THE BOARD

1 Agreed to fund the research evaluation of the Dementia Buddies Scheme

ACTION

- 1 PG to action funding for the project evaluation**
- 2 Meeting to be arranged between CD, AB and MK.**

138/13 MINUTES OF THE LAST MEETING HELD ON 24 April 2013

With one minor amendment, the minutes of the meeting held on 24 April 2013 were agreed and will be signed by Lorraine Cabel, as an accurate record.

139/13 ACTION LOG

Dr Patrick Geoghegan reminded the Board that it will be utilising an action log for recording, reporting and monitoring actions agreed at its meetings. He stressed the importance of ensuring that the log is updated prior to a Board meeting and the RAG rating column should accurately reflect the current status of the action.

140/13 PERFORMANCE AND FINANCE SCRUTINY COMMITTEE

Janet Wood chaired the meeting in Lorraine Cabel's absence and 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 for April 2013.

Progress on actions arising from the previous meeting

Patrick highlighted the following:

- **Access to Healthcare for People with a Learning Disability**
Malcolm McCann and Richard Winter, Executive Directors of Integrated Services (Essex and Bedfordshire, respectively) have ensured action plans are in place to meet the criteria identified in Access to Healthcare for People

Signed (in the chair for the meeting held 29 May 2013)

with a Learning Disability. They confirmed that these will be completed by the end of June.

- **CQC Action Plans (Rochford Hospital, Essex)**

Malcolm McCann had given assurances that action had been taken to address the majority of issues that had led to the two minor compliance actions. There had been a delay that did not pose additional risk in order to close the final outstanding action and these will be in place by the end of May.

- **Reduced Waiting Times for Memory Assessment Service (Essex)**

Malcolm McCann had given assurances that a revised standardised care pathway across all teams was being developed, taking account of the reasons for the variation in waiting times. The project would be presented to the Executive Operational Committee (EOC) and proposed waiting times would be advised to the Performance & Finance Scrutiny Committee.

- **Mandatory Training for Medical Staff**

Dr Milind Karale, Executive Medical Director, had given assurance that a thorough review of the issues preventing compliance had been carried out and pragmatic solutions agreed for doctors in training and permanent staff. The Board recognised the significant improvement in achieving targets.

Hotspots

Patrick reported that the hotspots agreed by the Committee included:

- **Absent Without Leave (AWOL)**

There were seven incidents reported in April. Whilst none had resulted in harm or met the criteria for reporting to the CQC, the number occurring in April was the same number that were reported for the whole of Q4 2012/13. A lack of clarity regarding the definition being used to classify the reported incidents had been identified and was being investigated.

Following a request by Board members, Dr Milind Karale confirmed that he was also investigating why so many people on leave had failed to return to support the identification of lessons learnt that would improve current practice.

- **Did Not Attend (DNA) Rates for First Consultant Clinic Attendances**

DNA rate for April was 16.6% compared to the target of 11.2%. This demonstrated significant improvement on March (21.7%) and was the lowest monthly rate this calendar year. However, rates exceeded the target in all localities with the exception of Thurrock CCG. Board members discussed the range of actions that were being taken and no further action was requested.

- **Serious Incidents**

Andy Brogan advised there were no avoidable category 3 or 4 pressure ulcers identified in community health services for April, and the number of RCAs awaiting completion had reduced from 57 to 21. The Board were satisfied with the performance reported and no further action was requested.

- **Complaints resolved within agreed timescales**

Signed (in the chair for the meeting held 29 May 2013)

Board members were pleased that 94% of complaints closed in April were completed within the agreed timescale, and in particular noted a vast improvement in the Medical Directorate and congratulated Dr Milind Karale and his medical team for the work done in this area.

- **Development of a Pathway-based Contract – PbR Community and Inpatients**

Although there had been an improvement within Bedford, Luton and Essex, the Trust was not at the required target. The Board requested to see further work undertaken in this area to ensure the Trust was compliant.

- **Mandatory Training**

92% of permanent staff were compliant with mandatory training requirements compared to the target of 100% but which was a much improved figure from the 88% reported last month.

The Board discussed the targets and requested that efforts were made to ensure the Trust was fully compliant with statutory requirements. It was also agreed that further work needs to be undertaken in identifying who needs to attend such training so that appropriate staff are attending relevant courses.

- **Biggleswade Hospital Performance Notice**

Board members were pleased to note that the Performance Notice had been lifted by Biggleswade CCG and thanked members of staff who participated in these negotiations and achieving such a successful outcome.

Emerging risks

Malcolm McCann advised that the Trust was working with SerCo to resolve some dependency issues and, in particular, had agreed a solution for the monitoring of KPIs.

THE BOARD

1 Received the report, and discussed and noted the content.

141/13 FINANCIAL PERFORMANCE

Ray Jennings presented the Finance Report and advised overall good progress had been made although there were still areas of overspending within Inpatient Services in Bedford and Luton of £0.09m (9% of budget). Board members asked for assurance from Richard Winter that this would be addressed. Richard advised that he was working alongside Ray in carrying out a review and identifying reasons for overspending within the Older People's area (which amounted to £0.06m, 19% of budget) and what action was being taken to address the overspend. Following a request by Board members, Richard agreed to provide an update at the next meeting.

Ray advised that Essex Inpatient Services was underspent in month 1 by £0.02m comprising an underspend for Adult Inpatient and Home Crisis and Treatment teams, and an overspend for Older People Inpatient Services of £0.03m (4% of budget).

Signed (in the chair for the meeting held 29 May 2013)

Steve Cotter asked if there was any long term trend in the use of bank and agency staff which is contributing to the overspend. Ray advised that bank and agency staff support the way the Trust delivers services, for example, by providing temporary cover for annual leave and sickness. The use of such staff was, however, carefully monitored. Nikki Richardson confirmed that if managed well, the use of bank and agency staff was a positive way for an organisation to manage its workforce.

Dr Patrick Geoghegan stressed the importance of all Directorates working within their allocated funding as the Trust was facing a very difficult financial year and it was therefore crucial that our resources were managed.

Ray also pointed out that the contract and other income was below plan due to the contracts for public health in relation to Essex and Southend local authorities still being under negotiation as at the end of April. The contract for Essex has now been agreed and was anticipated that Southend's contract negotiations would be finalised before the end of May.

Ray reported that at the end of month 1, the Trust had achieved a financial risk rating of 4 which represented good performance.

THE BOARD

- 1 Received the report, and discussed and noted the content.**

ACTION

- 1 RW to provide an update at the next meeting on proposals to manage the overspend in Older People's Services.**

142/13 BOARD ASSURANCE FRAMEWORK

The BAF provides a comprehensive method for the effective management of the potential risks that may prevent achievement of the key aims agreed by the Board. As a live document, it was continually updated.

The Board Assurance Framework 2013-14 was last reviewed by the Board of Directors on 24 April 2013. Following a discussion, the Board members agreed the removal of four risk ratings and identified one new risk for escalation to the BAF, namely Community and Mental Health Services in Luton and Bedfordshire may be subject to retendering in April 2014.

THE BOARD

- 1 Received, discussed and noted the report**
- 2 Approved the Board Assurance Framework as at May 2013 including the escalation of the new risk**
- 3 Approved the risk scoring as detailed in the report.**

143/13 SUB-COMMITTEES

i) Executive Team Operational Committee

Signed (in the chair for the meeting held 29 May 2013)

Dr Patrick Geoghegan presented the minutes of the Executive Team Operational Committee held on 15, 22 and 29 April, and 13 May 2013.

Alison requested a presentation on the Trust's work with Anglian Ruskin University to help understand the links and relationship. Patrick agreed that the timing for this was appropriate and in fact the presentation would also include the work with Bedfordshire and Essex Universities. He advised that the Trust is establishing a Health & Wellbeing Academy in partnership with these Universities. A presentation would in the first instance be included at a Board Development Session and considered for a Board meeting.

THE BOARD

- 1 Received the report, and noted the content.**

ACTION

- 1 Presentation on the Health & Wellbeing Academy and University stakeholder partnerships to be arranged at a Board Development Session**
- 2 Presentation on the above to be considered at a future Board of Directors meeting.**

144/13	TRUST POLICIES
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Lorraine Cabel advised that the Trust policies are subject to a robust governance process and that they were available to be scrutinised by Non-Executive Directors prior to the Board meeting. She reported that the Executive Team Operational Committee had approved the following policies for ratification by the Board:

i) Rostering Policy

Malcolm McCann presented the above Policy which had been subject to the correct governance process.

THE BOARD

- 1 Approved the Rostering Policy.**

ii) Mobile Phone Policy

Andy Brogan presented the above policy which had been subject to the correct governance process.

THE BOARD

- 1 Approved the Mobile Phone Policy.**

iii) Intellectual Property Policy

Andy Brogan presented the above policy which had been subject to the correct governance process.

THE BOARD

- 1 Approved the Intellectual Property Policy.**

iv) Safeguarding Adults Policy

Signed	(in the chair for the meeting held 29 May 2013)
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Andy Brogan presented the above policy which had been subject to the correct governance process.

THE BOARD

1 Approved the Safeguarding Adults Policy.

v) Safeguarding Children Policy

Andy Brogan presented the above policy which had been subject to the correct governance process.

THE BOARD

1 Approved the Safeguarding Children Policy.

145/13	REPORT FROM TRUST SECRETARY
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Cathy Lilley presented the above report which provides an update and assurance to the Board on key governance arrangements associated with maintaining compliance with the Trust's constitution. The report also highlights various communications and consultation documents from Monitor and the FTN.

Cathy advised that since writing the report Monitor has issued its consultation document on the Annual Reporting Manual for 2013/14 which the Trust will be responding to. In addition, she advised that the review of the Trust's compliance with the new Provider Licence would in the first instance be considered by the Integrated Quality Governance Steering Committee prior to submission to the Board of Directors.

Lorraine Cabel pointed out that the priorities for the Task & Finish Groups were being reviewed and that together with Peter Wadum-Buhl would be leading the process for the Task & Finish Group on accountability which is a fundamental requirement of both Directors and Governors. Details would be circulated shortly.

Lorraine also reminded and invited the members of the public to the Trust's AGM on Thursday 12 September 2013 in Essex, venue to be advised.

THE BOARD

1 Received the report, and discussed and noted the content.

ACTION

- 1 CL to circulate to Board an electronic copy of the full Trust Secretary report including hyperlinks to publications**
- 2 Trust compliance with the Provider Licence review to be presented at a future Board meeting**
- 3 LC to circulate details of the Director/Governor Accountability Task & Finish Group.**

Signed (in the chair for the meeting held 29 May 2013)

146/13 PATIENT SURVEY ACTION PLAN UPDATE

Malcolm McCann presented, on behalf of Richard Winter and himself, an update on progress in relation to the actions being taken against issues raised following the inpatient and community survey results from September 2012.

Malcolm reported that the results of the survey had shown an overall improvement in performance across a range of indicators. Recent focus has been on those areas which were identified for improvement where the responses to the questions had either scored below the national average or fallen since 2011. These issues are being taken forward on a Trust-wide basis in terms of refocusing the values and customer care strategy and locally through action plans as identified as part of the qualitative 'Friends and Family Test' feedback.

In addition, other patient experience initiatives, such as the mystery shopper programme and face-to-face events, were also contributing to specific actions for improvement within operational teams.

Malcolm also pointed out that following a series of engagement events designed to identify the key priorities of our patients in terms of their care, the Patient Experience Team will be launching a new patient survey (including the NHS Friends and Family Test) across all services in order to consistently monitor these priorities. Summary feedback, together with real patient stories, will be fed directly back to relevant team leads on an ongoing basis to ensure action can be taken to improve the experience of those using SEPT services.

Task and finish groups were also being set up as part of the Patient Experience governance structure to follow through on the actions that have arisen from the national surveys.

The Board agreed that the Patient Experience governance structure would also include a line to the Board of Directors as well as a dotted reporting line to the Council of Governors to ensure they are also involved in patient experience issues.

The Board also discussed the challenges relating to meeting patients' expectations on the provision of services, particularly as these are commissioner-led, and agreed that creative solutions should be considered, such as building on the work with volunteers, engaging with universities for student placements, etc. This should be reflected in the Trust's workforce plan.

In response to a question by Randolph Charles, Malcolm confirmed that the Trust has a well-established crisis care framework to access services out of hours.

THE BOARD

1 Received the report, and discussed and noted the content.

ACTION

1 Patient Experience governance structure to include reporting line to Board of Directors and dotted reporting line to Council of Governors

Signed (in the chair for the meeting held 29 May 2013)

- 2 **MM to update on progress at November Board meeting**
- 3 **Workforce plan to be updated.**

147/13	CUSTOMER SERVICE STRATEGY UPDATE
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Peter Wadum-Buhl updated the meeting with the progress on the development of the Customer Service Strategy. He advised that he and his team were working very closely with service users, staff and carers in refreshing the current strategy in relation to customer care.

At the invitation of Dr Patrick Geoghegan, Peter agreed to present the strategy at the next Board of Directors meeting in June. Patrick also recommended that Governors be invited to this presentation.

THE BOARD

- 1 **Noted the verbal update.**

ACTION

- 1 **Trust's Customer Service Strategy presentation to be arranged at the June Board of Directors meeting**
- 2 **LC to invite Council of Governors to the June Board meeting.**

14813	ANNUAL PLAN 2013/14
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Peter Wadum-Buhl reported that the Annual Plan for 2013/14 was at the final stages of approval and was on target to be submitted in line with the timeframe. He reminded the meeting that the Annual Plan had been through significant consultation: the Board and Executive Team have been engaged over the last six months in a comprehensive and robust planning process, and have received two drafts of the Annual Plan. In addition, Governors have been provided with opportunities to discuss the content of the Annual Plan and comments received have been incorporated as appropriate.

The Annual Plan was approved by Board members subject to any final changes.

Board members thanked staff for working so hard to produce an excellent report and commented positively on their readability and presentation.

THE BOARD

- 1 **Approved the Plan subject to any final changes.**

149/13	APPOINTMENT OF CONSULTANT PSYCHIATRISTS
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Alison Davis updated on the recent Appointments Advisory Panel's recommendation to appoint Dr Gayatri Burrah as a Consultant Psychiatrist for the Elderly (subject to relevant HR checks) for approval by the Board.

THE BOARD

- 1 **Approved the appointment of Dr Gayatri Burrah.**

Signed (in the chair for the meeting held 29 May 2013)

150/13	USE OF CORPORATE SEAL
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Dr Patrick Geoghegan confirmed the Corporate Seal has been used on the following occasions since the last Board of Directors meeting:

- Lease between SEPT and Bedfordshire PCT part of Leighton Buzzard Health Centre
- Lease between SEPT and Bedfordshire PCT part of Sandy Health Centre
- Lease between SEPT and Bedfordshire PCT part of London Road Health Centre
- Lease between SEPT and Bedfordshire PCT part of Flitwick Health Centre
- Lease between SEPT and Bedfordshire PCT part of Dunstable Health Centre
- Lease between SEPT and Bedfordshire PCT part of Ampthill Health Centre
- Lease between SEPT and Bedfordshire PCT part of Biggleswade Hospital
- Lease between SEPT and Bedfordshire PCT part of Shefford Health Centre
- Lease between SEPT and Bedfordshire PCT part of Health Centre, Saffron Road, Biggleswade
- National Deed of Variation – South East Essex Community Contract
- National Deed of Variation – West Essex Community Contract

THE BOARD

- 1 Received the report and noted the content.**

151/13	CORRESPONDENCE CIRCULATED TO BOARD MEMBERS SINCE THE LAST MEETING
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Lorraine Cabel reported that she had sent a letter and associated paperwork to all Board members regarding the Board of Directors Annual Self-Evaluation and Skills Audit on 2 May 2013. She advised that the completed returns are currently being analysed and would be discussed at a future Board Development Session.

152/13	NEW RISKS IDENTIFIED THAT REQUIRE ADDING TO THE TRUST RISK REGISTER OR REMOVED FROM THE REGISTER
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There were no new risks.

153/13	QUESTIONS FROM MEMBERS OF THE PUBLIC, STAFF AND GOVERNORS
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John Jones asked for an update on the development of Weller Wing. Dr Patrick Geoghegan advised that the delay was due to the outstanding contract extension negotiations with Luton CCG. He pointed out that Bedford CCG was, however, happy to continue with the Trust's contract.

Patrick assured those present that the Trust had progressed this project as far as possible, with planning and funding secured, and the construction company selected but was unable to commence the development until there was greater contractual certainty. He stressed the importance of ensuring the Trust does not act recklessly

Signed (in the chair for the meeting held 29 May 2013)

and had taken account of lessons learnt from Monitor and other FTs where major capital investment had commenced only later to be affected by the loss of contracts.

Patrick reminded members that the Bedford Health Village project was for the benefit of patients and the current service model and environment was outdated. He empathised with patients' and the public's frustration and agreed that Governors would be kept up to date.

Following a question by Joy Das regarding the A&E crisis, Patrick reassured the meeting that the Trust was trying to help people through the system as quickly as possible particularly if the issues were in relation to mental health.

Joy Das pointed out that findings from a recent Princess Alexandra Hospital survey had identified that there was different cultural approaches in the use of A&E, for example, the Polish community in particular would automatically visit A&E rather than visiting their GP in the first instance.

154/13	ANY OTHER BUSINESS
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There was no other business to discuss.

155/13	DATE AND TIME OF NEXT MEETING
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Lorraine Cabel advised the next meeting of the Board of Directors will take place on Wednesday 26 June 2013 at 1.30pm and pointed out that the venue had changed to **Wrest Park, Park Avenue, Silsoe, Luton MK45 4HR.**

Signed (in the chair for the meeting held 29 May 2013)