

SEPT
MINUTES OF PUBLIC BOARD OF DIRECTORS
PART 1
held on Wednesday 25 March 2015
The Learning Centre, Stockwood Discovery Centre, London Road,
Luton LU1 4LX

Members present:

Lorraine Cabel (Chair)	Chair (from 11:00)
Sally Morris (CEO)	Chief Executive
Andy Brogan (AB)	Executive Director Clinical Governance & Quality/Executive Nurse
Steve Cotter (SCt)	Non-Executive Director
Alison Davis (AD)	Non-Executive Director
Dr Milind Karale (MK)	Executive Medical Director
Malcolm McCann (MMc)	Executive Director Integrated Services (Essex & Suffolk)
Mark Madden (CFO)	Executive Chief Finance Director
Mary-Ann Munford (MAM)	Non-Executive Director
Richard Winter (RW)	Executive Director Integrated Services (Beds & Luton)
Janet Wood (JW)	Non-Executive Director (from 11:00)

In attendance:

Brian Arney (BA)	Brian Arney
David Bowater (DB)	Appointed Governor
Joy Das (JDa)	Appointed Governor (part)
Jo Debenham (JDe)	Employee Experience, SEPT (part)
Michael Dolling (MD)	Elected Governor
Max Forrest (MF)	Associate Director Communications, SEPT (part)
Paula Grayson (PG)	Public Governor
Chris Howlett (CH)	Director Capital Planning & Estates (standing in for Nigel Leonard, Executive Director Corporate Governance)
John Jones (JJ)	Public Governor
Cathy Lilley (CL)	Business Administration Manager (Minute Taker)
Dr Reg Race (RR)	Managing Director, Quality Health (part)
Jim Thakoordin (JT)	Public Governor
Tony Wright (TW)	Public Governor

AD opened the meeting by explaining that due to road congestion following an accident, the Chair and JW, Vice-Chair, were delayed and she would therefore chair the meeting until their arrival.

As Chair of the meeting, AD welcomed members of the public, staff and Governors to the meeting and in particular welcomed Chris Howlett, Director Capital Planning & Estates, who was standing in for Nigel Leonard, Executive Director Corporate Governance.

Members were reminded of the Trust's vision: 'providing services in tune with you.'

051/15	APOLOGIES FOR ABSENCE
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Randolph Charles (RC) Non-Executive Director

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Steve Currell (SCI)
Nigel Leonard (NL)

Non-Executive Director
Executive Director Corporate Governance

052/15 DECLARATIONS OF INTEREST

None.

053/15 MINUTES OF THE MEETING HELD ON 25 FEBRUARY 2015

The minutes were agreed to be a correct record.

054/15 ACTION LOG

The Board received the action log and noted progress including:

- 039/15 Legal & Policy Update – *Freedom to Speak*: The Board received a verbal update report from NL read out by the CEO. Guidance from Monitor was expected imminently and the Board noted that a task and finish group had been established to lead on this on a Trust-wide basis. An interim progress report would be presented at April Board meeting
- 035/16 Quality Report – Friends and Family Test: RC has been kept informed of the review of availability of demographic details. Action now closed
- 031/16 Clinical Audit: Liaising with SCt regarding continuous improvement evaluation. Action now closed
- 016/15 National Audit of Schizophrenia Audit: Board noted a Physical Health Steering Task & Finish Group has been established and is due to meet on 1 April. Action now closed.

Action:

- 1 **Update report to be provided on *Freedom to Speak* review at April Board meeting.**

055/15 FINANCE & PERFORMANCE COMMITTEE ASSURANCE REPORT

In JW's absence who chaired the meeting, the CEO provided assurance that a full and robust debate had taken place of all performance issues and that mitigating actions and monitoring processes had been requested where appropriate at the meeting held on 19 March 2015.

Performance

The CEO reported that two of the three actions due for completion in March 2015 were closed with one action – DNA Pilot in South Essex – remaining open. The Board were assured that the relevant actions were being taken to address the issue relating to IT systems

The CEO advised there were six hotspots:

- DNA rates for Trust-wide mental health first consultant appointments: there had been no significant improvements in performance and projects to address this had not been completed as planned. The Finance & Performance Committee

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agreed that a further three months would be allowed before this indicator is identified as a hotspot again

- Sickness absence was 5% compared to a target of 4.4%. The Board noted that this was, however, a slight improvement on the previous month's figure of 5.3%
- Clinical staff vacancy rate was 11.5% against a target of 10% which was based on NHS Employers benchmark data; support service vacancy rate was 15.9 % (compared with 13.9% in January)
- At the end of February 87% of the required mandatory training had been completed by staff compared to 90% in January, of which three directorates had compliance levels below 85%
- Staff supervision rate had increased from 88.3% in January to 89.5% compared to a local target of 95%. The rates for clinical staff is 90.8% and non-clinical staff 86.3%
- The Trust was still not achieving the stretch waiting times for treatment in West Essex. The Board were assured, however, that all patients were treated within the national target of 18 weeks.

The Board was assured that appropriate actions were in place to address the hotspots.

The CEO highlighted some emerging risks including Serious Incidents which were being reviewed regularly.

MAM asked if there was a general supply shortage of trained nurses coming through education centres and whether there was an opportunity for lobbying. AB advised that a major reason for a shortage in supply of nurses was the increased establishments by acute hospitals. An additional local challenge was the locality of the Trust to London health systems who were able to pay additional premiums. He confirmed that the Trust worked closely with Health Education England and that the Trust had developed a recruitment campaign which included recruitment fayres and a review of incentives.

With regards to the deterioration in satisfaction with food provided following the *How Did We Do Surveys*, the CEO explained that the initial investigation into the low scores identified that there were only three surveys (out of the 37 completed) that related to inpatient care, of which one had not received any food. A further review was being undertaken to understand the distortion of the figures.

Finance

The CFO presented the Trust's financial position at month 11, February 2015 which showed a surplus of £4.5m which was above the Monitor plan by £0.1m. The year-end forecast remained at £1.2 million surplus which was consistent with the original Monitor plan and was reliant on the key assumptions happening by the end of 2014/15 financial year, mainly the expected expenditure within non-delegated budgets and the Bedfordshire and Luton disaggregation.

Working capital and cash balances remained strong and the Trust's continuity of service risk rating was 4 which indicated the strong financial health of the Trust.

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The CIP position was a year to date deficit of £1.7m with a forecast year end deficit of £2.2m. The recurrent deficit position remained at £2.9m which assumes that £.25m of schemes remain robust and deliverable.

The Board noted the performance report and confirmed acceptance of assurance provided.

056/15 PRESENTATION: STAFF SURVEY RESULTS

The Chair of the Trust and JW joined the meeting.

The Board received the presentation from Dr Reg Race, Managing Director of Quality Health, on the Trust's staff survey results and discussed and noted the content.

The Board was pleased to note the positive results with a very high proportion of the Trust's scores in the top performing 20% of the country and that the engagement score was also in the top 20% of mental health trusts which was consistent with the Trust's 2013 results. The Board was particularly cognisant of the Trust's engagement scores which remained higher than the national picture across the sector particularly taking account of the unsettled and challenging year at the Trust in relation to the disaggregation of services in Bedfordshire and Luton, and also the fall in engagement scores across the country.

On behalf of the Board, the Chair thanked Dr Race for his informative presentation.

057/15 QUALITY REPORT

AB presented the Quality Report which focused on three key categories: safety, experience and improvement, and highlighted that 98.5% of patients did not experience any of the four harms covering pressure ulcers, falls, blood clots and urine infections for those patients who have a urinary catheter in place; this was against a national target of 95%.

AB confirmed that the restrictive practices work stream continued, focusing on benchmarking, auditing, and identifying learning and best practice. He advised that following the publication of national data, a benchmarking exercise was being undertaken and a report on the findings would be presented at the April Board meeting.

The CEO pointed out that Board members had received an informative demonstration on the use of restraint techniques used by the Trust. JW also highlighted how the demonstration provided the Board with assurance of the appropriate use of restraints with a strong focus on patient safety.

SCt highlighted that the Friends and Family Test report continued to include graphics which did not reflect the findings, and suggested that the colours are removed. AB agreed to take this forward.

The Board noted and discussed the report and confirmed acceptance of assurance provided.

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Action:

- 1 Benchmarking analysis report to be presented at April Board meeting (AB)**
- 2 Review of graphics in Friends and Family Test report (AB)**

058/15 SAFER STAFFING REPORT

AB presented the Safer Staffing report for nursing, midwifery and care staff that contained details and a summary of planned and actual staffing on a shift-by-shift basis as part of the *Hard Truths* commitment.

AB pointed out that the report had taken account of discussions at the Board Development Session in March and now detailed each ward with the planned and actual staffing as reported via Unify as well as the agreed quality metrics.

Although there continued to be a number of hotspots still mainly in South Essex where there was a lower than expected fill rate, significant improvements had been made with a number of new staff having started or due to start, and wards continued to actively recruit to cover vacant posts. The Board were assured that there are no significant or major safety concerns on these wards, and on monitoring incidents, there has not been any areas that would cause concern.

SCt asked if it was possible to be able to identify the location of the wards listed in the dashboard. AB agreed to review this.

The Board approved the report.

Action:

- 1 AB to review inclusion of location in either the monthly shift by shift dashboard or as a narrative in the report.**

059/15 BOARD ASSURANCE FRAMEWORK

The CEO presented the Board Assurance (BAF) report which was last reviewed by ET on 17 March 2015. She reminded the Board that the BAF was a living document which was subject to changes, which provided a comprehensive method for the effective management of the potential risks that may prevent achievement of the key aims agreed by the Board.

The Board noted that a risk assessment of the technical illegal detention of patients was currently being undertaken and would therefore not be escalated to the BAF at this stage.

The Board also noted that meetings would be held with lead Directors to fully assess potential high risks and the outcomes would form the basis of the BAF and Corporate Risk Register (CRR) for 2015/16. The 2015/16 BAF would be presented at the April Board meeting for review and approval.

The Board reviewed the BAF ratings and:

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- 1 Agreed the risk scoring as detailed in the BAF together with the risks to be carried forward to the 2015/16 BAF
- 2 Noted the new risks for escalation to the CRR
- 3 Agreed there were no new potential risks for escalation to the BAF.

Action:

- 1 2015/16 BAF to be presented at April Board meeting (SM)

060/15	SUB-COMMITTEES
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(i) Quality Committee

As Chair of the Quality Committee meeting on 12 March 2015, JW presented the assurance report of this meeting. She highlighted that discussions included a review of the Quality Strategy which was approved by the Board in 2014 as well as identifying the priorities for 2015/16. The Committee agreed that the implementation should focus on encouraging innovation as well as gaining feedback from staff and acting upon this.

The Board noted that there were no significant risks requiring escalation to the Board.

The Board noted the report.**(ii) Investment Committee**

As Chair of the Investment Committee meeting on 26 February 2015, JW presented the report of the Committee's discussions held at this meeting and assured the Board that the Committee was confident its duties were being appropriately complied with.

The Board noted that there were no new risks to be included on the Board Assurance Framework.

The CEO pointed out that there continued to be a delay in signing the Business Transfer Agreement for the transfer of mental health services to East London NHS FT and reminded the Board of the importance of this agreement to safeguard staff's future and the quality of care to the patient, as well as protecting the Trust. The Board were assured that the appropriate legal advice was being provided and as the completion of the BTA was expected imminently, the Board unanimously agreed to delegate authority for signing the BTA to the CEO and ECFO for the onward transfer of these services.

The Board:

- 1 Noted the report from the Investment Committee
- 2 Agreed to delegate authority for the signing of the BTA for the transfer of mental health services to ELFT to the CEO and ECFO.

061/15	TRUST SECRETARY: LEGAL & POLICY UPDATES REPORT
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CH introduced the report and pointed out that there continued to be a high level of activity relating to regulatory and legislative guidance and advice.

Signed

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The CEO pointed out that the first 29 'Vanguards' have been chosen who will take the national lead on new care models which would transform care for patients locally. In total there were more than 260 individual organisations and health and social care partnerships; however, the four submissions from Essex-based groups were not successful. The Board noted that of the Vanguards chosen, the majority had a strong primary care focus and lead.

The Board noted that a process had been established to ensure Board Directors were following the Fit & Proper Persons requirements and that an annual report would be presented to the Board together with Directors' declarations of interest.

AB advised that together with NL, a watching brief was in place following the decision by the Supreme Court following the judicial review of the criteria that the Legal Aid Agency applies to determine whether legal aid and representation at inquests should be granted to families of deceased psychiatric patients. It was possible there would be an increase in the number of inquests and therefore additional demands on Trust representation.

AD asked if the Trust was providing feedback on the DH's consultation on whether the NHSLA should be able to recover part of a Trust's indemnity cover for claims where the statutory duty of candour about patient safety had been breached. She expressed concern that this would put additional cost pressures on the system. The CEO confirmed that the Trust was monitoring the situation and acknowledged that there was a strong possibility of an increase in the NHSLA fees.

AD queried if the Trust would be addressing the Equality & Human Rights Commission's findings following the inquiry into how human rights of detainees with mental health conditions are protected across the health, prison and police settings. AB confirmed that this would be taken forward by the cross-team sub-group which was being established to review national reports as reported in the Quality Committee Assurance Report.

The Board discussed and noted the report.

062/15	CONSTITUENCY REVIEW
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CH presented the report on the proposed changes to the Trust's constituencies and to the Council of Governors composition. The proposals took account of the expected changes to the Trust's service provision in Bedfordshire and Luton with the transfer of mental health services to East London NHS FT, as well Monitor's *Code of Governance* provision to ensure that *'the Council should not be so large as to be unwieldy ... and be of sufficient size for the requirement of its duties'*.

The Chair advised that Bedford Borough Council, Central Bedfordshire Council and Luton Borough Council were being consulted on the proposed changes to the Local Authority Appointed Governors.

The Board:

- 1 Approved the proposed changes to the Trust's constituencies effective from 1 October 2015**

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- 2 Approved the proposed changes to the composition of the Council of Governors effective from 1 October 2015**
- 3 Noted that feedback from the local authorities would be reported at the April Board meeting**
- 4 Agreed that the Executive Director Corporate Governance and Associate Director Legal Services & Trust Secretary would manage the implementation of the changes, including adjustments to the Trust's constitution to be effective from 1 October 2015.**

063/15 WEST ESSEX CCG COMMISSIONING INTENTIONS

MMc advised the Board that although not successful in its Vanguard bid, the West Essex CCG was continuing to develop plans for an integrated health and care system in West Essex, and confirmed that the Trust was fully engaged in the process.

The Board noted the verbal update.

064/15 BOARD GOVERNANCE UPDATE

CH presented a progress report on a number of Board governance issues:

- Electronic Board papers: the Board noted the success of the pilot period and subject to the provision of updated equipment would be rolled out to the Board in April 2015
- Board self-assessment: the Board noted the timetable for the annual self-assessment with the questionnaires being circulated in May, initial analysis to be discussed at Board Development Session in June, and the final report presented at the July Board meeting
- Review of Board committee structures: the Board noted the progress with the second stage of the implementation of the new committee structures
- Board cover sheet: the Board noted the proposed Board report cover sheet had been revised to provide greater clarity on content, recommendations and levels of assurance, and was expected to be implemented in May 2015.

The Board noted the report.

The Board:

- 1 New Board report cover sheet to be implemented in May 2015.**

065/15 CORPORATE AIMS (OBJECTIVES) 2015/16

CH presented the final draft corporate aims for the Trust for 2015/16 and highlighted that the vision, strategic priorities and corporate aims remain unchanged as the Board had previously agreed that these were still relevant; however, the feasibility of the innovation and transformational schemes had been reviewed and adjustments made.

The Board noted that the corporate aims together with directorate objectives would be monitored on quarterly basis and progress reported to the Board following review by the Finance & Performance Committee.

Signed

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The Board approved the corporate aims (objectives) for 2015/16 subject to a minor amendment relating to strategic priority 4, programme 3 which should re *Redesign Psychotherapy Review*.

066/15 USE OF CORPORATE SEAL

The CEO advised the Board that the seal had been used on one occasion since the last Board meeting:

- Underlease and Licence to Occupy – Railton Road, Bedford

067/15 CORRESPONDANCE TO THE BOARD SINCE THE LAST MEETING

None.

068/15 NEW RISKS IDENTIFIED THAT REQUIRE ADDING TO THE TRUST RISK REGISTER OR REMOVED FROM THE REGISTER

The Board noted there were no new risks identified.

069/15 BOARD OF DIRECTORS SCHEDULE OF BUSINESS 2015/16

CH presented the report on the annual schedule of business for Board meetings which detailed the essential business items to be considered and had taken into consideration governance and compliance requirements as well as local and national priorities.

The Board noted that in future the annual reports listed in the schedule would be received by the Board's standing committees. In addition, adjustments would be made to the timescales for some of the agenda items.

The Board approved the Board of Directors Schedule of Business for 2015/16 subject to the above amendments.

Action:

- 1 Executive Directors to advise any changes to the scheduling of business items**
- 2 Updated schedule to be circulated to the Board (CL)**

070/15 ANY OTHER BUSINESS

- (i) **Bedfordshire & Luton Mental Health Services:** The CEO provided a verbal update on progress with the disaggregation of these services to East London Foundation Trust (ELFT). She advised that, subject to the signing of the Business Transfer Agreement, the services would be transferred with effect from 1 April 2015.

Signed

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The Chair and CEO thanked the Executive Directors and the team involved in the disaggregation of services for their commitment in ensuring an effective and safe transfer. In addition, tribute was paid to the staff affected by the transfer for their professionalism in ensuring the Trust continued to provide 'business as usual' during the procurement and transfer processes. The Trust was proud of its legacy and wished staff, service users and carers good wishes for the future.

071/15 STAFF RECOGNITION SCHEME

The Chair and CEO were delighted to present certificates to:

(i) Individual 'In Tune' Awards

- Corinne Cunningham – Senior HR Advisor, Bedford and Luton
- Joseph Duncan – HR Assistant
- Emma Harvey – Reception, Leighton Buzzard Health Centre
- Michelle Hammett – Heart Failure Nurse, Leighton Buzzard Health Clinic
- Hilary Swantson – Administrator, Tissue Viability, Bedford

(ii) Team 'In Tune' Award

Patient Experience Team, Bedfordshire and Luton

- Kay Sookun
- William Fitzpatrick
- Karen Hicks
- Jo Hodge
- Deborah Witter

The Staff Recognition Awards are the official way for the Board, colleagues, patients and carers, to recognise those who demonstrate, above and beyond, their commitment to delivering excellent service. The Staff Recognition Scheme promotes the Trust's vision - 'Providing services that are in tune with you' and values - Positive, Welcoming, Respectful, Involving, Accountable, Kind.

072/15 MEMBERS OF THE PUBLIC/STAFF/GOVERNORS QUESTIONS

Questions from member of the Public, Staff and Governors are detailed in Appendix 1.

073/15 DATE AND TIME OF NEXT MEETING

The next meeting will take place on Wednesday 29 April 2015 in Training Room 1, The Lodge, Runwell Chase, Wickford SS11 7XX at 10:30.

074/15 RESOLUTION TO EXCLUDE MEMBERS OF THE PUBLIC & PRESS

In accordance with provision 14.20.2 of the Constitution and paragraph 18E of Schedule 7 of the NHS Act 2006, the Board of Directors resolves to exclude members of the public from Part 2 of this meeting having regard to commercial sensitivity and/or confidentiality and/or personal information and/or legal professional privilege in relation to the business to be discussed.

Signed Date

The Board noted and agreed the resolution

The meeting closed at 12:55

Appendix 1**Governors/Public Query Tracker (Item 051/15)**

Governor /Member of Public	Query	Assurance provided by the Trust	Actions
John Jones	Asked if Woodlea and Robin Pinto units would be included in the audit programme re early detection of deteriorating patient:	AB confirmed that this was an ongoing project which would be rolled out across Trust's units	
Jim Thakoordin	Asked if there were any long term issues particularly relating to stress in the work place which were contributing to the 5% sickness rate	SM provided assurance that the Trust has a significant support programme for staff to help minimise potential stress	
Jim Thakoordin	Asked for assurance that the Trust takes account of equality and diversity issues	RW advised that the Trust had a Equality & Diversity Group which met regularly and confirmed that he was leading a working group to review the implications of the Workforce Race Equality Standard which is coming into force on 1 April 2015 and an assurance report will be presented at April Board to confirm how the Trust is meeting these standards and where further actions are being taken	
Michael Dolling	Asked for confirmation of the start time of the next Board meeting	The Chair confirmed this would be 10:30	

Signed

Date