

DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

Held in the Boardroom, Trust Headquarters, Bramble House, Kingsway, Derby, DE22 3LZ

On Wednesday, 25th April 2012

MEETING HELD IN PUBLIC

Opened: 2.00 pm

Closed: 4.15 pm

PRESENT:

Alan Baines	Chairman
Kathryn Blackshaw	Acting Chief Executive
Graham Foster	Non-Executive Director
Paul Lumsdon	Executive Director of Nursing and Quality
Ifti Majid	Executive Director of Operations, Performance and IM&T
Mick Martin	Deputy Chairman/Senior Independent Director
Tony Smith	Non-Executive Director
John Sykes	Executive Medical Director
Maura Teager	Non-Executive Director
Lesley Thompson	Non-Executive Director
Tim Woods	Executive Director of Finance

IN ATTENDANCE

Alison Baker (minutes)	Personal Assistant to Chairman and Chief Executive/Office Manager
Sarah Carter	Assistant Director of Business Strategy (for Item 2012/42)
Graham Gillham	Director of Corporate and Legal Affairs
Helen Marks	Director of Workforce & Organisational Development

And one member of the public

APOLOGIES:

None

DHCFT 2012/35	<u>OPENING REMARKS</u> The Chairman welcomed those present to the meeting. There were no interests to be declared.
DHCFT 2012/36	<u>MINUTES OF THE MEETING OF DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST, HELD ON 28TH MARCH 2012</u> The minutes from the meeting of Derbyshire Healthcare NHS Foundation Trust, held on 28 th March 2012, were approved with one amendment: <u>DHCFT 2012/30 BUSINESS & COMMERCIAL DEVELOPMENT REPORT – KATHRYN BLACKSHAW/SARAH CARTER</u> Third paragraph to read “The Board considered the suggestion from several Non-Executive Directors that a step change was required on our Trust's approach to business development. The necessity of harnessing of commercial capability to develop a clear set of goals, strategies and plans based on the need to grow the income of our Trust was fully agreed. The Board of Directors directed that this will now be developed into a set of options and proposals that will be presented to the Board to enable clear decisions and outcomes to be determined for this area. It was accepted that this work will specifically include market analysis of core and non-core

	business opportunities, their quantification and options to consider to create capable resources in order to deliver them.”
DHCFT 2012/37	<p><u>MATTERS ARISING – ACTIONS MATRIX</u></p> <p><u>DHCFT 2012/22 Integrated Performance & Activity Summary</u> Kathryn Blackshaw and Ifti Majid confirmed that a press release about our Trust’s successful achievement against its regulatory key performance indicators would be released after the Board of Directors meeting.</p> <p><u>DHCFT 2012/30 Business & Commercial Development Report</u> A further update would be provided later in the meeting in relation to this action.</p> <p><u>DHCFT 2012/32 Integrated Performance & Activity Summary</u> Ifti Majid confirmed that a review of the targets and triggers for RAG (Red, Amber, Green) ratings would be conducted as part of the year-end review for 2011/12. Tim Woods assured Lesley Thompson that our Trust’s financial position and surplus would be communicated clearly to staff, service users/carers, and members to avoid misinterpretation.</p>
DHCFT 2012/38	<p><u>CHIEF EXECUTIVE’S OVERVIEW AND UPDATE – KATHRYN BLACKSHAW</u></p> <p>Kathryn Blackshaw provided an update to the Board of Directors regarding the following:</p> <ul style="list-style-type: none"> ➤ The first CEO’s “open door” session had been held at the Radbourne Unit, feedback from which was positive. Further sessions were being scheduled around other Trust sites. Helen Marks confirmed that she had now arranged Listening Events for staff as part of the consultation process with regard to the proposed changes to staff terms and conditions. Anonymised feedback was requested by members of the Board of Directors. Kathryn Blackshaw advised that the May Board Development Session would now be held at Midway Day Hospital, Ilkeston, to enable staff to attend drop-in slots and meet the Board. Further sessions of this type would be scheduled on a bi-monthly basis around Trust premises. ➤ The high level of engagement received from doctors and clinicians in relation to the review of the current medical management structure and its alignment to the strategic agenda was highlighted. Kathryn Blackshaw expressed her thanks to those who had taken part and pledged their support. ➤ The Executive Directors ‘Time Out’ session, held on 23rd April, explored the business and organisational challenges for 2012/13, 2013/14, and 2014/15. A further discussion with the full Board of Directors was requested to take this forward. ➤ Southern Derbyshire Clinical Commissioning Group Stakeholder Event, an update on which was provided by Ifti Majid: this launch event was attended by a broad spectrum of agencies, including local authorities and patient and carer groups. ➤ Following an earlier discussion regarding the increase in population of Eastern European civilians, it was agreed that the agencies within the health community needed to work together to better meet the health service needs of this section of the population. The Chairman added that meetings were due to take place shortly with the Bosnian and Romanian community leaders.
DHCFT 2012/39	<p><u>QUALITY OVERVIEW AND UPDATE – MAURA TEAGER</u></p> <p>Maura Teager related a powerful presentation, given by a service user of our Trust. Permission had been sought from the service user concerned and the anonymised patient story of engagement was presented to the Board of Directors, highlighting</p>

	<p>the personal experiences of the individual concerned and the positive outcome ultimately achieved. The key message and challenge for the Board of Directors was to consider ways to improve further and build on the feedback received. The presentation highlighted the importance of staff behaviour and attitudes. Paul Lumsdon referred to the patient experience section of the Integrated Quality Governance report, which continued to grow and develop. The Chairman emphasized the need for all staff to be aware of the services delivered in our organisation, including those office based teams (e.g. Finance and Administration staff) to develop empathy and broaden the knowledge of staff.</p> <p>Turning to the national alert regarding night time discharges, Maura Teager was pleased to assure the Board of Directors that no such instances had been discovered in our Trust. Similarly, five years on from the Learning Disabilities Mencap Report “Death by Indifference”, work continued by Paul Lumsdon and his team to look at assurance and compliance with the findings of the report.</p>
<p>DHCFT 2012/40</p>	<p><u>INTEGRATED QUALITY GOVERNANCE REPORT – PAUL LUMSDON</u></p> <p>Paul Lumsdon presented an update on progress during quarter four and the overall themes and trends throughout the 2011/12 financial year across all three strands of Quality. Performance had again been solid throughout the year with high standards maintained for infection prevention; on-going compliance with the requirements of our registration with the Care Quality Commission, without any conditions; full compliance with the Department of Health requirements to eliminate same sex accommodation; no breaches of any of the “never events” set out by the Department of Health; and continued success in the ‘real-time’ collection of patients’ views and on-going learning from complaints, compliments, and serious untoward incidents.</p> <p>In terms of current risks, a risk analysis had been conducted in relation to the potential fuel shortages and all priority patients had been identified in the event that fuel shortages became a reality. The Board Assurance Framework would be presented to the Audit Committee in July.</p> <p>Tony Smith welcomed the increase in patient experience data and praised the work that had been carried out as a result of the ‘real time’ surveys. Mick Martin suggested it would be helpful for future reports to include the meaning of the data presented, i.e. whether the level of reported complaints was in line with previous years. A lengthy discussion took place in relation to the feasibility of setting targets and explanatory material – the “so what” of the information presented. Tony Smith advised that he had also requested additional information in relation to the increase in complaints in one area during the last quarter. Paul Lumsdon agreed to give further consideration to the points raised.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the declaration and compliance with the requirements to eliminate Mixed-Sex Accommodation. ➤ To note the executive summary.
<p>DHCFT 2012/41</p>	<p><u>REVALIDATION FOR MEDICAL PRACTITIONERS – JOHN SYKES</u></p> <p>An update on our Trust’s position with Revalidation for Medical Practitioners was provided by John Sykes. Our Trust was in a good position, having been part of the pilot project and, as a result, had fully trained appraisers in place and 98% medical practitioners up to date. An action plan had been included in the report and updates were provided with regard to the four “amber” actions. In response to Lesley Thompson, Helen Marks clarified the two systems for appraisal that were in place for medical practitioners: the management appraisal process and the clinical appraisal process.</p>

	<p>The Board of Directors were pleased with the progress made and the action plan in place.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the contents of the report and the assurance the new system will give the Trust regarding fitness to practise of medical staff.
<p>DHCFT 2012/42</p>	<p><u>BUSINESS & COMMERCIAL DEVELOPMENT REPORT – SARAH CARTER</u></p> <p>Sarah Carter, Assistant Director of Business Strategy, presented the monthly Business and Commercial Development report to the Board of Directors. The report highlighted the commercial and business development activities that were taking place across the Trust.</p> <p>The newly commissioned substance misuse contracts for Derbyshire County and Derby City Drug Treatment services had “gone live”. The principal commissioning contract with the PCT Cluster had been executive under the Board Seal, and sub-contracts with our sub-contractual partners had also been signed.</p> <p>Turning to the market scan, the AQP (Any Qualified Provider) deadline had been deferred to 25th May 2012. Our Trust had developed the model in readiness for the deadline and capacity had been developed to ensure dedicated project management support was in place for the delivery of the IAPT (Improving Access to Psychological Therapies) AQP.</p> <p>One of the leading emerging significant trends in commissioning approaches to new opportunities and business was SROI (Social Return On Investment). As a result of this, our Trust was reviewing potential SROI partners and this subject would be discussed in detail at the Business Development Group, along with competitor analysis.</p> <p>Looking at capacity in the team, Sarah Carter was pleased to report that an interim Business Development Manager had been appointed to lead on the AQP IAPT programme. Funding had also been secured for two Business Development Managers to work as part of the senior management team, based in the two Divisions.</p> <p>Negotiations were on-going regarding the provision of a clinical support package to the Mastin Moor development, with the potential for an exciting opportunity to progress a partnership working approach with the University of Sheffield.</p> <p>The Health & Wellbeing Board in Derby City was undertaking an analysis of mental health priorities. Our Trust, represented by Kathryn Blackshaw, had input into this Board. A series of ‘21st Century - Future of Health and Social Care’ events had been scheduled for public consultation. The attendance of Non-Executive Directors was requested and Sarah Carter agreed to circulate the dates.</p> <p>Referring to the discussion about the patient story earlier in the meeting, Maura Teager suggested, in addition to the monthly article in Stay Connected, that “a day in the life of” could be included from a patient’s perspective.</p> <p>Lastly, in response to Mick Martin, Kathryn Blackshaw gave assurance that there were areas of work that needed to be progressed in the short-term, but these would not detract from the strategic direction Board level discussions that would be taking place.</p>

	<p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the contents of the report. ➤ To formally note the execution under Seal of the principal contract with Derbyshire County Primary Care Trust (coordinating commissioner).
<p>DHCFT 2012/43</p>	<p><u>PEOPLE STRATEGY UPDATE – HELEN MARKS</u></p> <p>Helen Marks provided an update to the Board of Directors on the People Strategy, Board approval for which had been received in April 2011. Included in the report were the key findings from the National Staff Survey Results for 2011, which had received a response rate of 53%. Particularly pleasing was the response rate from staff reporting good communication between staff and senior managers. Further work was required for continuous improvement and a particular focus for 2012/13 was the roles and responsibilities of staff, together with training.</p> <p>A new consultant and leadership programme had been developed with the support of one of the Clinical Directors and consultants. This input had helped shape a newly appointed leadership programme for those consultants appointed within the past three years.</p> <p>A flyer for the ‘Values – Focussed on You’ launch event on 22nd May 2012 was presented. The event would see presentations from service users and our workforce and sessions on core care standards; value based assessment centre and leadership; and equality and diversity.</p> <p>Turning to the staff support framework, Helen Marks advised that proposals had been put in place to harness the talent in the organisation to assist with the agenda of health and wellbeing. These included developing incident support; building resilience to help manage stress and cope with change; increasing the counselling services; and securing places at a mindfulness retreat.</p> <p>Tony Smith welcomed the positive response to the staff engagement and communications section of the staff survey and asked how our Trust compared with the “best performing” Trusts, together with an update on next steps. Helen Marks replied that our Trust was average at the moment but that improvements had been noted, which was a positive step to be built on. Feedback was being collated and would be cascaded out to staff through the “Stay Connected” staff magazine.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the contents of the paper. ➤ To receive updates on progress, as required.
<p>DHCFT 2012/44</p>	<p><u>INTEGRATED PERFORMANCE & ACTIVITY REPORT – APRIL 2012 – IFTI MAJID/TIM WOODS</u></p> <p>Ifti Majid presented another month of solid performance against all Monitor and CQUIN targets, which were reported as “green”. The Board of Directors agreed the past twelve months had been strong for our first year as a Foundation Trust. The new compliance framework had been published by Monitor and the indicators for 2012/13 would be reviewed against this new guidance.</p> <p>In response to Mick Martin’s question about progress towards DNA (Did Not Attend) levels, Ifti Majid advised that some positive progress had been made and there was now a better understanding on how outpatient appointments were viewed. The triggers and targets for reporting would be reviewed in readiness for the next year’s reporting.</p>

	<p>Turning to Financial performance, Tim Woods confirmed the draft accounts had been presented the previous day to the Audit Committee. A formal report from our auditors would be presented at the Board of Directors meeting on 28th May 2012. At the end of our first year as a Foundation Trust, our Trust had achieved a surplus of just under £1.2m, which was a tremendous achievement, contributing to a financial risk rating of '4'. The cash position had also been higher than planned, due to a surge of PCT invoices being paid.</p> <p>The Board of Directors were delighted with the performance throughout the year and congratulated the finance and performance teams on their achievements. The Monitor declarations, included in the confidential papers, were approved, and would be discussed further in the confidential session.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the performance to date.
	<p><i>The Chairman requested, in accordance with the Trust's Standing Orders, that representatives of the press and members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, the publicity on which would be prejudicial to the public interest. A five minute adjournment was therefore called.</i></p>

Date and time of next meeting

Date of next scheduled meeting

Monday, 28th May 2012 at 2.00 pm

Boardroom, Trust Headquarters, Bramble House, Kingsway Site, Kingsway, Derby, DE22 3LZ