

DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

**Held in Conference Rooms A&B
Research & Development Centre, Kingsway, Derby DE22 3LZ**

Wednesday 30 March 2016

MEETING HELD IN PUBLIC	
Commenced: 1pm	Closed: 4.20pm

PRESENT:	Richard Gregory Jim Dixon Caroline Maley Maura Teager Ifti Majid Claire Wright Carolyn Green Dr John Sykes Carolyn Gilby Jayne Storey Jenna Davies	Interim Chairman Deputy Chair and Non-Executive Director Senior Independent Director Non-Executive Director Acting Chief Executive Executive Director of Finance Director of Nursing and Patient Experience Executive Medical Director Acting Director of Operations Director of Workforce OD & Culture Interim Director of Corporate & Legal Affairs
IN ATTENDANCE:	Richard Eaton Sue Turner	Communications Manager Board Secretary and Minute Taker
APOLOGIES:	Phil Harris Tony Smith Mark Powell	Non-Executive Director Non-Executive Director Director of Business Development & Marketing
VISITORS:	John Morrissey Carole Riley Winston Samuels	Lead Governor Member of the Public Member of the Public

DHCFT 2016/034	<u>INTERIM CHAIRMAN'S WELCOME, OPENING REMARKS AND APOLOGIES</u> The Interim Chairman, Richard Gregory, opened the meeting by welcoming all present. Declarations of interest were declared by Maura Teager and Ifti Majid in respect of the Yates report provided in the agenda pack for information.
DHCFT 2016/035	<u>SERVICE RECEIVER STORY – EARLY INTERVENTION AND THE INTERNSHIP PROGRAMME</u> Richard Gregory and the Board welcomed service receiver Michael who was accompanied by Joanne Downing, Volunteer Manager Occupational Therapist and introduced by Bev Green, Release and Time to Care Lead and Divisional Nurse for the North Campus. Michael explained that he had been suffering from anxiety and depression and was referred by his GP to the Early Intervention Team. He is well now and has been involved in the Trust's internship scheme since October. Michael is particularly interested in IT and has worked well with the IT team. He has also worked as an administrator for ward

	<p>managers recording training and qualifications and has carried out other administrative work. Michael described the support and guidance he has received from the internship team as very reassuring. Everyone he has worked with has been very welcoming and helpful. He was particularly impressed with the encouragement he received while working with Peter Charlton and the IT team and he found it extremely rewarding knowing the support he offered benefitted the IT team and other areas within the Trust. Michael also felt working within the internship programme gave him the confidence to learn to drive which has been very beneficial with his daily commute from Chesterfield.</p> <p>The internship scheme supports people and helps them get back into work. This is a new programme for the Trust and Joanne Downing is supporting Michael through his internship and looking at sourcing external areas for him to move into. She has also helped Michael with ideas for the future and he is hoping to progress to another placement in a technical role and is looking forward to getting back into full time work.</p> <p>Joanne Downing explained that the internship scheme works alongside the early intervention team and she would like to see the programme expanded as more work needs to be done in house to help and support other service receivers. She would also like to involve other organisations and businesses to help with this initiative. Richard Gregory agreed the internship programme could have more potential and suggested that organisations such as the Princes' Trust and Business in the Community could be approached for support.</p> <p>Occupational therapy intervention supports Michael and organises his work-based placements and provides him with contacts externally and internally. Each individual coming through the internship scheme has their skills mapped and these are matched with different functions. Michael has been impressed with the structure of the programme which has given him the opportunity to acquire new skills. The programme has also helped him integrate back into society and has given him the opportunity to enjoy mixing with people again and has given him a purpose in life. Essentially the most important thing about the internship scheme has been the people he has worked with who have helped him and made him feel confident to get back into work and he would now like to move onto something more challenging. Richard Gregory recommended to Michael that he should update his CV to mention that he presented his story very articulately and eloquently he would be happy to offer him further support and encouragement.</p> <p>The Board gave thanks to Michael for agreeing to tell his story and commended the way he presented his experience of the internship programme so articulately which allowed the Board to hear at first hand the service this new initiative provides.</p> <p>RESOLVED: The Board of Directors expressed thanks to Michael for sharing his inspiring story and appreciated the opportunity to hear at first hand the services the Trust has to offer.</p>
<p>DHCFT 2016/036</p>	<p><u>MINUTES OF THE MEETING DATED 24 FEBRUARY 2016</u></p> <p>The minutes of the meeting, dated 24 February were accepted and agreed.</p>
<p>DHCFT 2016/037</p>	<p><u>MATTERS ARISING AND ACTIONS MATRIX</u></p> <p>The Board agreed to close all completed actions. Updates were provided by members of the Board and were noted directly on the actions matrix.</p> <p>DCHFT 2016/005 Industrial Action: John Sykes, Medical Director, informed the Board of plans to provide bank holiday emergency cover for industrial action due to take place in early April. This cover had worked well on the previous occasions of industrial action and he was pleased to report that waiting times have been holding up well. A total walk out planned for the end of April is unprecedented and contingency plans will be discussed at the Executive Leadership Team as to how the Trust would continue to</p>

	support junior doctors and improve the balance between staff morale/satisfaction and patient care.
DHCFT 2016/038	<p><u>CHAIRMAN'S VERBAL REPORT</u></p> <p>Richard Gregory updated the Board on developments made in the last month.</p> <ol style="list-style-type: none"> I. The Trust is looking to immediately recruit two Non-Executive Directors (NEDs) to replace Tony Smith and Phil Harris who has recently tendered his resignation and another to undertake a six month handover with Maura Teager before she retires in March 2017. A paper will be submitted to the Council of Governors Nominations Committee seeking their approval to appoint an agency to search for three high performing NEDs. The Nominations Committee would also receive details of the NEDs' new appraisal process and governors would be invited to forward comments into their forthcoming appraisals. II. Richard Gregory had recently met with Steve Lloyd of the Hardwick Clinical Commissioning Group and discussed holding a "Board to Board" meeting. This was seen as a positive intervention and Ifti Majid will work with Andy Gregory Chief Officer, Hardwick Clinical Commissioning Group, to take this initiative forward. III. Richard Gregory, Ifti Majid and Lead Governor, John Morrissey met local MP Pauline Latham to discuss her concerns regarding the ET and the improvement actions the Trust is undertaking. A programme of further meetings with MPs is being developed which the Lead Governor would be included in. IV. A regular programme of meetings has been scheduled between the Lead Governor and Richard Gregory to discuss subjects to be presented at Council of Governor meetings. Agenda items for these meetings would also be designed to enable governors to provide feedback on the Trust's services. V. Chief Constable of Derbyshire Police had written to Richard Gregory declining the invitation to be represented on the Council of Governors as they considered this would be a conflict of interest but stressed they wanted to work in partnership. <p>RESOLVED: The Board of Directors noted the Interim Chairman's verbal update.</p>
DHCFT 2016/039	<p><u>ACTING CHIEF EXECUTIVE'S REPORT</u></p> <p>Ifti Majid's report provided the Board of Directors with feedback on changes within the national health and social care sector as well as providing an update on developments occurring within our local Derbyshire health and social care community. The report also updated the Board on feedback from external stakeholders such as our commissioners and Trust staff.</p> <p>Ifti Majid drew attention to the Quarter 3 performance figures released by Monitor for the NHS which gave a perspective of the pressure the Trust was under to maintain its service levels.</p> <p>Ifti Majid explained that he had included a narrative of the visits made to service centres by Executive Directors is now a regular feature of Ifti Majid's report and provides visibility of themes emerging and resulting actions. These visits also provide staff with the opportunity to raise any concerns and are seen as a positive move forward.</p> <p>Slides setting out the draft governance arrangements for developing the Derbyshire Sustainability and Transformation Plan (STP) were contained in Ifti Majid's report and clearly showed the principles of the plan. He hoped that the Board was comfortable with</p>

	<p>the outline of the governance structure of this comprehensive governance system. Richard Gregory emphasised the need for governance to be kept up to date and requested that these STP Plan be provided to the Lead Governor and be included as a standing item on the Council of Governors’ agenda. Ifti Majid to send this to John Morrissey so he can answer any questions he might have.</p> <p>Ifti Majid asked Executive Directors to devise boundaries for the STP Plan within the governance framework and proposed this be progressed within the Executive Leadership Team meetings. He also asked Jenna Davies to devise a process for delegated authority.</p> <p>ACTION: Ifti Majid to forward the STP Plan to John Morrissey, Lead Governor.</p> <p>ACTION: Derbyshire Sustainability and Transformation Plan to be a standing item on the agenda for Council of Governor meetings.</p> <p>ACTION: Jenna Davies to devise a process for delegated authority with the governance framework for the STP plan.</p> <p>RESOLVED: The Board of Directors noted the contents of the Acting Chief Executive’s report</p>
<p>DHCFT 2016/040</p>	<p><u>POSITION STATEMENT ON QUALITY</u></p> <p>The Position Statement on Quality provided the Board with an update on the continuing work to improve the quality of services provided in line with the Trust’s Strategy, Quality Strategy and Framework and strategic objectives.</p> <p>This paper outlined the Trust’s position in terms of the quality of its service since the last Board meeting.</p> <p>Revised reporting of the risk register on the top 6 operational risks on the Trust wide risk register was discussed and it was agreed that these risks will be examined to ensure they are explicitly linked to the Board Assurance Framework.</p> <p>Attention was drawn to a letter the Trust had received from the police setting out the importance of the “National Initiative” of “Child Rescue Alerts” (CRA) and requested that Trust Boards agree to provide telephone numbers of the Trust’s publically owned mobile telephone numbers to the National Crime Agency (NCA). The Board considered the information governance guidance involved and agreed to support this important initiative and proposed that the pro-forma issued to staff when they take possession of a Trust mobile phone includes a narrative setting out this agreement with the NCA. A communication outlining the CRA system will also be issued to all staff.</p> <p>ACTION: Pro-forma issued to staff when they take possession of a Trust mobile phone will be adapted to include a narrative clearly setting out the agreement for National Crime Agency (NCA) to be provided with the mobile phone number for the purpose of child rescue alerts and a communication outlining this initiative will be issued to all staff.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Noted the Quality Position Statement Dashboard and trends. 2) Scrutinised the current position
<p>DHCFT 2016/041</p>	<p><u>INTEGRATED PERFORMANCE AND ACTIVITY REPORT</u></p> <p>This paper provided the Trust Board with an integrated overview of performance as at the end of February 2016 with regard to workforce, finance and operational delivery and will evolve to also include Quality performance indicators.</p>

	<p>Discussions centred around the Workforce Dashboard of the report, especially regarding staff vacancies that are difficult to fill. Completion of staff appraisals was shown as a challenge and this would be followed up through the People and Culture Committee. The Workforce Dashboard was seen as providing the type of data that will drive focus and activity. Jayne Storey pointed out that Grievances/dignity at work benchmarking will be looked at as part of the development of the People Strategy and will be the subject of a report that will be produced for the Board at a future date. The dashboard showed that compulsory training is improving and it was noted that compliance with ILS training has been given recent attention at the Quality Committee.</p> <p>The report's balance between narrative and graph was seen to work well and the level of detail was seen as a positive improvement by Non-Executive Directors. It was thought that an improvement could be made if there was a page of narrative triangulating the common themes cross referenced from each section of the report to show parallels. The Board noted that the Quality Account dashboard will be phased into the report from April. Phase one will be received at the April Board meeting and phase two in June.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Considered the content of the paper and was assured on the current performance across the areas presented. 2) Considered the format of the report and discussed minor changes for subsequent iterations.
<p>DHCFT 2016/042</p>	<p><u>MONITOR PLAN 2016/17</u></p> <p>This paper set out the Trusts Final Operational Plan for submission to Monitor on the 11 April 2016. The plan forms part of the Annual Planning Review (APR) process set out by Monitor and was an updated version from drafts seen at previous meetings and also contained the publishable version required as part of the submission. This plan had also been discussed at the meeting of the Council of Governors on 15 March.</p> <p>The Board was asked to select the statement to be applied as part of the self-certification process of the submission and confirmed continuity of services condition 7 - Availability of Resources 1a as the preferred statement <i>“After making enquiries the Directors of the Licensee have a reasonable expectation that the Licensee will have the Required Resources available to it after taking account distributions which might reasonably be expected to be declared or paid for the period of 12 months referred to in this certificate.”</i></p> <p>The Board discussed the Cost Improvement Programme (CIP) which is underpinned by a Quality Impact Assessment process and agreed the need for Chair's Action to sign off the final CIP plan. Richard Gregory confirmed that with the exception of CIP reporting, the Board was comfortable in approving the plan and agreed that Claire Wright would progress the Chair's Action for CIP and final sign off of the 2016/17 Operational Plan through the Executive Leadership Team.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1. Reviewed the key changes made to the 2016/17 Operational Plan 2. Sought assurance that the 2016/17 Operational Plan is aligned with the Trust's Strategy 3. Discussed and agreed the Board's response to the declarations for sustainability and resilience 4. Approved the content of the plan and delegated sign off of the final version of the plan to the Executive Leadership Team (ELT) Meeting in order to take into account feedback on the draft plan from Monitor sent in the letter dated 24 March and any last minute alterations before the submission deadline of 11 April.

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BOARD ASSURANCE FRAMEWORK UPDATE

The Board Assurance Framework (BAF) is a high level report which enables the Board of Directors to demonstrate how it has identified and met its assurance needs, focused on the delivery of its objectives, and subsequent principal risks. The BAF provides a central basis to support the Board's disclosure requirements with regard to the Annual Governance Statement (AGS), which the Chief Executive signs on behalf of the Board of Directors, as part of the statutory accounts and annual report.

This report included the first formal presentation of the Board Assurance Framework to the Board for 2016/17 and the final presentation of the Board Assurance Framework for 2015/16 and was duly approved.

During 2015/16 the BAF was presented and considered by the Audit Committee and Board three times during the year. For 2016/17 the Board agreed for the Audit Committee and Board to receive the BAF four times during the year, in line with Monitor's governance guidance.

The Board also agreed that for 2016/17 all high level risks contained within the BAF would be scrutinised in detail by the Audit Committee. This would ensure that the Audit Committee has complete oversight of the assurance of high level risks contained in the BAF. It was also agreed that the overall responsibility for the scrutiny of all risk systems, processes and procedures will be with the Audit Committee, which would be renamed Audit and Risk Committee and its terms of reference would be changed to reflect this revised responsibility.

It was noted that the Governance Improvement Action Plan will cover the scheme of delegation governing the risks associated with the Board's sub-committees and the forward plan for each committee will be adapted by the executive leads to accommodate any delegation of associated BAF risks.

ACTION: Scheme of delegation governing risks will be captured in the Board sub-committee forward plans by the executive lead for each committee.

ACTION: Board Forward Plan to reflect BAF updates received by the Board four times a year (March, July, October, January and March 2017).

RESOLVED: The Board of Directors:

- 1) Approved the first issue of the BAF for 2016/17 and the final issue of the BAF for 2015/16.**
- 2) Agreed for the Audit Committee and Board to receive updates on the 2016/17 BAF four times a year in March 2016, July 2016, October 2016, January 2017 and March 2017.**

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GOVERNANCE IMPROVEMENT ACTION PLAN AND DELIVERY FRAMEWORK

This paper set out the arrangements by which the Trust's Board will be assured that the Governance Improvement Action Plan (GIAP) is systematically implemented, delivering the agreed key outcomes so that it is able to demonstrate to all key stakeholders that the required governance improvements have been made. The paper also describes how the Governance and Delivery Framework will operate, identifying key roles and responsibilities and the requirement being placed on the governance structure that currently exists within the Trust.

The GIAP was submitted to Monitor on 17 March and the Board noted that no feedback had yet been received on its contents.

Assurance mechanisms have been put in place to ensure delivery of GIAP. In addition, a

	<p>full time Governance Improvement Programme Manager will be assigned to enable actions to be completed on time to the expected standard and will report to a responsible director who will work on behalf of the Board to provide oversight, leadership, transparency, reporting and programme delivery arrangements, as well as holding to account those who are required to deliver the key tasks set out within the GIAP.</p> <p>RESOLVED: The Board of Directors approved the Governance Improvement Action Plan.</p>
<p>DHCFT 2016/045</p>	<p><u>STRATEGY UPDATE</u></p> <p>The Board of Directors has committed to developing a new Trust Strategy. This report provided the Board of Directors with a brief update on progress to date, through the prioritise element of the Monitor toolkit. It also provided an update on stakeholder engagement and next steps. Board members were assured that the agreed timeline for strategy development continues to be met, although the timeframe for delivery remains challenging.</p> <p>It was noted that a composite draft strategy was shared with the Council of Governors on 15 March. The final strategy would be presented to the Council of Governors at their next meeting on 1 June and to the Board on 25 June for joint approval of the strategy.</p> <p>ACTION: Approval of the draft Trust Strategy to be an agenda item for the June Board meeting.</p> <p>RESOLVED: The Board of Directors noted the content of the Strategy Development Update.</p>
<p>DHCFT 2016/046</p>	<p><u>BOARD DEVELOPMENT PROGRAMME</u></p> <p>The Board Development Programme was tabled at the meeting which supported the recommendations contained in the Deloitte report and the Yates investigation report and has been discussed within the Executive Leadership Team. It was understood that as the year progresses the programme will be aligned with how the organisation is moving forward in the delivery of the Governance Improvement Action Plan (GIAP).</p> <p>The Board approved the first draft of the Board Development Programme and agreed that Non-Executive Director Chairs of the Board Committees and Board Members would forward any further comments or additions they wish to be made to Jenna Davies outside of the meeting.</p> <p>RESOLVED: The Board of Directors approved the first version of the Board Development Programme.</p>
<p>DHCFT 2016/047</p>	<p><u>BOARD COMMITTEE ESCALATIONS</u></p> <p>Committee chairs escalated to the Board matters of interest and note from recent meetings:</p> <ol style="list-style-type: none"> I. Quality Committee: The Chair of the Quality Committee, Maura Teager, escalated to the Board the effect of patients being admitted having taken NPS substances (legal highs) and the impact this was having on bed management, patient and staff safety. She also raised the matter that the JNCC (Joint Negotiating Consultative Committee) had been unable to agree changes to the Induction Policy and this issue had been escalated to the People and Culture Committee. In addition, Maura Teager commended the development of the Dementia Strategy and the services of the dementia team. <p>The high level of apologies received at the March meeting was a matter for</p>

concern, although the committee remained quorate. The impact of providing a high secure service for a patient and the effect this had on staff and the environment was discussed at the meeting and Maura Teager recommended that the Board extend their thanks to the front line team who cared for this patient under very exceptional circumstances. The complexity of using paper and electronic records in care planning was escalated to the Board as an area of concern as a shared understanding of this operational risk is required. Carolyn Gilby wished to assure Maura Teager that the EPR (Electronic Patient Record) Board were aware of this issue and processes were being worked through to improve the system. Information sharing by the police was raised with the Board as an issue as the police are reluctant to release forensic history of individuals being cared for by the Trust. It was agreed that John Sykes, Medical Director, will work with the Trust's Health and Safety Manager and draft a letter to the police in order to expose the problem and high level discussions would be held with the police in order to improve the sharing of information.

- II. **Audit Committee:** Caroline Maley, Chair of the Audit Committee reported that a very positive meeting of the committee was held on 16 March. The committee had its first sight of the draft annual report, draft annual governance statement and external audit plan and a long discussion took place around the external audit value for money report. Caroline Maley was pleased to inform the Board that the annual counter fraud report contained no issues to be concerned about and she commended the way the counter fraud organisation controls fraud. Clinical audit progress was seen as a concern by both the Audit Committee and Quality Committee and it was recommended that a deep dive on the capacity of the clinical audit team takes place at the Quality Committee.
- III. **People & Culture Committee:** The People & Culture Committee held its first meeting in February when the terms of reference and governance and people issues were addressed. The second meeting was held on 17 March and was chaired by Maura Teager in the absence of the Interim Chair, Richard Gregory when compliance with mandatory training was discussed. Sickness and absence levels were seen as exceptionally high as are the high level of staff vacancies and further high level scrutiny of both these matters will take place at the April meeting. The committee recognised that a number of actions in terms of culture and staff engagement and HR policies are contained in the GIAP which will be addressed at each meeting. The effects on staff who nursed a patient in high secure seclusion was also discussed at the meeting (this was also discussed at March meeting of the Quality Committee (see above)).
- IV. **Finance & Performance Committee:** Jim Dixon, Chair of the Finance & Performance Committee explained that this meeting had only taken place the day before and he highlighted key issues relating to the Trust's budget. He gave praise to all managers and staff for getting to the end of the financial year in such a positive position and he was assured the Trust would reach the end of the year extremely close to target. He was also confident there is a good financial plan in place for 2016/17 although he drew attention to the need to strengthen the content and planning of the Cost Improvement Programme which will have to be aligned with the quite stringent requirements Monitor have introduced for costs of agency staff and will be a challenge for the Trust to meet. It was noted that retrospective reporting of Monitor compliance will be required once the scheduling of Board meetings moves to the beginning of the month later in the year.
- V. **Mental Health Act Committee:** This committee had only met this morning and was chaired by Richard Gregory. Three policies were approved by the committee, the Consent to Treatment Policy, Section 17 Leave Policy and Procedure and the Mental Health Act 1983 Procedure for Managers Hearings Policy and Procedures. A further meeting of the committee will take place towards the end of April to ensure further policy profiles are up to date

	<p>Richard Gregory gave thanks to Non-Executive Director, Tony Smith, for his significant contribution to the Trust and for his service as Chair of the Mental Health Act Committee. The Board wished him and his family well as Tony Smith has resigned from the Trust in order to spend more time with his family.</p> <p>RESOLVED: The Board of Directors noted the contents of the ratified minutes of the Quality Committee and People and Culture Committee and the verbal updates on escalations from the Finance & Performance Committee and Mental Health Act Committee.</p>
<p>DHCFT 2016/048</p>	<p><u>BOARD FORWARD PLAN</u></p> <p>The forward plan provided the Board with assurance that the regulatory and legislative business has been considered by Board at the appropriate time. The 2016/17 forward plan has been reviewed to ensure that any business coming forward to the Board is in line with the scheme of delegation and also considers regulatory and legislative items. The 2016/17 forward plan has also been developed in consultation with the Executive Leadership Team (ELT) who have identified business which requires Board consideration.</p> <p>The Board forward plan does not preclude the Board from considering any other strategic issues it wishes or to vary the forward plan to fulfil its functions and maintain a focus on strategy, Performance and Culture.</p> <p>RESOLVED: The Board of Directors approved the forward plan for 2016/17</p>
<p>DHCFT 2016/049</p>	<p><u>BOARD PERFORMANCE AND CONTENT OF MEETING</u></p> <p>The Board considered good engagement with processes was undertaken at today's meeting. At the last meeting it was agreed that questions from the public applicable to the agenda and at the Interim Chairman's discretion could be received up to 48 hours in advance of each meeting in order to receive a response from the Board.</p> <p>ACTION: Director of Corporate and Affairs and Trust Secretary will ensure that the notification of all Board Meetings will carry an instruction that questions applicable to agenda and at the Interim Chairman's discretion can be received by the public 48 hours prior to the meeting for a response from the Board.</p>
<p>The next meeting of the Board held in Public Session will take place at 1pm on Wednesday, 27 April 2016.</p> <p style="text-align: center;">The location is Conference Rooms A&B Research & Development Centre, Kingsway, Derby DE22 3LZ</p>	