

**Ratified Minutes**  
**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**

**On Wednesday, 29 January 2014**

**MEETING HELD IN PUBLIC**

Opened: 1.00 pm

Adjourned: 4.30 pm

**PRESENT:**

Mark Todd	Chairman
Carolyn Gilby	Interim Director of Nursing and Patient Experience
Steve Trenchard	Chief Executive
Ifti Majid	Chief Operating Officer/Deputy Chief Executive
Caroline Maley	Non-Executive Director
Tony Smith	Non-Executive Director
John Sykes	Executive Medical Director
Maura Teager	Non-Executive Director
Lesley Thompson	Non-Executive Director
Claire Wright	Executive Director of Finance
Graham Gillham	Director of Corporate and Legal Affairs

**IN ATTENDANCE**

Leida Roome	Board Secretariat (minutes)
Anna Shaw	Deputy Director of Communications
Mr and Mrs E W Gary Stokes	Service User ( <i>item 2014/002</i> ) Head of Patient Experience ( <i>item 2014/002</i> )
Robin Ash	Empowerment and Campaigns Officer British Deaf Association ( <i>item 2014/006</i> )
Lisa Brailsford	NRCDP registered BSL interpreter ( <i>item 2014/006</i> )
Harinder Dhaliwal	Assistant Director of Engagement ( <i>item 2014/006</i> )
Dr Laurence Baldwin	Consultant Nurse (CAMHS) ( <i>item 2014/012</i> )
Michelle Hague	Service Line Manager ( <i>item 2014/012</i> )
Helen MacMahon	Service Line Manager ( <i>item 2014/012</i> )
Kate Majid	Head of Transformation and Patient Involvement ( <i>item 2014/010</i> )
Peter Aaser	Derby City East Governor
Lew Hall	Erewash North Lead Governor
Mark McKeown	Derbyshire Voice Representative
John Morrissey	Amber Valley South Governor

**APOLOGIES:**

Helen Marks	Director of Workforce & Organisational Development
Mick Martin	Non-Executive Director
Lee O'Bryan	Interim Director of Workforce and Organisational

DHCFT 2014/001	<p><b><u>CHAIRMAN'S OPENING REMARKS, APOLOGIES, DECLARATIONS OF INTEREST</u></b></p> <p>Mark Todd, Chairman to the Trust, who came into post on 20 January 2014, opened the Board meeting by welcoming all to the meeting. He noted the good attendance for the meeting and is looking forward to working for the Trust. He especially welcomed Caroline Maley, the new Non-Executive Director/Audit Chair as well as Peter Aaser and John Morrissey, who are new governors. A special welcome was also extended to Robin Ash, who is giving a presentation, with the help of an interpreter, concerning the British Sign Language Charter to the Board. It was also noted that during the meeting live tweets will be undertaken by Anna Shaw. The tweets provide a snapshot of issues that are discussed within the Board meeting and relate to the Board Papers, which are published on the website.</p> <p><b><i>Apologies:</i></b> Noted from Helen Marks, Director of Workforce and Organisational Development, Mick Martin, Non-Executive Director and Lee O'Bryan, Interim Director of Workforce and Organisational Development.</p> <p><b><i>Declarations of Interest:</i></b> There were no declarations of interest to be noted. Graham Gillham advised that he will shortly be writing to the Board Members concerning declarations of interest.</p>
DHCFT/2014/002	<p><b><u>PATIENT STORY – SERVICE USER ATTENDANCE</u></b></p> <p>Mr and Mrs E W are welcomed to the meeting. Mr W related his experiences of the Dovedale Day Hospital to the Board and praised staff for their support but felt that more resources were needed. Although he had experienced mental health problems for some time, no referral was ever made by his G.P. Surgery. However, a recent discussion with a locum G.P. resulted in attendance to the Dovedale Day Hospital and he now feels much better. Mrs W also referred to having to cope as a carer on her own for a number of years but now feels very well supported both by the Day Hospital and by the Community Psychiatric Nurse, Sally Ann Pearson. She expressed her thanks for all the help given. Her husband looks forward to his sessions at the Day Hospital and generally his outlook on life is much brighter and much improved. Mr W also expressed an interest in helping other people as a volunteer. Gary Stokes, Head of Patient Experience, will contact Mr W to discuss this and also to invite Mr and Mrs W to a Patient Experience Group meeting in order to share their experiences there.</p> <p>With reference to a recent stay at the Medical Assessment Unit at the Royal Derby Hospital, Mrs W advised that although she had given a full medical history to the staff there, there was no involvement by any mental health professionals. This is disappointing as a Liaison Team is available 24/7 to any patients in the Royal Derby Hospital, who have mental health problems. Apologies are extended to Mr and Mrs W and the Liaison Team will be contacted to discuss.</p> <p>Mr and Mrs W are thanked for attending the Board meeting and sharing their story.</p> <p><b><u>RESOLVED:</u></b> Access arrangement through G.P. Surgeries (Primary Care) to be checked Contact with Liaison Team to be made</p>
DHCFT 2014/003	<p><b><u>MINUTES OF THE MEETING OF DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST, HELD ON 27 NOVEMBER 2013</u></b></p> <p>The minutes of the Board Meeting, held on 27 November 2013, were received.</p>

	<p>It was noted that no meeting was held in December 2013.</p> <p>The following amendments were noted:</p> <p><b><u>DHCFT 2013/139 – Integrated Performance and Activity Summary:</u></b> Ifti Majid confirmed that the sentence relating to patients not clustered should read” patients who are legitimately not clustered”.</p> <p><b><u>DHCFT 2013/140 – Finance Directors Report.</u></b> The sentence relating to Monitor is clarified as follows:</p> <p><i>Monitor were satisfied with the progress against the Plan, as recorded in their Quarter 2 phone call with the Trust.</i></p> <p><b><u>RESOLVED: Minutes of the Board meeting were accepted and approved with the above amendments.</u></b></p>
<p><b>DHCFT 2014/004</b></p>	<p><b><u>MATTERS ARISING – ACTIONS MATRIX</u></b></p> <p><b><u>DHCFT/2013/40: People Strategy Update:</u></b> this has been subsumed into the Transformational Programme Agenda – a date for completion is required. It was noted that a new Workforce Group will be set up and the workforce plan was due to be submitted to the Finance and Performance Committee in February 2014.</p> <p><b><u>DHCFT/2013/51 – Social Media:</u></b> It was confirmed that a review of equipment is being undertaken. However, live tweets are made during every Board meeting.</p>
<p><b>DHCFT 2014/005</b></p>	<p><b><u>CHIEF EXECUTIVE’S REPORT</u></b></p> <p>Steve Trenchard presented his report to the Board. The following are key points:</p> <ol style="list-style-type: none"> <li>I. A “Challenging Bureaucracy” Report has been published by the NHS Confederation. The specific recommendations contained in the report will be explored by the Trust in order to identify ways within the administrative burden which can be reduced. The Trust aims to play an active role from the top down to add as much value as possible and to be mindful of change management in preparing staff. Work on performance management is led by Ifti Majid, in order to measure the right things for the right reason.</li> <li>II. The Trust has been included as a case study on their work on values in the report by the Point of Care Foundation “Staff Care”, which highlights that caring for patients is hard work, especially during a period of institutional change.</li> <li>III. It is pleasing to see the high level of engagement of staff with the Transformational Change Programme. The process has been amended to flow better.</li> <li>IV. The Health and Wellbeing Board for the County met on 12<sup>th</sup> December 2013. It was confirmed that all providers are now invited. A further meeting is planned for early April. Chief Executives are also discussing early intervention as well as the Better Care Fund application. It was noted that the current economic climate such as unemployment and cuts in benefits mean that the number of mental health patients are rising. The work that the Trust is doing should be protected and cuts in services should be prevented. An ethnographic approach might also be of value in this. It was suggested that we need to look beyond sole engagement with commissioners at the whole picture. Steve Trenchard will be the chair for the Chief Executives Forum for the next 6 months and will keep the Board updated. It was also noted that Monitor is doing some work on providing clarity for counties in relation to the provider structure.</li> </ol>
<p><b>DHCFT 2014/006</b></p>	<p><b><u>BRITISH SIGN LANGUAGE CHARTER – ROBIN ASH</u></b></p> <p>Harinder Dhaliwal introduced Robin Ash, Empowerment &amp; Campaigns Officer (Midlands) for the British Deaf Association and his interpreter, Lisa Brailsford, who presented to the Board in relation to the British Sign Language Charter.</p> <p>It was noted that very often only small changes are required in order to make hospitals</p>

	<p>more accessible for deaf people, such as providing a button to press on an intercom.</p> <p>The key 5 pledges of the Charter are:</p> <ol style="list-style-type: none"> <li>1. Ensure access for deaf people to information and services</li> <li>2. Promote learning and high quality teaching of British Sign Language</li> <li>3. Support deaf children and families</li> <li>4. Ensure that staff working with deaf people can communicate effectively in British Sign Language</li> <li>5. Consult with the local deaf community on a regular basis.</li> </ol> <p>It was confirmed that a consultation meeting had taken place last September, supported by other staff in the Trust, which was a successful event. Information has been provided to the Board on this with the papers. The Board thanked Robin for an excellent presentation and expressed a wish to sign the Charter. It was suggested this takes place at the meeting during Deaf Awareness Week in May. Engagement with Governors will also be enabled by Lew Hall, Lead Governor. Robin, Lisa and Harinder are thanked for their presentation and attendance.</p> <p><b>RESOLVED:</b> The Board to sign the Charter during Deaf Awareness Week in May. Harinder Dhaliwal to make arrangements for this.</p> <p><b>Action Matrix:</b> Update on progress on the key points of the Charter to be presented to the Board in January 2015.</p>
<p><b>DHCFT 2014/007</b></p>	<p><b><u>QUALITY COMMITTEE REPORT</u></b></p> <p>Tony Smith provided the Board with a verbal update on the Quality Committee. Key points are as follows:</p> <ol style="list-style-type: none"> <li>I. Service Users are now represented at the Committee, notably through Derbyshire Voice. They have expressed a wish to become involved in the Suicide Prevention Group, which will be taken forward by Steve Edgeley. However, other organisations will also be invited to attend and involvement from service users in the North is also being sought.</li> <li>II. During the last meeting three policies were presented to the Committee for review and feedback was received, specifically re the Quality Assessment.</li> <li>III. Quality Visits maintain momentum and involvement by service users and carers is to be expanded throughout to enhance. A review of Quality Visits is also on the agenda of the Pathway and Partnerships Teams.</li> <li>IV. Governance Structure is currently under review and involvement by service users should not be lost. Similarly involvement by Governors is being discussed.</li> </ol> <p><b>RESOLVED:</b> The Board received the verbal update and obtained assurance.</p>
<p><b>DHCFT 2014/008</b></p>	<p><b><u>CHANGES TO TRUST REGISTRATION WITH THE CARE QUALITY COMMISSION</u></b></p> <p>Carolyn Gilby presented a proposal to amend the current registration of the Trust with the Care Quality Commission to increase the number of registered sites, for regulated activity, under the Health and Social Care Act 2008 (Regulated Activities), Regulations 2012.</p> <p>The proposed option is to register under Rule 1 the addition of six new locations:</p> <ol style="list-style-type: none"> <li>1. Cherry Tree Close</li> <li>2. Audrey House</li> <li>3. Kedleston Unit</li> <li>4. Melbourne Unit</li> <li>5. Cubley Court</li> <li>6. Tissington House</li> </ol> <p>All the above are stand-alone sites that provide overnight accommodation and therefore must be registered separately under Rule 1.</p> <p><b>RESOLVED:</b> The Board noted the proposal and agreed to the recommendations.</p>
<p><b>DHCFT 2014/009</b></p>	<p><b><u>FINANCE AND PERFORMANCE COMMITTEE REPORT</u></b></p> <p>Lesley Thompson updated the Board on the recent meeting of the Finance and Performance Committee.</p>

	<p>Of note are the following:</p> <ol style="list-style-type: none"> <li>I. Excellent work is ongoing on the Forward 2 year plan</li> <li>II. There are 3 areas that the Finance and Performance Committee is currently reviewing: <ol style="list-style-type: none"> <li>a) the Electronic Patient Record</li> <li>b) Children's Services</li> <li>c) Programme Assurance</li> </ol> </li> </ol> <p>It was confirmed that the meetings of the Finance and Performance Committee take an in-depth look at all relevant issues and assurance is gained during the meetings.</p> <p>Lesley was thanked for providing the update.</p> <p><b>RESOLVED:</b> The Board received the update and endorsed the programme of further work by the Committee</p>
<p><b>DHCFT 2014/010</b></p>	<p><b><u>TRANSFORMATION CHANGE PROGRAMME REPORT</u></b></p> <p>The report on this was presented to the Board by Kate Majid. The following key points were noted:</p> <ol style="list-style-type: none"> <li>I. The programme has been in operation since July 2013.</li> <li>II. There is successful engagement with partners and stakeholders from Carer and Patient organisations, Clinical Commissioning Groups, Local Authority and the Voluntary Sector.</li> <li>III. There are 10 Pathway and Partnerships Teams and all have now completed the 3 Development Days and 4 have submitted draft plans to the Transformational Board.</li> <li>IV. All Clinical Pathway and Partnerships Teams have completed the viability assessment.</li> <li>V. The costs for Substance Misuse are currently high and actions are underway to reduce/minimise this. A paper concerning Substance Misuse Services will be presented to the Board in April 2014.</li> <li>VI. Corporate Pathway and Partnerships Teams have undertaken a slightly different approach by getting each Directorate to complete a "Value for Money" Review of Support Services.</li> <li>VII. The score of Children's Services was low and plans have been put into action to address this.</li> </ol> <p><b>RESOLVED:</b> The Board will discuss the methodology at the Board Development Session in March 2014 to ensure that all issues including Safeguarding are incorporated. An update will be provided at the April Board meeting. The Board thanked Kate Majid for the report and received assurance.</p>
<p><b>DHCFT 2014/011</b></p>	<p><b><u>INFORMATION GOVERNANCE REPORT - QUARTER 3</u></b></p> <p>Ifti Majid presented the Information Governance Update for Quarter 3. Key themes are:</p> <ol style="list-style-type: none"> <li>I. All relevant 45 standards are on plan to achieve a minimum level of 2 or above producing a score of 96 % compliance – this is an increase from 95 % in 2012/13.</li> <li>II. An overall rating of "Satisfactory" will be achieved in compliance with the Information Governance Toolkit version 11 and allow us to complete our Information Governance Statement of Compliance.</li> <li>III. Information Governance Serious Incidents Requiring Investigation is mandatory through the Toolkit from June 2013.</li> </ol> <p><b>RESOLVED:</b> The Board received the report and obtained assurance.</p>
<p><b>DHCFT 2014/012</b></p>	<p><b><u>INTEGRATED PERFORMANCE AND ACTIVITY SUMMARY – MONTH 9</u></b></p> <p>The report was presented to the Board by Ifti Majid. He drew attention to the fact that the CPA indicator has now turned from red to green. The red indicator was due to a change in reporting procedures requested by Monitor but this has now stabilised.</p> <p>He also thanked the Information Team for ensuring a high level of compliance relating to our Commissioning Data set as shown on the diagram (page 37 of the report). No queries</p>

were raised on this part of the report.

- I. Ifti then introduced Michelle Hague, Service Line Manager for Urgent and Planned Care Division, Urgent Care North, who provided the Board with information relating to the Deep Dive Report.

Of note are:

- I. Urgent Care provide acute inpatient services and crisis home treatment to patients from the North of the County.
- II. There are 56 adult and 12 older adult acute inpatient beds on 3 wards at the Hartington Unit, i.e. Pleasley, Morton and Tansley Ward.
- III. The service also provides Accident and Emergency Liaison at the Chesterfield Royal Hospital and this will shortly become a Liaison (RAID) Team.
- IV. A pilot project concerning a mental health nurse working in tandem with Derbyshire Health United is to start shortly.

In response to a query concerning data entry, Michelle confirmed that everything is being done to ensure that data such as addresses and postal codes etc. are entered correctly. However, it is noted that sometimes the data provided by patients is incorrect.

Concerning the 7 day follow up and how this is checked, Michelle explained that all parties concerned are made aware of discharge plans. The In-Reach service is engaged with this and discharges only happen between the hours of 9 to 5. Breaches are rare but can occur if for example the patient leaves the country or if an incorrect address has been supplied.

Staffing levels are monitored and current staffing on the wards is 5 staff present for the morning duty, 5 during the afternoon and 3 during the night. Currently there are high levels of sickness absence due to physical health problems.

The discrepancies in compliment reporting between wards was highlighted and it was agreed that some wards should learn from best practice. The high sickness rated was also queried and a more detailed breakdown requested.

In relation to absconding of patients, a good relationship with Police exists and a rapid response is made. However, this has shown an upward trend and the issue is currently being looked at by the Divisional Nurse.

Individual Performance Reports are being dealt with but the paperwork is extensive and only a certain number can be done during each month. However, this is being addressed.

The Board thanked Michelle Hague for the detailed update.

- II. For the Deep Dive Report on Specialist Services, Children's and Adolescent Mental Health Services, Dr Laurence Baldwin, Consultant Nurse and Helen McMahon, Service Line Manager are introduced.

Of note are:

- I. The service is part of the current 5-year National Improving Access to Psychological Therapies, which is aimed at improving outcomes for children and young people. The Trust is the only provider service in the East and West Midlands for this and is seen by the national office as one of the most successful implementers of the project. A minister is due to visit the service, for which a date is yet to be confirmed. A report by the Department of Health has evaluated the service. Comparison data was requested.
- II. A different IT system is being used, which enables the service to do a single entry.
- III. Commissioned services include the provision of primary mental health workers (County only), specialist Children's and Adolescent Mental Health Teams, Young People's Services, Learning Disabilities Children's and Adolescent Mental Health Service, a Liaison Team to the Royal Derby Hospital Wards and a Multi Systemic Team for short term intensive support to families of children at risk.
- IV. There are also links to the Eating Disorder Service.
- V. Complaints are low due to the fact that the service aims to prevent complaints by addressing issues early.

	<p>VI. Individual Performance Reviews need to be completed and are being actioned.</p> <p>Dr Baldwin and Helen McMahon are thanked for the information given.</p> <p><b>RESOLVED:</b> The Board received the report and sought additional assurance on the matters discussed.</p>
<p><b>DHCFT 2014/013</b></p>	<p><b><u>FINANCE DIRECTOR'S REPORT – MONTH 9</u></b></p> <p>Claire Wright presented the Finance Director's Report, for month 9, to the Board. The key points are as follows:</p> <ol style="list-style-type: none"> <li>I. The year to date financial position at December is an underlying surplus of £ 1.57 million. The outturn surplus is forecast as £ 1.67 million which is £ 0.4 million ahead of our original plan.</li> <li>II. The Monitor Risk Rating (Continuity of Service Risk Rating) remains at 3.</li> <li>III. The Cost Improvement Programme is marginally behind plan year to date but forecast to achieve 100 % of plan at the end of the financial year.</li> <li>IV. The cash balance is £ 1.1 million above plan year to date.</li> </ol> <p>In response to a query from Lesley Thompson, regarding the forecast Continuity of Service Risk Rating, it is confirmed that the forecast liquidity metric is 2 but overall this equates to an average rating of 3 for the Continuity of Service Risk Rating. Claire Wright was thanked for presenting this excellent report.</p> <p><b>RESOLVED:</b> The Board accepted and received assurance from the Finance Director's Report Month 9.</p>
<p><b>DHCFT 2014/014</b></p>	<p><b>CLOSE OF THE MEETING</b></p> <p><i>The Chairman, under the Foundation Trust's Constitution, asked that members of the press or public withdraw for the Board to conduct its remaining business in confidence, as special reasons apply. On this occasion the special reason applies to information which is likely to reveal the identities of an individual or commercial bodies.</i></p> <p>The Chairman thanked all those present for their attention and closed the meeting.</p>