

DERBYSHIRE MENTAL HEALTH SERVICES NHS TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

Held in The Boardroom, Bramble House, Kingsway

On Wednesday 4th February 2009

MEETING HELD IN PUBLIC

Opened: 2.10 pm

Adjourned: 3.20 pm

PRESENT:

Alan Baines	Chairman
Alan Barclay	Non-Executive Director
Kathryn Blackshaw	Executive Director of Business Strategy
Graham Foster	Non-Executive Director
Paul Lumsdon	Executive Director of Nursing and Governance
Ifti Majid	Executive Director of Service Delivery and IM&T
Veronica Marsden	Non-Executive Director
Michael Martin	Non-Executive Director
Mike Shewan	Chief Executive
Graham Gillham	Director of Corporate and Legal Affairs
Tika Khan	Acting Director of Finance
Alison Baker	Executive Business Assistant (Minute Taker)

IN ATTENDANCE: Ray Curry, Dave Waldram, Mick Walsh, Andrew Hare and Tim Proctor

APOLOGIES:

John Sykes	Executive Medical Director
Lesley Thompson	Non-Executive Director

The Chairman requested that introductions be provided for the members of the public.

It was noted that all Directors were required to sign the Trust's Disclosure of Interests. There were no interests to be disclosed.

The Chairman also made reference to the slight change to the front sheet of Board Papers, which now included a section with regard to the consideration of legal issues. Graham Gillham advised that it was intended to point the Board to those areas of business with statutory responsibilities. Paul Lumsdon added that the process would help to drive the Trust to a level three ALE score of "excellent".

**DMHT
09/12**

**MINUTES OF MEETING OF THE TRUST BOARD HELD IN PUBLIC ON
WEDNESDAY 7th JANUARY 2009**

The minutes of the meeting held on 7th January 2009 were accepted and approved with one minor amendment to the second sentence of paragraph one.

DMHT 09/03 The Operating Framework for the NHS in England 2009/10
The framework (a full copy of which was available on the Department of Health website) was published on 8th December **2008** and was

**DMHT
09/13**

**MATTERS ARISING FROM MINUTES OF THE MEETING OF THE TRUST BOARD
HELD IN PUBLIC ON 7th JANUARY 2009 AND ACTIONS MATRIX**

DMHT 09/03 The Operating Framework for the NHS in England 2009/2010

Veronica Marsden asked if the signed contracts with PCTs could be brought to the Trust Board in March. Mike Shewan replied that a copy of the contract would be made available when completed.

DMHT 09/10 Ratified Minutes from Risk Management Committee held on 11th November 2008, together with Actions Matrix.

Mike Shewan asked for the Board decision to be confirmed with regard to the future of the Risk Management and Governance Committees. The Chairman responded that, in line with the advice from Monitor, both Committees would cease to be Board Committees from the end of February. Instead each committee would report as Executive Committees to the EMG but the Audit Committee would review their direction, work and findings.

DMHT 09/06 Multi-Professional Strategy Action Plan

Paul Lumsdon advised the Board that the launch event would take place on 9th July 2009.

DMHT 08/90 Strategic Scan

Mike Shewan reported that an initial meeting had taken place and a proposal had been received from the East Midlands Procurement Hub in terms of facilitation, which was being considered.

DMHT 09/04 Mandatory Training - Medics

Paul Lumsdon reported that he had spoken with John Sykes and all areas for improved reporting and attendance had been identified.

**DMHT
09/14**

TRANSFORMING COMMUNITY SERVICES

Kathryn Blackshaw introduced her paper on Transforming Community Services and highlighted the key issues identified for the Trust.

Transforming Community Services: Enabling New Patterns of Provision was published by the Department of Health on 13th January 2009. The best practice guidance was issued to help providers of community services take forward the requirements of both the NHS Operating Framework and *High Quality Care for All*. A clear steer had been awaited from the Department of Health and one of the key messages was that no national blueprint existed. The message around the assurance process and consultation with stakeholders was defined and timelines had been set in terms of assuring the SHA and providers that due process was being followed.

In response to the Chairman, Kathryn Blackshaw advised that the guidance indicated that the SHA would have the ultimate responsibility to ensure that PCTs were undertaking the correct consultation. In relation to writing the Trust's Business Plan, clarity around governance arrangements would be reviewed and commissioners would have a very clear strategy of intentions.

Mike Shewan drew the Board's attention to page 2 of the Executive Summary which clarified that no national blueprint existed and that decisions would be taken by PCT Boards. There was a role for Chairs and Non-Executive Directors to interface with PCTs and raise challenge on how dialogue was taken forward. Competition panels would put pressure on PCTs to ensure that they were market testing to demonstrate

value for money and promote choice. A Co-operation and Competitions Panel, chaired by Lord Carter of Coles, had been established which would adjudicate over whether NHS organisations had operated in an anti-competitive manner and outside due process.

Veronica Marsden reported that she had recently had discussions with a Non-Executive Director from the Derbyshire County PCT around a health summit approach and would be happy to progress further discussions in a more formal way.

Michael Martin asked for further clarification on the specific implications for the Trust. Mike Shewan replied that there was an all day induction session scheduled for the new Non-Executive Directors on 16th February 2009 to help gain a better understanding of the impact and challenges facing the Trust.

In response to Veronica Marsden, Mike Shewan confirmed that information was awaited from the PCT with regard to whether a PCT Board to Board would be taking place. The two Chairmen and Chief Executives were due to meet shortly.

RESOLVED:

- **To note the guidance issued by the Department of Health.**
- **To encourage NEDs to act as ambassadors for the Trust and promote good relationships with external stakeholders.**

**DMHT
09/15**

REGISTRATION IN RELATION TO HEALTHCARE ASSOCIATED INFECTION BY CARE QUALITY COMMISSION

Paul Lumsdon presented his report which was intended to provide the Board with information on the process for registration in relation to health care associated infections with the Care Quality Commission and for the level of full compliance to be approved. At the request of Paul Lumsdon the baseline self assessment of the Trust would be evaluated by infection Control specialists from Neighbouring Trusts thereby enhancing the preparedness for any potential visit by the Quality Care Commission. The Board noted the registration with the Care Quality Commission process and the level of compliance and approval was given for the Chief Executive to sign the application for registration on behalf of the Board.

RESOLVED:

- **To approve the level of full compliance.**
- **To note the new legal implications and the areas that required strengthening.**
- **To approve the Chief Executive sign the application for registration on behalf of the Board.**

**DMHT
09/16**

MEASURING FOR QUALITY IMPROVEMENT

Paul Lumsdon provided an update on Measuring for Quality Improvement. The year 2009/10 would see the next phase of the vision set out in *High Quality Care for All*, the final report of the NHS next stage review. The key focus for the Trust was to make quality its organising principle, by transforming services to deliver high quality care whilst delivering value for money and continuing to deliver on all the national priorities.

The Trust was in the process of building its own quality indicators and those would be included into contracts with commissioners. An increased level of clinical engagement would be needed and Paul Lumsdon was discussing with John Sykes the best way to achieve this.

Mike Shewan commented that Monitor were increasingly focussed on quality and the report presented by Paul Lumsdon related directly to the Darzi report (Next Steps Review/High Quality Care for All). The review had focussed strongly on the need for the NHS to develop the quality account and the Trust had a year of transition ahead. Key performance indicators (KPIs) would need to be agreed with commissioners and contract income would be reliant on the achievement of those KPIs.

Veronica Marsden added that clinical engagement was key to the quality agenda and asked whether a clinical engagement strategy was in place. Mike Shewan replied that there wasn't a strategy as such, but actions were ongoing to work towards a strategy. Kathryn Blackshaw said that an over-arching Organisation Development (OD) strategy was needed and the new Head of Workforce and OD, Stephen Dixon, would be looking into this area.

Graham Foster asked where the quality agenda fitted into the Board structure. Paul Lumsdon responded that the six monthly review of the governance restructure would be provided to the Trust Board which would include the proposals pulling together the quality strands that run through the Trust.

RESOLVED:

- **To receive the six monthly review of the Governance Structure at the April Trust Board and receive the Governance Report to the May Trust Board.**
- **To ensure that high quality care and value for money are the key drivers in the Trust's service delivery.**

**DMHT
09/17**

INTEGRATED PERFORMANCE REPORT INCORPORATING FINANCIAL PERFORMANCE – DECEMBER 2008 (MONTH 9)

Paul Lumsdon highlighted the key themes with a view to a more detailed discussion within the confidential session of the Trust Board.

The total number of people receiving services continued to exceed the target, with 370 service users on the caseload against a target of 354. The position would continue to be closely monitored. The Board were pleased to note no breaches in the seven day follow up with all service users followed up within seven days in December. The position with return to work interview completion had again improved and was now at the highest rate achieved so far (815). IPR figures had also improved but more work was needed to improve on the figure of 56%. The Early Intervention case load was slightly below target with 97 new cases against a target of 98 and there had been a slight increase in the rate of delayed discharges.

Tika Khan highlighted that financial performance had stabilised as a result of a continued rigorous approach by management.

Mike Shewan opened the debate on the level of detail that was brought to the Board on a monthly basis and suggested that non-financial activity information should be presented on a six monthly timetable rather than monthly. Tim Woods suggested that a quarterly reporting timetable would be more beneficial than six monthly. Paul Lumsdon agreed to review the report in terms of format and frequency. The Chairman reiterated the importance of significantly improving the strategic level of Board discussion.

RESOLVED:

- **To await feedback from Paul Lumsdon with regard to the contents and frequency of the information provided in the Integrated Performance**

Report.

- **To action an immediate review of the nature and content of reports that need to be brought to the Board.**

**DMHT
09/18**

OUTSOURCING COMMUNICATIONS/PUBLIC RELATIONS

Mike Shewan advised the Board that, following the secondment of the Trust's Head of Workforce, Organisational Development and Public Relations (PR), Stephen Dixon had been appointed as the new Head of Workforce and Organisational Development. An agreement had been reached with Mark Brealey Communications, with whom the Trust had previously worked, and who had conducted a wide range of activities across the NHS, to provide a Communications and PR service on an interim basis. The key functions delivered by Mark Brealey and Richard Chew would include: media handling and relationships; internal and external communications; community engagement and involvement; crisis communications; communications and reputation survey; communications strategy; membership recruitment; Foundation Trust consultation/application presentation; and the anti-stigma campaign.

The Communications and PR arrangement was interim and a decision would be taken around June 2009 to either undertake a tender process for an outsourced service or provide the function internally.

Mike Shewan advised that Mark Brealey and Richard Chew would release regular, positive press releases, and ensure that newsletters and publicity material was of a high presentational quality.

Media training would also be looked into in order for staff to be taught the skills required to deal with the media.

The Chairman asked for an indication of cost and Mike Shewan confirmed that the Trust had managed to secure very competitive rates.

Alan Barclay raised the challenge around the increase use of internet "blogging" and the potential impact that could be achieved. Mike Shewan added that the use of social media such as "Facebook" was also being examined. The Chief Executive already had a "blog" which was regularly updated.

Veronica Marsden asked if the Communications Strategy and Communication and Reputation Survey were being reviewed, in light of their inclusion in the Trust's IBP. Kathryn Blackshaw advised that both were being reviewed by the Richard Chew, along with the Trust's brand.

RESOLVED:

- **To note and support the interim arrangements agreed.**
- **To consider whether further benefit could be derived from the outsourcing association.**
- **To receive a more detailed paper regarding future arrangements for communications and public relations, no later than June 2009.**

**DMHT
09/19**

ANNUAL BUSINESS PLANNING CYCLE

Kathryn Blackshaw advised that the Annual Business Planning Cycle had been refreshed to align the Annual Plan with the 5 year Integrated Business Plan (IBP). It set out a process for establishing the organisation's annual objectives in support of delivering the Trust's vision and strategic objectives. The cycle also included a performance reporting framework and timeline that would be required to deliver the plan.

Kathryn Blackshaw also reported the positive impact seen by the anti-stigma campaign, a range of events had already been coordinated and in particular she was pleased to confirm that over 100 staff had signed up to run the Derby 10k supporting the Trust's anti-stigma message. Kathryn asked for the Board's support in establishing a single objective for each member of the organisation to be involved in the Trust's anti-stigma campaign. It was felt that unifying the organisation through a single objective would allow staff to share a common purpose and proactively support the anti-stigma campaign. The Board endorsed the importance of the work and Kathryn Blackshaw agreed to progress further work and include the campaign in the IBP.

Mike Shewan highlighted the importance of the Board's awareness of the Trust's objectives and advised that a set of corporate objectives would be brought to either the March or April Trust Board. Following approval at Board level, the objectives would be translated into individual objectives at an executive level, and then cascaded further down the organisation.

RESOLVED:

- **To approve the proposed annual business planning cycle.**
- **To support the anti-stigma campaign.**
- **To receive the Trust's corporate objectives at the March or April Trust Board.**

**DMHT
09/20**

RATIFIED MINUTES FROM RISK MANAGEMENT COMMITTEE HELD ON 9TH DECEMBER 2008, TOGETHER WITH ACTIONS MATRIX

The minutes from the Risk Management Committee, held on 9th December 2008, together with the actions matrix, were provided for information.

Paul Lumsdon brought to the Board's attention the detailed focus that was underway with regard to the top red risks in the organisation.

**DMHT
09/21**

RATIFIED MINUTES FROM GOVERNANCE COMMITTEE HELD ON 11TH DECEMBER 2008, TOGETHER WITH ACTIONS MATRIX

The minutes from the Governance Committee, held on 11th December 2008, together with the actions matrix, were provided for information.

**DMHT
09/22**

NICE GUIDELINES REPORT

Paul Lumsdon had provided the Nice Guidelines report to the Board for information. The policy had been ratified by the Clinical Effectiveness Compliance and Assurance Committee in October 2008 and by the Governance Committee in January 2009.

Date and time of the next meeting

Wednesday, 4th March 2009 commencing at 2:00pm in the Robert Robinson Room, NHS Derbyshire County HQ, Scarsdale Hospital, Nightingale Close, Off Newbold Road, Chesterfield, Derbyshire, S41 7PF