

DERBYSHIRE MENTAL HEALTH SERVICES NHS TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

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

On Wednesday 7th October 2009

MEETING HELD IN PUBLIC		
Opened:	2.00 pm	Adjourned: 3.37 pm

<u>PRESENT:</u>	Mick Martin	Non-Executive Director and Acting Chair
	Carole Appleby	Non-Executive Director
	Alan Barclay	Non-Executive Director
	Kathryn Blackshaw	Executive Director of Business Strategy
	Graham Foster	Non-Executive Director
	Paul Lumsdon	Executive Director of Nursing and Quality
	Ifti Majid	Executive Director of Operations
	Mike Shewan	Chief Executive
	John Sykes	Executive Medical Director
	Lesley Thompson	Non-Executive Director
	Tim Woods	Executive Director of Finance
	Graham Gillham	Director of Corporate and Legal Affairs
	Alison Baker	Executive Business Assistant (Minute Taker)

<u>IN ATTENDANCE:</u>	Alexandra Kerry	York St John University
	Dave Waldram	Derbyshire Voice and Mental Health Act Team Representative
	Andrew Hare	Member of the public

<u>APOLOGIES:</u>	Alan Baines	Chairman
--------------------------	-------------	----------

DMHT 09/99 OPENING REMARKS

In the absence of Alan Baines (on Health Authority business), Mick Martin took the Chair for the meeting. Those present were advised that the meeting would be audio recorded for the purpose of accurately recording the minutes. The audio recording would be retained for a period of six months, after which time it would be destroyed.

The Chair referred to the Board Development Session, held on 16th September 2009, and the challenges faced by the Board to carefully balance the cost improvement programme (CIP) against service quality requirements.

DMHT 09/100 MINUTES OF MEETING OF THE TRUST BOARD HELD IN PUBLIC ON WEDNESDAY 2nd SEPTEMBER 2009

The minutes of the meeting held on 2nd September 2009 were accepted and approved.

DMHT 09/101 MATTERS ARISING FROM MINUTES OF THE MEETING OF THE TRUST BOARD HELD IN PUBLIC ON 2nd SEPTEMBER 2009 AND ACTIONS MATRIX

DMHT 09/14 Transforming Community Services

The Chair advised that progress was being made in relation to engagement with

commissioners and PCTs. A date had not yet been confirmed for the Board to Board with Derbyshire County PCT.

DMHT 09/78 Chaplaincy Service

Alan Barclay asked for an update on the progress with the Chaplaincy Service Steering Group. Paul Lumsdon reported that the steering group meetings had commenced with good representation from service users. Terms of reference had been agreed with the group taking the lead for the consultation process. Implementation of the Spirituality Strategy would be the main focus and Paul Lumsdon agreed to provide an update after the first three meetings had taken place.

DMHT 09/90 Taking it on Trust

Paul Lumsdon confirmed that the suggested amendments had been incorporated into the 'Taking it on Trust' table of evidence.

DMHT 09/91 Quality Assurance

Alan Barclay referred to the network group that had been commissioned to review benchmarking information and asked for an indication of progress. Paul Lumsdon was pleased to report that the Trust had taken the lead with regard to reviewing the definitions of serious untoward incidents used by the five Mental Health Trusts in the network group. Following the review, it was agreed that the definitions used by Derbyshire Mental Health Services NHS Trust would be used by the Mental Health Trusts in the East Midlands. Secondly, indicators had been put forward that would give an early warning system for any problems similar to those identified by the reviews into Mid Staffs/West London Trusts. The next meeting would be held on 8th December when a review of the findings identified would be undertaken. The benchmarking results would be included in the Integrated Governance Report.

DMHT 09/92 Integrated Performance Report

Paul Lumsdon advised that the requested breakdown of the corporate services workforce was included in the report to be taken later in the meeting. A trend analysis had been undertaken with regard to the workforce percentage of pay costs and it was pleasing to note that the data demonstrated clear progress in this area.

DMHT 09/93 Audit Committee Annual Report

Graham Gillham confirmed that the amendments to the Audit Committee Annual Report were being incorporated prior to its publication on the Trust website.

**DMHT
09/102**

UPDATE TO REGISTER OF DIRECTOR INTERESTS – GRAHAM GILLHAM

Graham Gillham explained that Carole Appleby had declared her interests for the Board to note. Carole listed additional interests – her current and previous clients. The complete list of declarations was therefore:

- Managing Director/Owner, Blue Horizon Associates Ltd, Derby
- Trustee Director, Home-Start Amber Valley, Crich, Derbyshire
- Associate Consultant, Hornbeam Associates Ltd, Derby
- Current clients: Nottingham University Hospitals NHS Trust; NHS East Midlands; and NHS Eastern and Coastal Kent
- Previous clients: NHS Nottinghamshire County; NHS Leicester City; NHS Westminster; and Principia-Partners in Health (an NHS social enterprise based in West Bridgford, Nottingham).

RESOLVED:

- **To note and approve the declarations of interests, as disclosed above.**
- **To note that all Board members have signed as to compliance with the NHS Codes of Conduct and Accountability and Nolan Principles.**
- **To note that no relevant audit matters have been declared.**

DMHT
09/103

ENGAGEMENT STRATEGY 2009 – 2012 – PAUL LUMSDON

Paul Lumsdon explained that the aim of the Engagement Strategy was to help the Trust to design more responsive, appropriate services by involving patients, carers, staff and the wider communities in Derbyshire to ensure the Trust provided high quality care for all.

In response to Tim Woods, Paul stated that the Engagement Strategy was an overarching one, consolidating the strategies already in place. Lesley Thompson asked for further information to identify how delivery against the strategy would be measured. Paul Lumsdon explained that the other strategies, referenced in the Engagement Strategy, would include more detailed success criteria. The document presented to the Board demonstrated a platform for articulation which pulled the supporting strategies together.

Mike Shewan stated that the paper contained the Trust's planned approach to engagement with a number of stakeholder groups. He referred to the national 'Time to Change' campaign, outlined at the recent Trust Annual Public Meeting, and the aims to reduce stigma and discrimination in mental health. The test of success in these areas would be very subjective, reported from the experience of service users, and this would also be a valid measure of the success of the Trust's Engagement Strategy. The increase in Trust membership and changes to clinical services were both areas where engagement could be demonstrated. In addition, the Care Quality Commission had given notice of the extent to which they intended to focus on the results of staff and patient surveys. The organisation planned to develop the 'Value Exchange' link to the website, which would enable the Trust to devise simple questionnaires/surveys to ensure better feedback and engagement.

The Board determined that the paper presented was better described as an overarching framework of engagement, the aim of which was to articulate the underpinning strategies already in place. It was agreed that the document would be renamed "Engagement Strategic Framework" and the IBP would be amended to reflect the title change.

RESOLVED:

- **To accept and ratify the Engagement Strategic Framework.**

DMHT
09/104

INFORMATION GOVERNANCE WORKPLAN 2009/10 – IFTI MAJID

In his role as Senior Information Risk Officer, Ifti Majid informed the Board of the progress made against the Information Governance Toolkit standards. The Board were pleased to note the development of the Trust's improvement plan to deliver an expected increase in compliance from 78% in 2008/09 to 87% in 2009/10. Attention was drawn to page five of the report and the year on year improvement in scores from 2006/07 to date. The 2009/10 V7 Toolkit would be a challenge but all required management arrangements were established to manage the delivery of the programme of work.

Alan Barclay requested an explanation of the term 'Corporate Information Assurance'. Ifti Majid responded that the term referred to records in non-clinical areas, such as meeting papers or Board reports.

Graham Foster asked what progress had been made with regard to Clinical Coding in light of the report by Internal Audit. Ifti Majid confirmed that clinical coding experts had joined the Information Management Team to train consultants and medical secretaries. The recommendations highlighted in the Clinical Coding Audit Report were in relation to the reconciliation of clinical coding on the internal system, which had been the focus of the training. As a result of the training, improvements had been

demonstrated on a month by month basis.

The Chair asked how the significant progress from 50% to 83% in Corporate Information Assurance would be achieved. Ifti Majid assured the Board that the targets for each element had been agreed with a 'bottom up' approach by the Information Governance Group. A new cost neutral Microsoft application was being explored which would give a significant increase in scores. Graham Foster added his assurance that the scores were reviewed by Internal Audit and the Audit Committee on an annual basis.

RESOLVED:

- **To note the content of the report, the improvements planned and the management arrangements in place.**
- **To approve the improvement plan to achieve further compliance in Information Governance for 2009-10.**
- **To note the Information Governance Management arrangements 2009-10.**

**DMHT
09/105**

RESULTS OF THE NATIONAL INPATIENT SURVEY 2009

Paul Lumsdon presented a summary of the results from the first national inpatient survey, conducted and published by the Care Quality Commission (CQC) on 24th October 2009.

123 patients had taken part in the survey and the Trust's results were generally in keeping with the majority of other mental health trusts. The Inpatient Survey Group would devise an action plan, reported through to the Patient Experience Group and the Governance Committee.

Graham Foster commented that the results would form a baseline which could be built upon to move forward and achieve the Trust's ambition to be the first choice provider of mental health services.

Paul Lumsdon referred to the bid that had been submitted for resources from the Innovation Fund, to implement a system for 'real time' data, which would enable the impact of changes to be monitored more closely.

Ifti Majid agreed with Mike Shewan's point that although surveys should be taken at face value, there was a lot of subjectivity involved, and some of the responses were clearly inaccurate.

RESOLVED:

- **To note the results of the survey and the baseline against which progress would be measured.**
- **To agree for the Governance Committee to receive a full analysis of the CQC survey results, community survey results, benchmarking information and an action plan.**

**DMHT
09/106**

REFLECTION ON ANNUAL PUBLIC MEETING AND AWARDS CEREMONY – MIKE SHEWAN

Mike Shewan reflected on the Annual Public Meeting and Awards Ceremony. Both had been well attended and received positive feedback both internally and externally. There were some challenges raised by members of the public and a review was planned to look at how this part of the agenda could be managed better. However, he stated that the willingness to allow critical comments from members of the audience, in a public forum, emphasized the fact that the whole event wasn't stage managed. It was hoped that future events would also include Long Service Awards for staff. The launch of the corporate branding and Annual Report had been well received and the

coverage by the press had been positive.

Lesley Thompson relayed her appreciation of the event which, although a long day, had been successful and showcased the Trust in a positive light. She suggested the use of live case studies would be a powerful way to highlight the services offered by the Trust and help with the anti-stigma campaign. The question and answer session had highlighted the need for a more carefully planned approach to addressing concerns and comments raised by members of the public.

Paul Lumsdon agreed that the event was well orchestrated and was keen to build in the lifelong recognition of staff to the agenda for the future. With regard to the question and answer session for members of the public, Paul said that the Trust was one of the few organisations that allowed individual concerns to be aired in the public arena.

Ifti Majid added that the staff awards element of the day had raised a lot of positive interest in the organisation and the suggestion for smaller non-voted categories would be a welcome addition.

The Chair reported that, following his visits around the Trust, it was clear that staff were delighted with the approach being taken by the organisation to recognise the achievements of teams and individuals.

**DMHT
09/107**

NHS CONSTITUTION REPORT – PAUL LUMSDON

Paul Lumsdon explained that his report was intended to demonstrate to the Board how the NHS Constitution was implemented across the organisation. Briefings with staff had been undertaken during the consultation period and progress would continue to be made to raise the profile of the constitution. The main themes of the NHS constitution were explained, which were a legal requirement from 1st October 2009. A detailed response had been forwarded to NHS East Midlands with regard to the Trust's statement of readiness, which was incorporated into the implementation plan included in the report.

In response to Carole Appleby, Paul Lumsdon stated that open support had been pledged by NHS East Midlands to take forward the actions contained in the Statement of Readiness.

RESOLVED:

- **To note the contents of the report and the statement of readiness.**
- **To ensure the NHS Constitution was referenced in the Foundation Trust Constitution.**
- **To consider the NHS Constitution when making key decisions in future.**

**DMHT
09/108**

NHS SAFEGUARDING CHILDREN REVIEW – PAUL LUMSDON

Paul Lumsdon provided the background to the Board on the five actions highlighted by David Nicholson following the review by the Secretary of State in response to the case of baby Peter. All safeguarding arrangements were being reviewed nationally to ensure they were fit for purpose.

The Trust had completed the self-assessment exercise and reported a 'RAG' rating of 'green' in all areas. Further actions had been identified to further enhance and strengthen the Trust's safeguarding arrangements.

Graham Foster requested further details with regard to the clinical audit assurance programme in relation to safeguarding children and vulnerable adults. Paul Lumsdon explained that the audit programme looked at the training of staff, the decisions made,

and risks highlighted within reports. Russell Mason, Clinical Audit Manager had included these areas within the clinical audit programme, which would be an important internal check to demonstrate progress moving forward. Clinical Audit and Assurance had also been included in the October Board Development Session.

RESOLVED:

- **To note the level of assurance provided by the report in response to the five key actions.**
- **To agree to receive further updates on safeguarding.**

DMHT
09/109

INTEGRATED PERFORMANCE REPORT INCORPORATING FINANCIAL PERFORMANCE AND CIP POSITION – AUGUST 2009 (MONTH 5) – PAUL LUMSDON/TIM WOODS

Tim Woods was pleased to report that the Income and Expenditure position was RAG rated as 'green' in terms of performance. The planned surplus had been exceeded, together with the EBITDA percentage margin of 7.3% against a target of 7.1%. The end of year plan was therefore forecast as achievable by the Finance Team. The Board were also pleased to note that the CIP programme continued to perform above plan.

Tim Woods gave an indication of the risks that existed, in particular the potential impact that could result from the flu outbreak. Spending on was within budget at the present time but that was expected to rise as the pandemic spread. Ifti Majid stressed that the Lorenzo project was a non-recurrent risk and Tim Woods agreed to amend the report for next month to reflect the current position.

Paul Lumsdon turned the Board's attention to the non-financial aspects of the Integrated Performance Report. He explained the key achievements, including the Assertive Outreach caseload, which remained consistently above target, and the rates of crisis home treatment, crisis gatekeeping, and seven day follow-up. No cases of MRSA or *Clostridium Difficile* had been reported to date, and bed occupancy rates remained high. The percentage of IPR (Individual Performance Review) completion was high and the use of agency staff in the Trust was reported as low. The Board were pleased to note the achievements highlighted, in particular the increase in Return to Work interviews.

It was disappointing to note that the rates of routine consultant outpatient appointment DNAs and cancellations remained well above target, with little improvement noticed over the last three months. Proactive steps had been taken to address this area of concern and prompt and reliable information was now readily available. This enabled closer monitoring of areas of poor performance. Ifti Majid advised that since the report had been written, the rate of DNA's and cancellations had reduced from 16% to 11%. He added that, with effect from the previous week, each business unit now received a weekly list, which highlighted how many individual appointments had been cancelled by each consultant. The Associate Medical Directors had been given the task of forwarding a report to Ifti Majid, which explained why those appointments had been cancelled. The achievement in the Learning Disability and Older People's Business Unit of a 5% cancellation rate was particularly pleasing and demonstrated that the target of 4% was achievable.

John Sykes stated that the absence of a booking system continued to be problematic and explained the background to his concerns. Ifti Majid remained resolute in his view that it was unacceptable for consultants to cancel appointments in this manner and a cultural change was necessary to drive improved performance.

Mike Shewan said it was important to understand the impact that could result from a change in behaviour by consultants. He stressed that some consultants had an

almost nil rate of cancelled clinics and the reasons for the variation needed to be understood to enable effective benchmarking.

Following considerable discussion, the Chair asked Ifti Majid and John Sykes to liaise outside the meeting to finalise a realistic trajectory for improvement before the next Board meeting.

John Sykes asked for the Board's support for the Trust to become an early adopter for the Revalidation Pilot Project, due in 2010 for all medical staff, including consultants. The project was cost neutral and would clearly link to the Trust's objectives for individual performance and training needs as part of the GMC's revalidation framework. The Trust had been offered the opportunity to go forward as an early implementer of the pilot, working with the Medical Director at Nottingham. The Board agreed in principle to become an early adopter, subject to the Chief Executive receiving additional information in relation to potential cost implications.

Finally, in response to Alan Barclay, Paul Lumsdon explained that the two breaches of seven day follow-up had been investigated further and found not to be breaches and there were no issues with regard to delayed discharges.

RESOLVED:

- **To note the contents of the report.**
- **To agree to continue to receive the report on a monthly basis.**
- **To receive a further report for the next Trust Board on the trajectory route to achieve the 4% target for cancelled appointments.**
- **To ask the Chief Executive to identify any potential cost implications by becoming early adopters of the Revalidation Pilot Project, whilst supporting the proposals in principle.**

**DMHT
09/110**

RATIFIED RISK MANAGEMENT COMMITTEE MINUTES FROM THE MEETING HELD ON 13TH AUGUST 2009, WITH ACTIONS MATRIX

The ratified minutes from the Risk Management Committee meeting held on 13th August 2009 were received and noted by the Board.

Lesley Thompson asked whether it would be possible to identify the top five risks in the minutes from the Risk Management Committee for the Board to note each month and Paul Lumsdon agreed to incorporate the necessary data. He also confirmed that the action in relation to the West London NHS Trust report had been completed.

**DMHT
09/111**

RATIFIED GOVERNANCE COMMITTEE MINUTES FROM THE MEETING HELD ON 13TH AUGUST 2009, WITH ACTIONS MATRIX

The ratified minutes from the Governance Committee meeting held on 13th August 2009 were received and noted by the Board.

**DMHT
09/112**

TRUST BOARD DATES FOR 2010 – GRAHAM GILLHAM

The dates for Trust Board meetings for 2010 were approved by the Board and would be published on the website.

The Chair thanked those present and 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.

Date and time of the next meeting

Date of the next scheduled meeting Wednesday, 4th November 2009 in the Boardroom, Trust Headquarters, Bramble House