

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, 29 April 2015

MEETING HELD IN PUBLIC

Commenced: 1:00 pm

Closed: 4:10 pm

Prior to resumption, the Board met to conduct business in confidence where special reasons applied

PRESENT:

Mark Todd	Chairman
Steve Trenchard	Chief Executive
Caroline Maley	Senior Independent Director
Maura Teager	Non-Executive Director
Tony Smith	Non-Executive Director
Jim Dixon	Non-Executive Director
Phil Harris	Non-Executive Director
Ifti Majid	Chief Operating Officer/Deputy Chief Executive
Claire Wright	Executive Director of Finance
Carolyn Green	Executive Director of Nursing and Patient Experience
Dr John Sykes	Executive Medical Director
Jayne Storey	Director of Transformation
Mark Powell	Director of Business Development and Marketing
Jenna Davies	Interim Director of Corporate & Legal Affairs

IN ATTENDANCE:

For item DHCFT 2015/055

For item DHCFT 2015/055

For item DHCFT 2015/055

For item DHCFT 2015/068

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Anna Shaw	Deputy Director of Communications
Sue Turner	Executive Administrator and Minute Taker
Ms N	Service User
Ann North	Community Psychiatric Nurse
Bev Green	Releasing Time to Care Lead
Joanne Kennedy	Consultant Child & Adolescent Psychiatrist
Helen MacMahon	CAMHS Service Line Manager
Lucia Whitney	Clinical Director/Consultant in Child & Adolescent Psychiatry
Scott Lunn	CAMHS IAPT Operational and Clinical Lead

VISITORS:

John Morrissey	Council of Governors
Carole Riley	Derbyshire Voice Representative
Winston Samuels	Member of the public
Dave Waldram	Member of the public

APOLOGIES:

Graham Gillham	Director of Corporate and Legal Affairs
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<p>DHCFT 2015/054</p>	<p><u>CHAIRMAN'S OPENING REMARKS, APOLOGIES, DECLARATIONS OF INTEREST</u></p> <p>The Chairman opened the meeting by welcoming all present. No declarations of interest were noted.</p>
<p>DHCFT 2015/055</p>	<p><u>MY RECOVERY JOURNEY</u></p> <p>The Board welcomed Ms N who described her recovery journey centred in Amber Valley.</p> <p>Ms N first became unwell after the birth of her second child and was admitted to the mother and baby unit in Kingsway. She found this difficult as she also had a 22 month old son and was not able to have her son with her. She felt the unit was a very negative place and it had a high turnaround of staff. She was later transferred to an adult ward in Burton and was unable to have either child with her on the ward. She was later transferred to Amber Valley, Derbyshire.</p> <p>Ms N recounted her difficulties with CPNs (Community Psychiatric Nurse), including staff sickness, issues relating to information governance, and general professional mistrust. Ms N explained that Ann North became her CPN and this was the key to her recovery as Ann North spent time building a relationship with her.</p> <p>Ms N went on to explain her experience at the Radbourne Unit and shared her concerns and offered ideas for improvement:</p> <ul style="list-style-type: none"> • All staff should be aware that each patient is on a journey through the process of their own recovery. • Layout of wards is so important – staff desks cause a mental and physical barrier • High turnaround of staff prevents the building of relationships and has a very negative impact on recovery • Staff need to create relationships with patients • Queueing for medication should not be necessary and causes a breach of confidentiality and was a degrading experience • Seclusion takes away the emphasis of what needs to be done on the wards. Give patients things to do and focus on their recovery <p>Ms N also shared her experience of the CAHMS service as her son was receiving treatment. Ms N explained that she had a number of concerns relating to her sons mental health, she felt that there was a delay in diagnosis of autism due to staff relating his issues with her mental health problems. Ms N felt she and her son should have been treated as a family and not separately.</p> <p>The Chairman was struck by the problem of confidentiality when queuing for medication and was disturbed by the issue of confidentiality of the CPN leaving patient notes behind. Mr Majid agreed there was no need for patients to be queuing for medication and that discussions should take place with patients to establish if there are any side effects or any other factors impacting a patient's recovery. The Chairman explained that Mr Majid and Ms Green were addressing the issue of the layout of wards and staff desks were in the process of being removed.</p>

	<p>The Chairman clarified that feedback from Ms N's experience of the organisation would be undertaken by Ms Green. The Trust intended to transform how integration takes place with families and the staff aspect and relationship with the family unit is being investigated. This work was just beginning and the Chairman hoped Ms N would help and provide feedback and return to a future board meeting and report on improvements.</p> <p>ACTION: Mr Majid would provide feedback to Ms N relating to the missing telephone help number on the webpage and Ms Green would provide feedback on other points raised</p> <p>ACTION: Ms Green and Mr Majid would look at creating a link within the PARIS system to connect family service users.</p> <p>RESOLVED: The Board expressed thanks to Ms N for sharing her story and thanked Ms North for accompanying her and for the fantastic work she was providing</p>
<p>DHCFT 2015/056</p>	<p><u>MINUTES OF DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST BOARD MEETING, HELD ON 25 MARCH 2015</u></p> <p>The minutes of the Derbyshire Healthcare NHS Foundation Trust Board meeting, held on 25 March were accepted and approved.</p>
<p>DHCFT 2015/057</p>	<p><u>MATTERS ARISING</u></p> <p><u>ACTION MATRIX</u></p> <p>All green completed items to be removed and updates were noted directly on the matrix.</p>
<p>DHCFT 2015/058</p>	<p><u>CHAIRMAN'S REPORT</u></p> <p>The Board noted the Chairman's report which summarised his meetings and visits during the month. The Chairman pointed out that he attended the Parent Participation Group meeting on 23 April (not Patient Participation Group as shown in his report) and talked to parents in CAMHS to discuss the way this service involved parents.</p> <p>RESOLVED: The Board received and noted the Chairman's report.</p>
<p>DHCF/ 2015/059</p>	<p><u>CHIEF EXECUTIVE REPORT</u></p> <p>The Chief Executive presented his regular monthly report.</p> <p>Mr Trenchard highlighted the following key points of the report:</p> <ul style="list-style-type: none"> • A visit to Erewash by the national Vanguard team on 20 and 21 April where the Trust joined Derbyshire Community Health Services NHS FT, Derbyshire Health United, Erewash Commissioners and General Practitioners setting out the vision and ambition for this new pilot. • Mr Trenchard was pleased to report that the Trust's Health Visiting Service had been awarded the Baby Friendly Initiative (Stage 3) and he

	<p>congratulated the teams involved who were providing an excellent service.</p> <ul style="list-style-type: none"> It was noted that the Trust's services remain very busy due to the high demand made on the teams and Mr Majid was pleased to point out that service levels had been maintained and the out of area service had not been utilised. <p>RESOLVED: The Board of Directors received and noted the Chief Executive's Report.</p>
<p>DHCFT 2015/060</p>	<p><u>INFORMATION GOVERNANCE QUARTER 4</u></p> <p>This report provided an update on Quarter 4 progress of performance towards meeting the requirements of the 2014-15 Version 12 Information Governance Toolkit as well as the work of the Information Governance Committee and Information Governance breach monitoring.</p> <p>Mr Majid was pleased to provide full assurance on the Trust's IG Toolkit submission and announced that the Trust now carried the highest rating for IG Governance in the country. He also wished to point out that the Trust applies the same standards to its partners and third party evidence is always maintained.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> Acknowledged the successful completion of the IG Toolkit Acknowledged the progress made with the IG work plan
<p>DHCFT 2015/061</p>	<p><u>PEOPLE STRATEGY UPDATE</u></p> <p>The report shared with the Board the organisation's planned approach to delivering the People Strategy and made particular reference to the Trust's values.</p> <p>The Board discussed various aspects of the report and Ms Storey pointed out that once the results of the staff survey were received the strategy would be formulated further. Mr Trenchard welcomed the overarching direction moving from one strategy to another and he liked the triangulation of culture and thought this would strengthen discussions with the CQC.</p> <p>Mr Harris raised the point that the report showed a high number of cases of disciplinary and grievances and Ms Storey explained that HR was tracking the number of cases to establish whether there was a continuing trend.</p> <p>Members of the Board discussed the high number of grievances and Mr Smith asked whether this was seen as negative or positive. Ms Storey replied that she considered this to be positive as it meant the organisation supported staff to raise concerns and grievances. Mr Smith requested that an analysis of resolved grievances should be generated through the People Forum.</p> <p>Mrs Teager asked if staff felt more comfortable raising concerns since the policy on raising concerns was enhanced. Ms Storey noted that the current trend showed that staff preferred a personal contact approach to raising concerns.</p>

	<p>Mr Smith wished to remind the Board that it was agreed at this week's meeting of the Audit Committee that an audit of sickness management would take place at the People Forum and would be fed through to the Finance & Performance Committee to provide assurance to the Board.</p> <p>Mr Trenchard raised the point that achieving 90% appraisal compliance was an important factor in the organisation's engagement approach. It was understood there were risks in achieving this figure and the board agreed that the People Forum would examine appraisal compliance and a report would be fed into the Finance & Performance Committee at its meeting in July and prior to that an interim update report would be submitted to the Board.</p> <p>ACTION: Appraisal compliance to be report to the Finance & Performance Committee in July with an interim update report submitted to the Board in May/June.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Acknowledged the continuing delivery of the People Strategy with particular emphasis on leadership and staff engagement within the update. 2) Noted the key metrics and proposed actions
<p>DHCFT 2015/062</p>	<p><u>REGISTER OF TRUST SEALINGS 2014-15</u></p> <p>The report provided the Trust Board with an account of the authorised use of the Foundation Trust Seal during 2014-15.</p> <p>RESOLVED: The Board of Directors noted the authorised use of the Foundation Trust Seal during 2014-15</p>
<p>DHCFT 2015/063</p>	<p><u>ANNUAL REVIEW OF REGISTER OF DIRECTORS' INTERESTS</u></p> <p>The register of directors' of interests was accepted and it was understood that interests relating to Mr Harris would be amended to list his activities during 2013-14.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Approved and recorded the declarations of interest as disclosed. These will be recorded in the Register of Interests which is accessible to the public at the Trust Head Office and will be listed in the Trust's annual report and accounts for 2014-15. 2) Recorded that all directors have signed as to compliance with the NHS Codes of Conduct and Accountability and Nolan principles; no relevant audit matters have been declared.
<p>DHCFT 2015/064</p>	<p><u>CORPORATE GOVERNANCE FRAMEWORK</u></p> <p>A refreshed Corporate Governance Framework was presented to the board for discussion and approval.</p> <p>The Chairman and members of the board acknowledged that more work is required to the Corporate Governance Framework and an improved version would be made available in July.</p>

	<p>ACTION: Jenna Davies will lead the development of an improved Corporate Governance Framework.</p> <p>RESOLVED: The Board of Directors agreed that an improved draft Corporate Governance Framework would be available in July and a final version completed in September.</p>
DHCFT 2015/065	<p><u>COMMITTEE SUMMARY REPORTS</u></p> <p>I. <u>Audit Committee:</u> The Board of Directors noted the summary report of the meeting of the Audit Committee held on 18 March.</p> <p>II. <u>Quality Committee:</u> The Board of Directors noted the annual report on Infection Prevention and Control 2014-15 and requested that the Chairman write a letter of commendation to Mrs Darn, Nurse Consultant in recognition of her programme of work in infection prevention and control.</p> <p>ACTION: The Chairman to write to Mrs Darn and commend her for her outstanding work.</p> <p>III. <u>Safeguarding Committee:</u> Mrs Teager provided the Board of Directors with a verbal report of the inaugural meeting of the Safeguarding Committee. She wished to escalate to the Board an area of concern regarding lack of funding for a named doctor in adult safeguarding. It was agreed that this matter would be discussed at the next Executive Leadership team meeting in order to source funding. Mrs Teager requested that final sign off for funding be covered at the next meeting of the Safeguarding Committee.</p> <p>ACTION: Ms Green to propose funding for a named doctor in adult safeguarding at the next meeting of the Executive Leadership team.</p> <p>RESOLVED: The Board of Directors noted the contents of the Committee Summary Reports.</p>
DHCFT 2015/066	<p><u>FINANCE DIRECTORS REPORT MONTH 12</u></p> <p>This paper provided the Board of Directors with an update on the end of year financial performance against the Trust's operational financial plan and is consistent with the information submitted in the quarter 4 Monitor return.</p> <p>A summary of capital expenditure for the financial year was also contained in the report.</p> <p>RESOLVED: The Board of Directors considered the content of the paper and received a good level of assurance on the outturn financial performance against the operational financial plan for 2014/15.</p>
DHCFT 2015/067	<p><u>INTEGRATED PERFORMANCE AND ACTIVITY REPORT AND SAFER STAFFING</u></p> <p>The purpose of this report is to define the Trust's performance against its Key Performance Indicators plus any actions in place to ensure performance is</p>

	<p>maintained. Compliance with the Trust's performance indicators is being actively monitored and corrective actions are put in place where appropriate. Areas covered in this report included, the Main Performance Indicators, Health Visitors, IAPT (Improving Access to Psychological Therapies) and Ward Safer Staffing.</p> <p>Mr Majid expressed concern that this month had not shown the same standard of delivery as in past and he proposed that a deep dive be conducted at the next meeting of the board to compare these results with previous performance.</p> <p>ACTION: Deep dive to take place at the next meeting covering the trend analysis over a number of years including benchmarking and forward looking trajectory.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Acknowledged the current performance of the Trust 2) Noted the actions in place to ensure sustained performance
<p>DHCFT 2015/068</p>	<p><u>COUNTY CAMHS STAFF LEVELS AND CAPACITY</u></p> <p>Members of the county CAMHS team attended the meeting to present the report that provided an in depth view of staffing, activity and performance relating to the County CAMHS (Child and Adolescent mental Health Services) services.</p> <p>The team were very proud of the training opportunities that had developed them into a more advanced skill-led workforce to meet the challenges identified in the report. Additional funding had enabled key members of the team to attend training but this had added to the service's understaffing problems.</p> <p>The team explained that there have been an increased number of complaints in the service largely due to the high turnover of staff. This resulted in service users and families expressing their concerns that the team has limited resources. The team has been working with 60% of the required capacity and this issue had been escalated to the CCG and commissioners. Mr Powell felt that anxiety within the team was evident and he offered his overarching support in liaising with commissioners to negotiate further funding for the CAMHS service.</p> <p>It was noted that CIP (Cost Improvement Programme) for CAMHS was valued at £158k. The Board was informed that the CIPs for CAMHS were being explored by the Quality Panel and the Executive Team would follow this up this process.</p> <p>In summary the Chairman agreed this was an exciting time for CAMHS but there were certain risks that investment would not be linked to strategic elements of the service. Absorbing continued spending management was challenging and members of the board wished to receive stronger assurance as to how this was grouped.</p> <p>The Chairman thanked the team for the vital work they are carrying out on behalf of the Trust.</p> <p>It was noted that some actions have been captured by the team and formed part of the report and the following actions were resulted from discussions:</p> <p>ACTION: The Board will support the CAMHS team to take up opportunities</p>

	<p>in services development without compromising the core services.</p> <p>ACTION: Risks to be captured in the BAF.</p> <p>ACTION: Jayne Storey and Maura Teager will spend time with the CAMHS team and produce a written report to the Board on specific areas of concern.</p> <p>ACTION: CAMHS succession planning will be taken through the People Forum.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Reviewed the contents of this report. 2) Considered the risks facing the service through poor staff retention / CIP programmes and National Programmes against the opportunities of service development within a high growth potential service area which will be able to improve the quality of care to a wider population. 3) Supported the ongoing Service Transformation programme with assurances that we are aiming to provide a fully NICE compliant service and improve the quality of care and improve treatment outcomes for children and families accessing services from not only our organisation but also our partner agencies.
<p>DHCFT 2015/069</p>	<p><u>FOR INFORMATION</u></p> <p>I. Board Forward Plan</p> <ul style="list-style-type: none"> • Annual reports: Summary of any key changes in response to any comments raised at the Audit Committee. • Safeguarding Committee summary report to be added to the forward plan. • Strategy Update deferred to June. <p>II. Board Assurance Framework</p> <p>CAMHS issues to be identified in the BAF Gap in control of sickness levels</p> <p>III. Deep Dive Selection</p> <p>It was agreed that the next deep dive would involve an analysis of the performance trend covering a number of years and would include benchmarking and a forward looking trajectory.</p>
<p>DHCFT 2015/070</p>	<p><u>CLOSE OF THE MEETING</u></p> <p>The Chairman thanked all of those present for their attention and comments and closed the public meeting at 4:10 pm.</p>
<p><u>DATE OF NEXT MEETING</u></p> <p>The next meeting of the Board in public session is scheduled take place on Wednesday, 27 May 2015 at 1.00 pm. in Conference Rooms A & B, R&D Centre, Kingsway Site, Derby,</p>	

DE22 3LZ (confidential session to commence earlier at 10.30 am).