

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, 27 May 2015

MEETING HELD IN PUBLIC

Commenced: 1:00 pm

Closed: 4:45 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
Jenna Davies	Interim Director of Corporate & Legal Affairs

IN ATTENDANCE:

Anna Shaw	Deputy Director of Communications
Sue Turner	Executive Administrator and Minute Taker
For item DHCFT 2015/078&079 Kate Majid	Head of Transformation & Patient Involvement
For item DHCFT 2015/087 Carolyn Gilby	Divisional Director
For item DHCFT 2015/087 Chris Wheway	Divisional Director
For item DHCFT 2015/087 Peter Charlton	General Manager IM&T
For item DHCFT 2015/087 Vicky Williamson	Information Manager

VISITORS:

John Morrissey	Council of Governors
Carole Riley	Derbyshire Voice Representative

APOLOGIES:

Graham Gillham	Director of Corporate and Legal Affairs
Mark Powell	Director of Business Development and Marketing

<p>DHCFT 2015/071</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 2015/072</p>	<p><u>MY RECOVERY JOURNEY</u></p> <p>Kate introduced herself and informed the Board she was an award winning children's illustrator and designer. She explained that she had been diagnosed with Acute and Transient Psychotic Disorder and since 2005 she had suffered four severe psychotic relapses and several minor episodes. During these episodes she forgets how to eat and loses all track of time, instead her sense of creativeness is heightened and becomes highly stimulated. She copes with this by drawing and recording every moment in a doodle diary and with photography. She wanted to share with the Board how drawing and creativity helps her and suggested using drawing and creativity to help develop the Trust's services.</p> <p>Kate described things and events that made her feel safe and emphasised how drawing, writing and photography helped calm her down and speeded up her recovery. She also uses art as a tool to prevent her becoming ill and records positive things that have happened to her.</p> <p>Kate had many ideas that might improve the Trust's services and help service receivers feel safe. She stressed that feeling safe was very important. She wanted to make the point that service receivers should be reassured by staff and be told they are being looked after and that in time their condition will improve. Kate also believed the use of gentle signs would put patients at ease and suggested the Trust displayed signs to say there are no cameras on the ward or around the hospital as the use of cameras can be very disturbing to some patients.</p> <p>Kate felt that a quiet expressive room where patients could draw and paint on black board or wipe board walls would be an extremely helpful aid to recovery. This would also allow people time off the ward and it would give structure to their day, allow them to relax and pass time in a sociable way. She also provided evidence of a an idea of offering new patients a journal to use so they have something to write or draw in to express their feelings and this could be a good way to help people start to talk to nurses and professionals. Kate also shared other ideas of treatments such as holistic style treatments. She added that she really enjoyed helping and being with people who have suffered similar problems to her and this had helped her recovery. She now wanted to pass on and share what she has learnt through her mental health condition.</p> <p>Steve Trenchard was very taken with the idea of creating spaces for people to draw and express themselves in different ways and suggested that the Innovation Fund could perhaps be used to pursue funding. He thought Kate had some good ideas about creating a safe environment for patients. Carolyn Green agreed it would be good to look at different ideas for using art as part of the Trust's core business.</p> <p>The Chairman was struck by the interaction between art and music and he thought this was a very useful area of therapy. He felt that the messages Kate relayed about safety and wellness definitely resonated with the Board and he hoped she could help the Trust learn how to make people feel safe and help</p>

	<p>people have an easier and quicker journey to wellness. Ifti Majid was keen to take this message forward and suggested that Kate's presentation be shared with Sara Baines the Lead in Recovery and Wellbeing.</p> <p>The Chairman thanked Kate for her presentation and for the work she was carrying out and for the support she was providing for the recovery services.</p> <p>ACTION: Kate's presentation to be sent to Sara Baines, Recovery and Wellbeing Lead.</p> <p>RESOLVED: The Board expressed thanks to Kate for sharing her story and for the ideas she had proposed.</p>
<p>DHCFT 2015/073</p>	<p><u>MINUTES OF DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST BOARD MEETING, HELD ON 29 APRIL 2015</u></p> <p>The minutes of the Derbyshire Healthcare NHS Foundation Trust Board meeting, held on 29 April were accepted and approved subject to</p> <p>DHCFT 2015/068: County CAMHS Staff Levels And Capacity – wording of the second action "John Sykes and Maura Teager will spend time with the CAMHS team and produce a written report to the Board on specific areas of concern." to be substituted with "<i>Jayne Storey and Maura Teager will spend time with the CAMHS team and produce a report to the Board on specific areas of concern.</i>"</p>
<p>DHCFT 2015/074</p>	<p><u>MATTERS ARISING</u></p> <p>Action matrix to be updated in line with the following amended action.</p> <p>DHCFT 2015/068: County CAMHS Staff Levels and Capacity - Jayne Storey and Maura Teager will spend time with the CAMHS team and verbally update the Board on their follow up visit prior to producing a report on specific areas of concern. An action plan was discussed at the Quality Committee and provisional dates have been planned. A report on areas of concern will be made at the July Board. CAMHS succession planning will be taken through the People Forum and will be incorporated into the work Jayne Storey and Maura Teager are carrying out.</p> <p>All green completed items to be removed and all other updates were noted directly on the matrix.</p>
<p>DHCFT 2015/075</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 wished to add that he had also attended the Annual General Meeting of First Steps Derbyshire and this had been a great opportunity to see the work they had carried out at first hand.</p> <p>John Sykes referred to the meeting the Chairman held with Lesley Thompson, Chair of the 21st Century Board and asked how GPs would develop into the integrated care. The Chairman replied that the subject of discussions held with Lesley Thompson had been the emerging process of the 21st Century Plan and wider 21st Century governance arrangements.</p>

	RESOLVED: The Board received and noted the Chairman's report.
DHCF 2015/076	<p><u>CHIEF EXECUTIVE REPORT</u></p> <p>Steve Trenchard presented his regular monthly report and drew attention to speculation on funding for mental health services now that the new government has been announced. He emphasised the fact that the Trust's services remain extremely busy and that a huge demand is made on staff to ensure services are maintained at safe levels. He was pleased to report that in-patient services had reduced as had the amount of people treated outside the Derbyshire area.</p> <p>Maura Teager asked what lessons could be learned from this and how could capacity be planned in the medium and longer term. Ifti Majid replied that twice-weekly operational meetings had continued in response to the increased demand on staff and discussions were held about the structures that are in place. Flexibility of staff movement had been crucial and had provided an understanding of where staff needed to be recruited and this level of flexibility needed to be sustained. Carolyn Green made the point that regulators would consider the Trust was under significant pressure with a bed capacity rate over 85% and she asked when this was being looked at and whether a review of the risks and potential mitigations had been put in place. Steve Trenchard replied that the thrust of the transformation programme would be to bulk up services to address capacity in the community and this would reduce occupation of beds. In addition the Finance & Performance Committee would be looking at issues around bed occupancy and this was also an issue that the executive team will work together on. Kate Majid pointed out that this was also a piece of work that the Sim:pathy project would be reporting on to gain independent modelling to increase assurance that the proposed service changes are viable and safe. It would also form part of the report that the Finance & Performance Committee would look at and this would also be brought to the Board in November.</p> <p>Discussions took place around the demands on people and whether the leadership teams were capable of managing the transformation process and at the same time also manage front line issues. The Board agreed they needed to be assured that the executive team has resolutions to run the transformation programme but decided they could not be assured of this yet as the big challenge would be for the clinical leadership to carry the transformation programme forward. Members of the Board agreed they should be prepared to understand the risks within the operation and be aware of any potential for harm to service receivers.</p> <p>RESOLVED: The Board of Directors received and noted the Chief Executive's Report.</p>
DHCFT 2015/077	<p><u>STAR BOARD FIVE YEAR STRATEGY</u></p> <p>The purpose of this report is to share with Trust Board the five year strategy produced by KPMG on behalf of STAR Board for the South unit of Planning.</p> <p>The extensive report set out:</p> <ul style="list-style-type: none"> • The case for change

	<ul style="list-style-type: none"> • Financial analysis case for change • Strategy for the future (transformational priorities) • The enablers to making the change happen • A review of governance processes • Next steps <p>Members of the Board considered the content of this five year strategy alongside the Trust's five year plan to ensure there is alignment and gained assurance of the progress being made. Ifti Majid made the point that he considered this to be an acute hospital rescue plan and stressed that it was important to establish whether it posed a risk to mental health services and the Trust's parity of esteem. He asked the Board to focus on how to link this plan into the (BAF) Board Assurance Framework and the organisation's financial planning.</p> <p>The Board welcomed the focus on governance contained in this exercise and it was agreed that the executive team would explore ways of working with primary care to provide this service. Steve Trenchard pointed out that the content of this five year strategy should be adjusted in line with the 21st Century Plan and the Trust's refreshed strategy to ensure they are aligned.</p> <p>ACTION: It was agreed that the alignment of the STaR and 21st Century plans and the wider health economy following the election be tested with the Trust's refreshed strategy.</p> <p>RESOLVED: The Board of Directors discussed and noted the report.</p>
<p>DHCFT 2015/078</p>	<p><u>STRATEGIC REIIEW</u></p> <p>Kate Majid presented this paper to provide the Board of Directors in order to provide assurance of progress against the strategic outcomes. The strategy set out the organisation's plans for 2013 to 2016 and has at its heart the people who use the Trust's services, their families and carers.</p> <p>The report reflected the current position across the organisation with regard to the Trust's achievement of the strategic outcomes and pillars of delivery. The report also provided examples of evidence of progress.</p> <p>The Board considered the report showed evidence of triangulation, useful charts and this should continue. Caroline Maley commented that she was pleased to see references to the compassionate care training.</p> <p>It was recognised that strategy progress reporting is currently being refreshed by the executive team in preparation for Q1 assurance reporting. Discussions were held on the style of the report and its relationship to CQC inspection requirements.</p> <p>RESOLVED: The Board of Directors noted the content of the report and received assurance on progress to date against the Trust's strategic outcomes.</p>
<p>DHCFT 2015/079</p>	<p><u>INTEGRATED SERVICE DELIVERY</u></p> <p>This paper was presented by Kate Majid to provide the Trust Board with assurance of progress against the Strategic Outcomes with respect to Integrated</p>

	<p>Service Delivery and provided an update against several key advances in the development of Neighbourhood working.</p> <p>The Board recognised these were all very complex issues. Kate Majid highlighted the challenges contained in the report and confirmed progress was on track for the transformation leadership team to be in place for July and she ran through the timelines for the transition of the project teams. She also pointed out that an update on the skills mix and transition plan would be reported to the Finance & Performance Committee at its next meeting in July.</p> <p>Caroline Maley made the point that a deep dive of the transformation process risk was due to take place at the July meeting of the Audit Committee. She suggested that a Board Development session be held to cover the strategic risk of transformation and the Chairman and Tony Smith echoed this suggestion.</p> <p>ACTION: Jayne Storey to plan a Board Development Session to cover the strategic risk of the transformation change process.</p> <p>RESOLVED: The Board of Directors received assurance from the paper in respect to achievement of and alignment to the Trusts Strategic Outcomes as outlined above regarding the development of a Model of Integrated Service Delivery.</p>
<p>DHCFT 2015/080</p>	<p><u>PEOPLE STRATEGY</u></p> <p>The purpose of this report is to share with the Board the Trust's planned approach to delivering the People Strategy, with particular focus on its values:</p> <ul style="list-style-type: none"> • We deliver excellence • We involve our people in making decisions • We focus on our people • We put our patients at the centre of everything we do <p>Jayne Storey emphasised that the People Strategy has five primary aims, one being focussed on educating and developing people and this month it focussed on delivery of the education strategy and an update on the Trust's key people metrics.</p> <p>The Board discussed various aspects of the report and Phil Harris asked if all managers have the opportunity to undertake "management of people" training. In response, Jayne Storey replied that she would have to check this detail and it was pointed out by Maura Teager that joint training on performance management and effectiveness with Staffside representatives was very beneficial.</p> <p>Jayne Storey informed the Board that the strategy will be in place by January 2016 and will involve all aspects of the "people". Talent management will run through from recruitment through to retirement and the support of peoples' career paths would be more visible. Succession planning will also be developed further to involve a range of key posts. In addition, the health check would identify what needs to be done and a plan developed to support.</p> <p>RESOLVED: The Board of Directors: 1) Acknowledged the continuing delivery of the People Strategy with</p>

	<p>particular emphasis on progress of the Education Strategy</p> <p>2) Noted the key metrics and proposed actions</p>
DHCFT 2015/081	<p><u>COMMITTEE SUMMARY REPORTS</u></p> <p>I. <u>Audit Committee:</u> The summary report of the meeting of the Audit Committee held on 28 April, together with the minutes of the meeting was noted by the Board. It was agreed that in future the full minutes of the Audit Committee would be presented to the Board as a matter of course. The Audit Committee Annual Report will be presented to the Board at its next meeting.</p> <p>II. <u>Quality Committee:</u> The Board noted the summary report of the meeting of the Quality Committee held on 7 May and recognised that the meeting had a very complex agenda and was well attended.</p> <p>III. <u>Safeguarding Committee:</u> The Board was pleased to note from the summary report of the meeting of the Safeguarding Committee held on 17 April that funding for a named doctor in adult safeguarding had been approved.</p> <p>RESOLVED: The Board of Directors noted the contents of the Committee Summary Reports.</p>
DHCFT 2015/082	<p><u>BOARD ASSURANCE FRAMEWORK</u></p> <p>The purpose of this report is to meet the requirement for Boards to produce an Assurance Framework. 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.</p> <p>Carolyn Green made the initial presentation of the Board Assurance Framework to the Board for 2015/16 and highlighted amendments that were made to the BAF when it was presented to the Audit Committee on 22 May. It was agreed that the Audit Committee would focus on risks rated high or catastrophic and these will be included on agenda during 2015/16.</p> <p>It was agreed that the timing of the BAF would be realigned with the timing of the meetings of the Audit Committee for next year.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Agreed the new Board Assurance Framework for 2015/16 2) Agreed for the Board and Audit Committee to continue to receive a formal update on the BAF three times a year during 2015/16 3) Supported the 'deep dive' review and challenge by the Audit Committee of only risks graded high, with lower graded risks being reviewed by the relevant named responsible committee.
DHCFT 2015/083	<p><u>POSITION STATEMENT ON QUALITY</u></p>

	<p>The purpose of this report is to provide the Trust Board of Directors with an update on the continuing work to improve the quality of its services in line with the Trust Strategy, Quality Strategy and Framework and strategic objectives.</p> <p>Carolyn Green reported that the Quality Report had now been completed and positive feedback had been received from commissioners. Claire Wright asked that the Council of Governors' comments on the Quality Report be captured in a more formal way next year-end. Carolyn Green explained that the inclusion of a joint agreed statement from the Council of Governors had not been written into the guidance this year but had been requested by the auditors. She appreciated Claire Wright raising this point and she assured the Board that she and Jenna Davies would ensure that the Council of Governors could provide their agreed statement on the Quality Report next year.</p> <p>Steve Trenchard suggested that the Chairman holds discussions with the lead governor to ensure authority of the entire Council of Governors.</p> <p>ACTION: Jenna Davies will timetable a meeting for Council of Governors to receive the Quality Report 2015/16 to enable a collective response from governors.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Noted the Quality Position Statement 2) Board members were able to offer the Executive Directors additional direction on any aspects of quality listed in this report or additional information that would be beneficial to the Board, to be assured that the Trust executive leaders understand the Quality issues and were fully briefed on the Trust's approach to quality management and the delivery of the Trust's quality strategy.
<p>DHCFT 2015/084</p>	<p><u>UPDATE ON COACHING COMMUNICATION DIFFICULTIES WITHIN AUTISM</u></p> <p>John Sykes provided a verbal update on the communication training that would be introduced in the north and the south to help medical practitioners communicate with people suffering within the autism spectrum disorder. A small group of people with expertise in specialist communication will coach clinicians to work through these challenges. Maura Teager made the point that it would be interesting to see when the effects of this training would show an improvement in the service. Carolyn Green added that a report had been submitted to the Quality Committee on autism, that set out the statutory requirements that came into effect at the end of March 2015 and knowledge acquisition would be enabled through the redesign of an eLearning package and additional training,</p> <p>RESOLVED: The Board of Directors was content with this update and considered responsible action had been taken and good progress had been made.</p>
<p>DHCFT 2015/085</p>	<p><u>FINANCE DIRECTORS REPORT MONTH 1</u></p> <p>This paper provided the Trust Board with an update on current financial performance against the Trust's operational financial plan as at the end of April 2015.</p>

	<p>Claire Wright made the Board aware of new financial reporting that would take place in the Finance & Performance Committee to assist in challenging key strategic aspects of financial performance and financial risks. She explained that the Executive Leadership Team now also receive additional financial performance information listing all key assumptions in the financial forecast.</p> <p>Reference was made to the new Continuity of Service Risk Rating headroom graph (CoSRR) that served to illustrate the impact of improving or worsening revenue and cash. Claire Wright highlighted the work carried out by Rachel Leyland to show the metric range and the Board recognised that a great deal of work had been carried out by the finance team in bringing this report together.</p> <p>RESOLVED: The Board of Directors considered the content of the paper and considered their level of assurance on the current and forecast financial performance for 2015/16.</p>
<p>DHCFT 2015/086</p>	<p><u>REFERENCE COST SIGN OFF</u></p> <p>The Department of Health guidance relating to Reference Cost submissions for 2014-15 requires that the Trust Board or other appropriate sub-committee is required to approve the costing processes that support the reference cost submission.</p> <p>Claire Wright explained that there were no changes to the costing principles previously audited by CAPITA. The costing and information capture systems have not changed from the previous year's submission and the last CAPITA audit. Also contained in the report is the check list which is required to be completed as part of the submission along with the rationale for the chosen responses. Claire Wright also highlighted the provider licence requirements for costing information and standards</p> <p>RESOLVED: The Board of Directors confirmed they considered that:</p> <ol style="list-style-type: none"> 1) Costs have been prepared with due regard to the principles and standards set out in Monitor's Approved Costing Guidance 2) Appropriate costing and information capture systems are in operation 3) Costing teams are appropriately resourced to complete reference costs 4) Procedures are in place such that the self-assessment quality check list will be completed at the time of the reference cost return
<p>DHCFT 2015/087</p>	<p><u>INTEGRATED PERFORMANCE AND ACTIVITY REPORT AND SAFER STAFFING</u></p> <p>Ifti Majid presented his report that defined the Trust's performance against its Key Performance Indicators and actions put in place to ensure performance is maintained. The report showed that 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 and Ward Safer Staffing. In addition the report took a longitudinal look at performance compliance and explored reporting styles used by other organisations.</p> <p>Ifti Majid was pleased to note good performance in month one. DNAs (Did Not Attend) have improved which suggests that text message reminders have been effective and cancellations were now within target and the team was considering</p>

extending the text message reminder system across the Trust's services.

The report showed that IAPT (Improving Access to Psychological Therapies) recovery rate remains good and Ifti Majid felt this was a good indication of the hard work the teams have put in over the last few months.

The Chairman sought assurance on how breaches of particular doctors on letter-writing were being addressed. Ifti Majid replied that new software had provided better detail on individual performance and management issues were being dealt with and progress was being made.

Claire Wright cited that the overall performance of IAPT services in financial terms was not fully assured, in contrast to the good recovery rate where assurance was achieved.

Carolyn Gilby, Chris Wheway, Peter Charlton and Vicky Williamson attended the meeting and summarised their analysis of performance reporting carried out by other organisations by stating that the Trust was performing well if the other 10 comparison reports were used as a benchmark.

The Board recognised that staff have been very resilient and had not let performance slip away. There is evidence that people are working together and issues being raised from the staff survey would be good indicators of problems to be addressed. Carolyn Green believed that the Trust's work carried out on safer staffing would be enviable to other trusts and credit should be given to the team as evidence showed that problems were being managed whilst they were under pressure.

Steve Trenchard made the point that it was evident that people feel they are working harder, teams are under resourced and working under stress and the report demonstrates how complex these issues are. He felt the challenge would be to empower leaders to understand and deal with situations relating from this audit to make a difference and suggested this should be built into the people strategy. He added that discussions were taking place at the Executive Leadership Team meetings (ELT) on trajectory and staff rates and this would also be reported through the Finance & Performance Committee.

Ifti Majid pointed out that the analysis identified many differing approaches to the way performance is reported to other trusts' boards. Discussion took place on combining activity performance, key performance indicators and finance and giving consideration to delegating the finer detail through a smaller committee. It was agreed that Ifti Majid would work with Jenna Davies to study the best examples of good practice carried out by other organisations to redesign the structure of the Trust's performance reporting but the Board were aware that any significant changes should be introduced post CQC visit. In addition it was agreed that Ifti Majid would meet with Jim Dixon to look to overlay a summary dashboard on the Finance & Performance Committee activity report.

ACTION: Ifti Majid and Jenna Davies will take some of the best examples of reporting from the analysis and create a narrative using benchmarking where possible to redesign performance reporting within the Trust to be introduced post CQC visit.

ACTION: Ifti Majid and Jim Dixon to consider the summary dashboard on the Finance & Performance Committee activity report.

	<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 3) Considered the longitudinal study and growing performance risk 4) Considered the feedback from other organisations performance reporting structures and agreed changes they would like to see.
DHCFT 2015/088	<p><u>FOR INFORMATION</u></p> <p>I. Board Forward Plan</p> <ul style="list-style-type: none"> • Audit Committee Annual Report was due to have been presented to today's meeting and is now deferred to June. • Committee Annual Reports will be reported to the Audit Committee in May for 2016/15. The Executive Leadership Team will look at the issue of timing of the annual reports of the committees. • Carolyn Green forewarned the Board that the Safeguarding Adults report might need to be deferred to July. • It was suggested by Jayne Storey that the Communication Strategy be brought back to the Board six-monthly for progress and impact. <p>II. Board Assurance Framework: No additional risks to be added to the Board Assurance Framework</p> <p>III. Deep Dive Selection: It was agreed that the next deep dive would be a Staff Health Check and would be conducted by Jayne Storey.</p>
DHCFT 2015/070	<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 4:45 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, 24 June 2015 at 1.00 pm. in Conference Rooms A & B, R&D Centre, Kingsway Site, Derby, DE22 3LZ (confidential session to commence earlier at 10.30 am).</p>	