

DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

**Held in the Dovedale Room, Miraj Hotel & Leisure Club Ashbourne, Derby Road, Ashbourne,
Derbyshire, DE6 1XH**

On Wednesday, 30th March 2011

MEETING HELD IN PUBLIC

Opened: 2.08 pm Closed: 3.30 pm

<u>PRESENT:</u>	Alan Baines	Chairman
	Kathryn Blackshaw	Deputy Chief Executive/Executive Director of Business Strategy
	Graham Foster	Non-Executive Director
	Helen Issitt	Director of Workforce & Organisational Development
	Paul Lumsdon	Executive Director of Nursing and Quality
	Ifti Majid	Executive Director of Operations, Performance and IM&T
	Mike Shewan	Chief Executive
	Tony Smith	Non-Executive Director
	John Sykes	Executive Medical Director
	Maura Teager	Non-Executive Director
	Lesley Thompson	Non-Executive Director
	Tim Woods	Executive Director of Finance
	Graham Gillham	Director of Corporate and Legal Affairs
<u>IN ATTENDANCE</u>	Alison Baker	Executive Business Assistant (Minute Taker)
	Ash Bower	Head of Communications & Engagement (Item DHCFT 2011/13)
	Hayley Darn	Infection Control Nurse (Item DHCFT 2011/16)
	Richard Davis	Prime Healthcare Group
	Alana Gilbert	Prime Healthcare Group
	One member of the public	
<u>APOLOGIES:</u>	Mick Martin	Non-Executive Director

DHCFT 2011/10	<u>OPENING REMARKS</u> The Chairman welcomed those present to the meeting. There were no declarations of interest to be noted.
DHCFT 2011/11	<u>MINUTES OF THE MEETING OF DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST, HELD ON 23rd FEBRUARY 2011</u> The minutes from the meeting of Derbyshire Healthcare NHS Foundation Trust, held on 23 rd February 2011, were approved with one amendment. <i><u>DHCFT 2011/04 Governance</u></i> Fourth paragraph, second bullet to read "Maura Teager said that her interest of "Interim Assistant Director with NHS Derby City" ceased at May 2010.
DHCFT 2011/12	<u>MATTERS ARISING – ACTIONS MATRIX</u> <i><u>2010/125 Care Quality Commission Benchmarking Report 2009/10</u></i> Helen Issitt reported the Workforce and Organisational Development team were undertaking work in relation to the Staff Survey via the Workforce Strategy Group

	<p>including the development of a workforce dashboard. Reports would be fed through to the Board of Directors through this route.</p> <p><u>2011/06 Integrated Performance Report</u> Paul Lumsdon confirmed the trajectory status arrows had been amended.</p>
DHCFT 2011/13	<p><u>DRAFT COMMUNICATIONS AND ENGAGEMENT STRATEGY 2011/2014 – KATHRYN BLACKSHAW</u></p> <p>Kathryn Blackshaw introduced the draft Communications and Engagement Strategy for 2011/2014, which was presented in more detail by Ash Bower, Head of Communications & Engagement. The Board of Directors noted the working document, which would be populated more fully over the next 3 – 6 months, with engagement and input from external stakeholders and the Council of Governors. The target for 8,000 members by the end of March 2011 had been exceeded and initiatives would continue in the Communication Team to increase this further.</p> <p>Suggestions for amendments were made and Ash Bower agreed to make the requested changes. The Chairman requested further suggestions to be forwarded outside the meeting.</p> <p>In response to Mike Shewan, Ash Bower outlined the team’s plans for re-launching the Trust’s website and the use of Social Media, e.g. Facebook.</p> <p>The Board welcomed the Strategy document and congratulated Ash Bower and the Communications Team on the progress made. An action plan, including ambitious targets, was requested, together with a six monthly progress report.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To approve the content of the draft Communications and Engagement Strategy, and the approach suggested. ➤ To agree a wider consultation exercise with stakeholders on the approach outlined in the Communications and Engagement Strategy and the development of an action plan with targets. ➤ To receive a six monthly progress report on the implementation of the Strategy.
DHCFT 2011/14	<p><u>CORPORATE OBJECTIVES 2010/11 END OF YEAR REPORT – MIKE SHEWAN</u></p> <p>Mike Shewan presented the end of year report on the corporate objectives for 2010/11, and was pleased to confirm all objectives had been delivered as planned. Overall, this represented a tremendous year of performance for the Trust, especially given the difficult financial climate across the NHS.</p> <p>Kathryn Blackshaw provided further clarification in relation to how objective 27 could be evidenced, citing the engagement with service users and Derbyshire Voice during the implementation of the adult care pathway as examples.</p> <p>In response to Graham Foster, Mike Shewan acknowledged it was difficult to contain some of the Trust’s corporate objectives within a 12 month period, as some aspects would often be repeated each year. It was agreed that the wording of the objectives would be reviewed to ensure clarity in this respect.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the Corporate Objectives 2010/11 end of year report.
DHCFT 2011/15	<p><u>QUALITY OVERVIEW AND UPDATE – MICK MARTIN</u></p> <p>In the absence of Mick Martin, the Quality Overview and Update was deferred to the next meeting.</p>

<p>DHCFT 2011/16</p>	<p><u>INFECTION CONTROL ANNUAL REPORT 2010/11 – PAUL LUMSDON</u></p> <p>In his introduction to the Infection Control Annual Report for 2010/11, Paul Lumsdon referred to the programme of Quality Visits attended by members of the Board of Directors during the year, upon which the subject of ‘infection control’ was a regular feature. The Board received a précis of the year end Annual Report by Hayley Darn, Infection Control Nurse, and were pleased to note the Trust’s level of performance throughout the year. Hayley Darn commended the commitment from staff and outlined the work underway with the Communications Team to ensure proactive infection control messages were cascaded across the organisation.</p> <p>In response to the Chairman, Hayley Darn explained the efforts underway to address staff training with ongoing monitoring through the Infection Control Committee. Paul Lumsdon and Helen Issitt added that training modes were being reviewed with e-learning packages and the overhaul of compulsory training.</p> <p>Maura Teager praised the work undertaken by Hayley Darn and the powerful structure she had put in place to deliver a difficult agenda. The Board of Directors congratulated Hayley Darn for a positive year and noted the progress made.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To approve the annual report for infection prevention and control. ➤ To accept the audit plan for 2011/12.
<p>DHCFT 2011/17</p>	<p><u>ELIMINATING MIXED-SEX ACCOMMODATION – DECLARATION EXERCISE (GATEWAY REFERENCE: 15552) – PAUL LUMSDON</u></p> <p>In his presentation of the Trust’s Statement of Compliance, Paul Lumsdon outlined how changeable the national definitions had been. Trusts were required to make their declarations by 1st April 2011 with non-compliance resulting in financial penalties.</p> <p>The Board of Directors were pleased to note the confirmation from Paul Lumsdon that the Trust was compliant with the Government’s requirement to eliminate mixed-sex accommodation, except when it was in the patient’s overall best interest, or reflected their personal choice. Any breaches would be reported and an audit mechanism would be in place to review records for misclassification, the results of which would be published.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To endorse the Statement of Compliance.
<p>DHCFT 2011/18</p>	<p><u>COMPLIANCE WITH THE HEALTH AND SOCIAL CARE ACT 2008, REGULATED ACTIVITIES REGULATIONS 2010, AND THE CARE QUALITY COMMISSION REGISTRATION REGULATIONS 2009 – PAUL LUMSDON</u></p> <p>The Board were updated in relation to the new registration system, introduced in April 2010. As a result of the increased standards, the Trust would receive visits from the Care Quality Commission (CQC) to assess its compliance with the standards, and a visit to the Hartington Unit had already been announced. Paul Lumsdon was confident the programme of internal Quality Visits would provide a platform of preparedness but emphasized the differences between Quality Visits and CQC Visits. John Sykes suggested it would be helpful to share the lessons learnt from other Trusts visited to aid awareness for staff.</p> <p>Paul Lumsdon agreed to provide feedback to the Board meeting in April. [Subsequently the CQC visited the Hartington Unit – report for the April Board meeting]</p>

	<p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the current position and next steps and agree to receive a further update in April 2011, including the results of the CQC visit.
<p>DHCFT 2011/19</p>	<p><u>CARE AND COMPASSION? – REPORT ON THE HEALTH SERVICE OMBUDSMAN ON TEN INVESTIGATIONS INTO NHS CARE OF OLDER PEOPLE</u></p> <p>Paul Lumsdon referred to the report circulated to the Board of Directors in advance of the meeting in relation to a national exercise undertaken by the Health Service Ombudsman and the subsequent report published. In response to the report, Mark Ridge, Head of Patient Experience, had drafted an action plan, which had been presented to the Risk Management Committee on 10th March 2011. The next steps were outlined, including cascade of the report to all teams and consideration of the topics in the work-plan for the Improving Patient Experience Committee. Paul Lumsdon confirmed the next Integrated Quality Governance report to the Board was scheduled to include a section on complaints and compliments.</p> <p>The Board agreed the report highlighted disturbing areas of care in some organisations. Lesley Thompson confirmed her intention to attend the Improving Patient Experience Committee to ensure the report was given a sufficiently high profile. The links between professional care and management skills were acknowledged. Helen Issitt reiterated the work underway to engage staff in organisational values and suggestions were made regarding learning methods to drive personal responsibility for the delivery of high quality care. The Chairman requested every Director to read the full report and noted that half the Trusts criticised were Foundation Trusts.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To read and consider the full report and to note the action plan attached in response to the recommendations made. ➤ To receive the Integrated Quality Governance report at the April meeting, including a section on complaints and compliments.
<p>DHCFT 2011/20</p>	<p><u>INTEGRATED PERFORMANCE REPORT (MONTH 11) – IFTI MAJID/TIM WOODS</u></p> <p>Ifti Majid presented the transition report to the Board and explained the movement to a new style of reporting, including ‘live’ data during the confidential session.</p> <p>The key themes were noted, including the improvement in cancelled clinics from the previous month, and the over-achievement of locally set target for Early Interventions newly confirmed cases.</p> <p>The Board noted the exception report contained ‘sample’ data in order to demonstrate how the new report would look and was not ‘actual’ data being presented. Ifti Majid was asked to make this clear. The language used in the report would also be reviewed to aid the reader’s understanding. Comments and feedback from Board members was requested to be forwarded to Ifti Majid.</p> <p>Turning to the financial position, a revised dashboard was tabled by Tim Woods. The Board noted the surplus position of £973k, in line with the Trust’s key financial targets. This equated to a Monitor risk rating of 3.6, forecast to rise to 3.8 by the end of March, which would be rounded up to 4. The Trust’s achievement of the cost improvement programme was also in line with trajectory to meet the target of £3.5m at year end.</p> <p>The Board noted the stable financial position and thanked Tim Woods and his team for the significant achievement throughout the year.</p>

	<p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To note the contents of the report and the achievements to date. ➤ To agree to continue to receive the report on a monthly basis.
DHCFT 2011/21	<p><u>INFORMATION GOVERNANCE (IG) TOOLKIT 2010/11 PROGRAMME – IFTI MAJID</u></p> <p>Ifti Majid presented the annual Information Governance (IG) Return, due for submission on 31st March 2011. The Board of Directors were delighted to note the Trust had achieved a minimum 'level 2 or above' score in all 45 relevant standards, producing a score of 68% compliance, and all 22 Statement of Compliance standards had been achieved at the required minimum attainment level of '2 or above'. These scores amounted to an overall rating of "satisfactory" for compliance with the IG Toolkit V8.</p> <p>The challenges ahead were discussed and Ifti Majid referred to the earlier discussions regarding cultural change and embeddedness, together with values to leadership. Graham Foster added that internal audit had undertaken a review and subsequent work was planned, which would provide additional assurance.</p> <p>The Board congratulated Ifti Majid on the achievements reported during a challenging year.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> ➤ To authorise submission of the Trust's Information Governance return for 2010/11. ➤ To authorise submission of the associated IG Assurance Statement. ➤ To acknowledge the significant amount of work that has been undertaken by the team to deliver the Information Governance Toolkit for 2010/11. ➤ To note that one Information Governance requirement (8-112) states that all staff (95%) are full trained on IG awareness by 30th June 2011. On the basis the Trust has a plan to achieve 95% compliance by 30th June 2011, this has been rated at 'level 2'.
DHCFT 2011/22	<p><u>MENTAL HEALTH ACT COMMITTEE RATIFIED MINUTES FROM 10TH DECEMBER 2010, WITH ACTIONS MATRIX – MAURA TEAGER</u></p> <p>The ratified minutes from the Mental Health Act Committee, held on 10th December 2010, were received for information. The Board noted the retirement of Mrs Margaret Benneworth, Associate Hospital Manager, a remarkably long serving Mental Health Act panel member, and extended its thanks for her significant contribution. The Chairman had congratulated her in front of her colleagues at a recent Mental Health Act training event.</p>
	<p><i>The Chairman 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.</i></p>

Date and time of next meeting

Date of next scheduled meeting

Wednesday, 27th April 2011 – in the Boardroom, Trust Headquarters, Bramble House, Kingsway Site, Kingsway, Derby, DE22 3LZ