



Minutes of the Trust Board Meeting held on 31 January 2008

Present:	Jan Wilson	Acting Chair
	Lionel Conyers	Non-Executive Director
	Gary Dimmock	Non-Executive Director
	David Hinchliffe	Non-Executive Director (part)
	Steven Michael	Chief Executive
	Nisreen Booya	Medical Director
	Hazel O'Hara	Chief Operating Officer
	Noreen Young	Director of Nursing, Compliance and Innovation
In attendance:	Alan Davis	Director of Human Resources and Workforce Development
	Terry Dutchburn	Director of Business Development and Planning
	Ruth Unwin	Director of Corporate Development and Constitutional Affairs
	Doug Dale	PPIF
	Cherrine Hawkins	Senior Associate Director of Finance
	Bernie Cherriman-Sykes	Board Secretary (author)
Apologies:	Anne Gregory	Non-Executive Director
	Malcolm Featherstone	Deputy Chief Executive/Director of Finance

TB/08/01 Welcome, introduction and apologies (agenda item 1)

The Acting Chair opened the meeting and the apologies were noted.

TB/08/02 Declarations of interest (agenda item 2)

Trust Board was asked to note that Nisreen Booya (NHB), Medical Director, had accepted an invitation to become Honorary President of the Support to Recovery Team. There were no further declarations of interest made over and above those already notified to Trust Board.

TB/08/03 Minutes of and Matters Arising from Trust Board meeting held on 20 December 2007 (agenda item 3)

The minutes of the meeting held on 20 December 2007 were approved as a true and accurate record.

It was RESOLVED to approve the minutes of the Trust Board meeting held on 20 December 2007.

There were no matters arising.

TB/08/04 Trust Board assurance from Committee meetings (agenda item 4)
Minutes of Mental Health Act Committee 21 November 2007

With regard to the Mental Health Bill, David Hinchliffe (DH), Chair of the Committee, informed Trust Board that the Trust should consider whether it wishes to apply the changes with regard to Allied Mental Health Professionals (AMHP) and responsible clinicians and, if so, how as it will have a bearing on the Trust's relationship with its stakeholders. Ruth Unwin (RU), Director of Corporate Development, responded that a Project Board has been established to look at the implications of the Act for the Trust and this had been identified as a workstream for the Project Board to make a

recommendation to the Mental Health Act Committee at its next meeting on 3 March 2008.

It was RESOLVED to delegate authority to the Mental Health Act Committee to agree the Trust's position at its next meeting on 3 March 2008 and to report progress to Trust Board in March.

Minutes of Clinical Governance and Clinical Safety Committee 14 December 2007

Noreen Young (NY), Director of Nursing, Compliance and Innovation, commented that there had been a good discussion on research and development and it is an opportune time for Trust Board to agree R&D priorities. She also reported that she and Nisreen Booya (NHB), Medical Director, are looking at a patient safety pathway.

Minutes of Audit Committee 21 January 2008

Lionel Conyers (LC), as Chair of the Committee, provided assurance to Trust Board on a number of issues.

- The internal audit plan had been mapped against the Assurance Framework and all material risks identified in the Assurance Framework were covered in the plan.
- With regard to the Auditor's Local Evaluation, the Committee was concerned that this Trust was the only mental health trust in Yorkshire and the Humber that did not improve its score and that criteria may not be consistently applied across Trusts.
- The Chief Executive commented that a review of the Assurance Framework will be undertaken for the next Trust Board meeting to reflect the findings of the Integrated Governance internal audit to clarify key controls and where Trust Board gains assurance.
- With regard to the observation that it might be timely to review the level of information on infection control received by Trust Board, it was suggested that infection control and drugs and therapeutics should form sub-committees of the Clinical Governance and Clinical Safety Committee to provide assurance through a Trust Board process. This received broad support.
- The Committee's concerns regarding the Service Level Agreement for pharmacy services with Mid-Yorkshire Hospitals NHS Trust were noted and the Chief Executive confirmed that a Chief Executive level meeting around a number of areas of concern to the Trust had been arranged.
- LC clarified that the development programme referred to under AC/08/10 was specifically for Audit Committee members and was not intended to supersede other Trust Board development work.

TB/08/05 Chair's remarks (agenda item 5)

Jan Wilson commented on two items.

- Janice Muhanna, a Practice Development Nurse based in North Kirklees, has been shortlisted for the Diversity in Health Award at the Nursing Standard Nurse 2008 Awards. Her project is about supporting mainly Asian families with relatives who have a learning Disability. The winner will be announced on 27 March 2008.
- She went on to thank the finance team and the Foundation Trust Project Board for getting the Trust to this point, which is a real achievement in itself. This meeting represented the end of an era for the Trust with the appointment of a

new Chair from 1 February 2008. She thanked Trust Board for five and a half years of commendable achievement. She highlighted two achievements she was particularly proud of during her time as Acting Chair. Firstly, the mock Board-to-Board with Grant Thornton, which demonstrated that the Trust Board is acting as a unitary board. Secondly, the Trust had gone through the Department of Health gateway and has been successfully batched by Monitor.

Lastly, she thanked Trust Board members for their support during her acting period.

TB/08/06 Chief Executive's Report (item 6)

The Chief Executive began his report by confirming that the Trust had received formal notification from Monitor that it had been batched in Group 22 under Wave 7 for Authorisation as a Foundation Trust on 1 May 2008. Although, there were no specific issues identified for resolution prior to the commencement of the assessment process, the Trust was advised that it would not be appropriate to conclude from this that a positive authorisation decision would follow.

He went on to comment on:

- the Trust's work towards introduction of Service Line Management;
- the Operating Framework for 2008/09 and the changes this meant for the Integrated Business Plan;
- development of the national and northern Payment by Results project (a proposal will come to the next Trust Board regarding the Trust acting as a national pilot site);
- S75 Health Act flexibilities where Alan Davis (AGD), Director of Human Resources, is leading a piece of work with Calderdale Council to develop a formal framework for partnership working;
- the Healthcare Commission site visit to older people's services within the Trust as part of a national programme of visits.

He also reported that the Trust had been informed by the Audit Commission that Grant Thornton has been re-appointed as the Trust's external auditors for a further period of five years from 1 April 2008 and Graham Nunns remains as the Engagement Lead.

The Chief Executive also alerted Trust Board to the project initiated by the NHS Chief Executive in December 2007 with regard to the mapping and review of person identifiable data flows. He outlined the four phase review put in place for all Trusts, which requires Chief Executive sign-off at each phase. A full assurance report for Trust Board will be presented in March 2008.

Finally, he thanked Jan Wilson for her considerable work, effort and support over the last few months whilst in an acting capacity. She demonstrated excellent stewardship in steering the Trust through a number of key milestones.

It was RESOLVED to note the Chief Executive's report.

TB/08/07 Strategic Development (agenda item 7)

Foundation Trust application (agenda item 7.1)

RU introduced this item and highlighted a number of key issues for the Trust in the next phase:

- a challenging membership target (any help and support would be welcome from Trust Board) and need to make the membership representative;
- elections to the Members' Council;
- confirmation of the Board Statements and Board Memorandum on financial reporting and working capital.

Work has started on post-Authorisation issues, including how the Trust will meet the requirements of Monitor's Compliance Framework (which was the subject of the Trust Board development session earlier in the day).

It was RESOLVED to receive the paper as assurance that progress is being made in support of the application to become a Foundation Trust.

Learning Disability Services strategy update (agenda item 7.2)

Hazel O'Hara (HOH), Chief Operating Officer, introduced this item, which provided a reminder to Trust Board of the journey the Trust has taken since 2002 in learning disability services. The Trust is on board with the national agenda, which was confirmed by the recent Healthcare Commission report. The challenges for the Trust over the coming months are:

- no clear strategy in Calderdale and Kirklees for people with learning disabilities;
- stronger implementation of direct payments, which may take funding from local authorities, which support people with learning disabilities;
- the shift in PCT resources not spent on specialist mental health services to local authorities, which may have implications for the Trust;
- increased demographic demand;
- plans to move low secure learning disability services to Fieldhead (the Mansell Report will be used as a framework to do this).

Trust Board confirmed that this was a useful and timely report. DH asked whether the Trust is discussing the 'personalisation' agenda with local authorities given the potential impact it has on the way the Trust works and its financial position. HOH responded that the Trust has good links into strategic partnerships through Local Public Service Boards but the level of dialogue may not be robust enough to clarify direction. The Chief Executive was requested to bring back a clear picture following a further analysis of stakeholder relations.

It was RESOLVED to receive the report as assurance that the Trust is taking note of national guidance and strategic direction and is taking action to address areas where further development is required, and to support the actions identified for incorporation in the 2008/09 Learning Disability Services annual plan.

TB/08/08 Strategic Execution (agenda item 8)

Integrated Performance Report (agenda item 8.1)

The Chief Executive began by saying that the report was a further development on integrated performance reporting and drew Trust Board's attention to the dashboard and vital signs (or Key Performance Indicators) using the '4+2' framework and drawing out key issues for Trust Board, supported by individual reports from services and directorates. He thanked the performance and information team for the work done to develop this report. Trust Board was generally supportive of the usefulness of the dashboard and layout of the report.

The following comments were made and issues raised.

- It was agreed to include the cashflow figures in the 'cashflow against target'.
- AGD confirmed that the sickness trend is being managed downwards; however, the viral influenza in December did affect the figures compared to 2006. He remains confident that issues are being addressed and the Trust continues to compare well against other mental health trusts.
- Detailed work has begun to understand the reasons behind the figures for ethnicity of compulsory admissions. A report will be taken back into the Mental Health Act Committee.
- There is an ongoing upward trend for appraisals but not as quickly as the Trust would like. The target is expected to be achieved by the end of this financial year. The Chief Executive commented that the appraisal rate is still not good enough and each Executive Director has been asked to ensure appraisals take place.
- The target for Middleground attendance of 40 staff per month was ambitious. The downward trend was mainly due to the number of staff who did not attend in December. Mechanisms have been put in place to ensure staff attend future modules from January. The Chief Executive commented that Trust Board should not underestimate the achievement of the Middleground programme and the numbers of staff who have attended with a positive outcome.
- HOH will bring a report to Trust Board at the next meeting on violent assault, delayed discharge and 18-week referral to enable Trust Board to have an informed debate on what the targets should be.
- Trust Board would find it useful to see commentary on the impact of one area of performance on another.
- Doug Dale commented that the PPIF had undertaken a visit to Enfield Down in Honley (South Kirklees) concluding that, "giving some allowance for the considerable amount of refurbishment going on, this was a pleasant, well organised and functioning unit, with only minor items needing attention".
- HOH confirmed that there are processes in place to enable the Trust to report full compliance with the Healthcare Commission core standards in May, including a robust system for alert letters and medical devices, with NY identified as lead Director.

Cherrine Hawkins (CH), Senior Associate Director of Finance, commented on the finance part of the report.

- The forecast outturn for the Trust is now a surplus of £2.3 million, £0.8 million more than previously reported, as a result of clarification of a number of

expenditure items for which the Trust had been holding provisions at a lower level than provided for, such as the nationally negotiated pay award, outstanding Agenda for Change and inflation on the services provided by Calderdale and Huddersfield NHS Foundation Trust. This current surplus would increase the Trust's risk rating from 3.3 to 3.9 strengthening the FT application.

- The early delivery of the cost improvement programme (CIP) has also contributed to the £2.3 million surplus and makes a significant contribution to the funding of the capital programme. The Trust remains on track to achieve the CIP target.
- The Trust will actively manage the end of year cash position to meet the target of £292,000 and a plan is in place to manage the current position down by the end of the financial year by increasing debtors in partnership with commissioners and by increasing capital programme expenditure.
- Spend on the capital programme is on track and the Trust has requested a reduction in its Capital Resource Limit in line with anticipated actual spend due to additional monies received for the PICU re-development. This has yet to be confirmed and, if the Department of Health does not reduce the target, the Trust will underspend on the CRL; however, there is no financial penalty in doing so.
- With regard to the Better Payment Practice Code, significant progress towards the target has been made but the Trust will not meet the 95% target by the end of the year.
- Appendix A is a new integrated budget report as recommended in the historical due diligence report from KPMG. This represents the first step in the development of this type of reporting. In future, reporting will be along service lines.
- It was noted that the underspend in central and support services will be addressed through spend on routine maintenance between now and the end of March.

In response to a question as to whether the vacancy rate in Working Aged Adults services was affecting service delivery, HOH commented that this was not the case. There are differences in reporting vacancies in terms of establishment and active vacancies and that the vacancies would work themselves through the system through the cost improvement programme and disestablishment. All Service Delivery Groups (SDGs) have been asked to comment on each vacancy they hold. The level of cost improvement programme required this year has had the effect of making SDGs more prudent than they could realistically be. Budgets set at the beginning of the financial year are balanced and therefore can be used to benefit services. In future, the Trust may consider incentivising budget holders to manage within budgets effectively.

The Chief Executive commented that this discrepancy in reporting made the need for an integrated report from the Chief Operating Officer, Director of Finance and Director of Human Resources even more important.

It was RESOLVED to:

- **support the set of Key Performance Indicators (KPIs)/vital signs identified;**
- **receive the report as assurance of the Trust's current performance position and that mitigating action is being taken to address any areas of under performance;**

- **support development of the report along the lines discussed at the meeting.**

HCC – quality of services (agenda item 8.2)

NY took Trust Board through this report, reminding Directors of the declaration process and highlighting areas for concern.

RU commented on Standard C7e, which had also been highlighted as a concern in the integrated performance report, and assured Trust Board that mitigating action is in place to undertake impact assessments and develop a dedicated equality section on the Trust's website. The resources to undertake this work is unclear until mitigating action is agreed and capacity identified.

It was RESOLVED to receive the paper as assurance of the process and current performance rating, and that action and processes are in place to address any gaps in data evidence to ensure the Trust is addressing outstanding issues of compliance.

TB/08/09 Culture (agenda item 9)

Clinical Engagement (agenda item 9.1)

NY and NHB outlined the process for developing clinical engagement in the Trust. Trust Board confirmed it would be helpful for similar papers on public health and research and development to be brought to a future Trust Board.

DH asked whether a formal mechanism for Trust Board contact with clinical staff could be established and RU commented that she has asked the Head of Communications to develop a structured approach for consideration.

It was RESOLVED to note the action for developing clinical engagement within the Trust.

Stakeholder Engagement (agenda item 9.2)

RU gave a presentation to Trust Board. It was agreed that a more detailed discussion is needed regarding where organisations/bodies are now, where they might move to, where the Trust would want them to be and the level of relationship the Trust wishes to have with each to inform a Communications Strategy. It was noted that the Trust Board development session in April will focus on the impact of the Members' Council on relationships with service users and existing mechanisms of involvement and communication.

It was RESOLVED to note the position in relation to stakeholder engagement.

TB/08/10 Structure (agenda item 10)

Business Delivery Units – action plan for introducing Service Line Management (agenda item 10.1)

AGD gave a presentation to Trust Board following further development of the Trust's plans for the introduction of SLM by the Executive Management Team. It was agreed that the Audit Committee would scrutinise development to test the

