

Minutes of Trust Board meeting held on 28 April 2009

Present:	Joyce Catterick Ian Black Bernard Fee Anne Gregory Jan Wilson Steven Michael Nisreen Booya Hazel O'Hara Noreen Young	Chair Non-Executive Director Non-Executive Director Non-Executive Director Deputy Chair Chief Executive Medical Director Chief Operating Officer Director of Nursing, Compliance and Innovation
In attendance:	Peter Aspinall Alan Davis Terry Dutchburn Cherrine Hawkins Ruth Unwin Bernie Cherriman-Sykes	Non-Executive Director designate Director of Human Resources and Workforce Development Director of Business Development and Planning Deputy Director Finance Director of Corporate Development and Constitutional Affairs Board Secretary (author)
Apologies:	David Hinchliffe John Scampion	Non-Executive Director Interim Director of Finance

TB/09/27 Resolution to Exclude the Public and Press

It was **RESOLVED** that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest. Section 1 (2) Public Bodies (Admission to Meetings) Act 1960

TB/09/28 Welcome, introduction and apologies (agenda item 1)

The Chair (JC) opened the meeting and welcomed everyone to the first business and risk meeting of Trust Board. The apologies from David Hinchliffe and John Scampion were noted.

TB/09/29 Declarations of interest (agenda item 2)

The following Declaration was considered by Trust Board.

Name	Declaration
EXECUTIVE DIRECTORS	
John Scampion	Owner, John Scampion Consultancy, which provides consultancy services to public sector bodies Chairman, Lifeline Charity, a social enterprise company provide drug rehabilitation services to public sector clients

There were no comments or remarks made on the Declaration, therefore, it was **RESOLVED** to formally note the Declaration of Interest by the interim Director of Finance. There were no other declarations of interest made over and above those previously declared.

TB/09/30 Month 12 performance reports (agenda item 3)

TB/09/30a Section 1 – Integrated performance report: strategic overview (agenda item 3.1)

There were a number of issues raised from the integrated performance report.

- Ian Black (IB) asked what the Trust had done to achieve such positive sick absence rates. Alan Davis (AGD) responded that the Trust had introduced a number of initiatives, including the new Occupational Health Service in partnership with Leeds, a re-focusing of the staff counselling service and work with managers on management of staff absence.
- JC asked when and how the service marketing strategies would come to Trust Board. Terry Dutchburn (TD) responded that guidance has been prepared for SDGs and a workshop will be arranged to assist SDGs in the preparation for the end of quarter 1 of 2009/10. However, Trust Board should note that SDGs and TD's team are working within existing capacity to develop these plans.
- JC also asked whether there was any evidence that the Trust's performance on national PCT targets was impacting on services, for example, in SUIs. Hazel O'Hara (HOH) responded that the SUI 8119 involved the Trust's Assertive Outreach Team in Calderdale and it would be interesting to see the conclusions from the Independent Inquiry report regarding the service. Noreen Young (NY) commented that the review of SUIs in 2008 did not indicate any themes or trends in this respect.
- In relation to mutual respect, JC asked whether the Trust could undertake its own staff and service user surveys. Ruth Unwin (RU) commented that the HCC service user survey is very narrowly focussed; however, the Trust also ran complementary surveys in all services last year. It was agreed that RU should bring back a paper to Trust Board on how it gets feedback from intelligence such as dialogue groups and SDGs. Bernard Fee (BF) commented that the Trust needs to have a structure for gathering intelligence and insight to which TD responded that this had been identified as part of the work to develop the marketing strategy.

AGD commented that the Wellbeing project will focus on staff engagement and physical and psychological wellbeing. Working in partnership with Bradford Care Trust will enable the Trust to benchmark its results.

HOH explained the process to develop KPIs for 2009/10. This is an important area for the Trust as the choice of KPIs will determine where the drive for improvement is focused across the Trust. There was a general feeling that there were too many KPIs and that some aggregation of individual targets and exception reporting to Trust Board would be useful. It was agreed that the Chair would meet with HOH to look at each KPI in more detail. There will also be further development of indicators relating to the Trust's strategic intentions. Further consideration will take place at the development session in May.

Anne Gregory joined the meeting.

TB/09/30b Section 2 – High level summary reports – Human Resources and Workforce Development (agenda item 3.2(i))

In response to comments made by IB regarding performance against the sick absence target and its relationship to the use of agency/bank staff and overtime, AGD clarified that the active vacancy rate relates to advertised vacancies and does not reflect establishment. This will change for 2009/10 to refer to the gap between establishment and staff in post, which will enable the Trust to look in more detail at the use of agency staff, the relationship with vacancy rates and value for money.

BF commented on the Trust's low staff turnover rate, asked for further information on where the current turnover is and whether there are any opportunities to increase turnover as the Trust faces the need to reduce costs. AGD responded that the Workforce Plan contains a target of natural turnover of 8%, which will address CIP changes due to grade mix and drift. The plan will be refreshed this year and will include a revised, higher target.

Anne Gregory (AG) made an observation that the staff survey results seem to indicate that good team support is in place but corporate support for staff is not as robust. AGD responded that the Wellbeing project will look at this in more detail. BF commented that he was disappointed with the low rate of return although did accept that it was high in comparison with other Trusts.

It was agreed to receive the staff survey action plan in June.

TB/09/30c Section 2 – High level summary reports – Compliance (agenda item 3.2(ii))

NY took Trust Board through the key points of the report. JC commented that this was an excellent report and that, for the next report, less detail would be needed.

TB/09/30d Section 3 – Finance report (agenda item 3.3)

Cherrine Hawkins (CH) informed Trust Board that the Trust had achieved three out of its four statutory duties. The Cost of Capital Absorption Duty target was missed due to the revaluation of Trust assets in October 2008. With regard to national targets, the Trust has achieved the Better Payment Practice Code target and is on target to achieve a level 3 score for Auditor's Local Evaluation. The Trust underperformed by £500,000 on recurrent CIPs for 2008/09, which will impact on 2009/10 CIP requirements. Performance against non-recurrent cost savings has been good and has contributed to the surplus figure. The Monitor risk rating has remained stable.

Peter Aspinall (PA) asked for clarification of the in-month overspend in Support and Central Services and whether this contributed to the overall overspend in support directorates. CH clarified that the overspend in month 12 was due to spend by facilities on backlog maintenance following generation of savings in-year. The overall overspend was due to the delay in the partnership with Affinity, which would have produced an income CIP for the Trust. TD confirmed that the Trust has ongoing contact with Affinity and that negotiations will resume once the Trust is Authorised. A report will come back to Trust Board in June.

IB asked whether it would be timely to review the finance report, particularly in terms of reporting of recurrent CIPs and in-year cost savings. It was agreed this should be done when a substantive appointment to the post of Director of Finance is made.

With regard to the Treasury Management Policy, JC reiterated Trust Board's view that the Trust remains extremely prudent in this area given the current economic climate. It was agreed that the Audit Committee would review the Trust's approach and activity at its meeting in July.

TB/09/30e Section 4 – Service performance and activity reports Quarter 4 (agenda item 3.4)

HOH confirmed that, due to the rollout of RiO, reporting on caseloads and referrals is now accurate; however, the data quality for reporting contacts is still improving. In terms of discharge reporting, work is ongoing in services to ensure service users are 'technically' discharged. A more detailed report will be included in service performance report for the next quarter. Nisreen Booya (NHB) commented that a single point of access and robust screening/triage arrangements will be important as referrals increase, particularly with the development of IAPT services. This will be developed as part of the wider service strategy.

HOH also confirmed that a piece of work to understand the capacity of teams and, therefore, the capacity of the organisation had begun to which BF commented that this would make reports more meaningful.

JC asked whether the PLD service in Calderdale could be considered safe to which TD responded that it was as safe as it could be in relation to the resources available. He did comment, however, that dialogue had improved with commissioners due to staff changes at the PCT.

IB commented that he would like to see detailed reporting on support services included in the quarterly reports, including a report on backlog maintenance and facilities spend.

TB/09/30f Section 5 – Exception reports and action plans – Assurance Framework quarter 4 2008/09, 2009/10 and Risk Register (agenda item 3.5(i))

No comments were made on the correlation between the gaps in assurance in the Assurance Framework for 2009/10 and the risk register. A value added review by internal audit will inform further refinements to the Framework for its next presentation to Trust Board.

SM reminded Trust Board that the current economic situation was reflected in the risk register as previously agreed and this will form part of the downside modelling and review of the PEST and SWOT analyses at the session in May to inform the Monitor annual plan.

It was agreed that the Audit Committee should review whether the Trust continues with Auditor's Local Evaluation, alternative measures of performance and implications for other standards.

The Audit Committee was also asked to review the format of the risk register.

It was RESOLVED to:

- **NOTE the assurances provided for 2008/09;**
- **AGREE the assurance framework for 2009/10;**
- **AGREE the key risks on the risk register.**

TB/09/30g Section 5 – Exception reports and action plans – Domestic tender (agenda item 3.5(ii))

As a result of a number of concerns expressed by Non-Executive Directors, it was agreed that Initial should be asked to continue with its current contract for a further three months pending a further discussion at Trust Board in June with the lead manager present to address Trust Board's concerns. The outcome of the tender was not approved.

TB/09/30h Section 5 – Exception reports and action plans – Psychological Therapies update (agenda item 3.5(iii))

TD highlighted the risks in Calderdale, which now requires action from the PCT. SM asked whether this becomes a key performance requirement. HOH confirmed that the Trust has to demonstrate that it can report performance not report actual performance at this stage.

It was RESOLVED to NOTE the update report and progress made.

TB/09/31 Re-provision of services in South Kirklees (agenda item 4)

This agenda item was taken in private.

IB left the meeting

TB/09/32 Review of Serious Untoward Incidents (agenda item 5)

Although the report did not highlight any major systemic issues, there were still areas of practice which required action with individual teams. The exercise had proved effective in promoting organisational learning, in particular, the adoption of a 'systems checklist' approach offers a framework which could be adopted in taking forward similar pieces of work in the future. **It was RESOLVED to NOTE the report and for the Clinical Governance and Clinical Safety Committee to RECEIVE a more detailed presentation on the findings of the report.**

TB/09/33 Review of Standing Financial Instructions (item 6)

It was RESOLVED to AGREE the changes to the Standing Financial Instructions.

TB/09/34 Business Case for the expansion of the low secure service for men with learning disabilities (item 7)

There were a number of concerns expressed regarding entering into such an expansion when a difference in projected and forecast surplus remains for the coming year. TD reminded Trust Board that it had already approved the move of Newhaven to Fieldhead and this represented additional beds commissioned from the

low secure consortium. It provides a contribution and represents part of an income CIP for 2009/10. If not approved, it will affect the budget and leave another service on the St. Luke's site that is not fit for purpose. The low secure commissioning consortium will not continue with provision on the Newhaven site as it does not meet the specification required for low secure services.

After some debate, **it was RESOLVED to SUPPORT the proposal to extend the current provision to create a 16-bed low secure unit for men with learning disabilities.**

TB/09/35 Date and time of next meeting (agenda item 8)

The next public meeting of Trust Board will take place on Tuesday 30 June 2009 at Dean Clough in Halifax. There will be a strategy session for Trust Board at 1.00pm on Tuesday 19 May 2009 at St. Luke's Hospital, Huddersfield followed by a board development session.

The Chair explained to Trust Board that Jan Wilson's term of office as Deputy Chair came to an end on 31 March 2009. She sought approval from Trust Board to extend this appointment until Authorisation, when a formal decision would be made by the Members' Council regarding the Deputy Chair post. The Chair recommended that six months were served allowing an incoming Deputy Chair to work alongside Jan Wilson during her last six months as a Non-Executive Directors. **It was RESOLVED to SUPPORT this proposal.**

Signed **Date**