



**Minutes of Trust Board meeting held on 29 June 2010**

<b>Present:</b>	Joyce Catterick Peter Aspinall Ian Black Bernard Fee Jonathan Jones Helen Wollaston Steven Michael Nisreen Booya Alan Davis Alex Farrell Gill Green	Chair Non-Executive Director Deputy Chair Non-Executive Director Non-Executive Director Non-Executive Director Chief Executive Medical Director Director of Human Resources and Workforce Development Deputy Chief Executive/Director of Finance Acting Director of Nursing, Compliance and Innovation
<b>In attendance:</b>	Tim Breedon Emma Davison Terry Dutchburn Bernie Cherriman-Sykes	Interim District Director Huddersfield Examiner Director of Business Development and Planning Board Secretary (author)
<b>Apologies:</b>	Adrian Berry Dawn Stephenson Noreen Young	Interim Care Group Director (Forensic Services) Director of Corporate Development and Constitutional Affairs Director of Nursing, Compliance and Innovation

**TB/10/46 Welcome, introduction and apologies (agenda item 1)**

The Chair (JC) welcomed everyone to the meeting, in particular Jonathan Jones (JJ), attending his first formal Trust Board meeting. The apologies, as above, were noted. She also congratulated Tim Breedon (TB) on his position as Chair of the Learning Disability Network at the NHS Confederation. She also commented on the appointment of the three District Directors, in place from 1 July 2010, and wished them every success in their new posts.

**TB/10/47 Declarations of interest (agenda item 2)**

The following Declaration was considered by Trust Board.

Name	Declaration
<b>NON-EXECUTIVE DIRECTORS</b>	
Jonathan Jones	Member, Hammonds LLP

There were no comments or remarks made on the Declaration, therefore, **it was RESOLVED to formally note the Declaration of Interest by Jonathan Jones.** No further declarations were made over and above those received by Trust Board in March 2010.

**TB/10/48 Minutes of and matters arising from Trust Board meetings held on 30 March, 27 April and 25 May 2010 (agenda item 3)**

**It was RESOLVED to APPROVE the minutes of the Trust Board meetings held on 30 March, 27 April and 25 May 2010 as a true and accurate record of the meetings.**

There was one matter arising from the meeting held on 27 April 2010.

TB/10/33 Francis Report action plan

JC asked to see a programme of service visits for Trust Board as agreed at the meeting.

**TB/10/49 Assurance from Trust Board Committees (agenda item 4)**

TB/10/49a Clinical Governance and Clinical Safety Committee 13 April and 22 June 2010 (items 4.1 and 4.5)

Bernard Fee (BF) commented on the internal report on clinical audit, which received limited assurance. The Committee has discussed this at length and has agreed to meet with internal audit to clarify their expectations following the audit report. He also reported on the new sub-committee, led by the Medical Director and Acting Director of Nursing, Compliance and Innovation, to focus on serious untoward incidents.

TB/10/49b Audit Committee 20 April 2010 (item 4.2)

Ian Black (IB) commented on two further internal audit reports, which also received limited assurance, relating to use of agency, bank and overtime, and training and development. A further update will come to the Audit Committee in July.

TB/10/49c Mental Health Act Committee 24 May 2010 (item 4.3)

Helen Wollaston (HW) reported on the excellent progress made in implementing the changes as a result of the Mental Health Act 2007 with only three outstanding actions remaining relating to Responsible Clinician arrangements, Approved Mental Health Professionals, and appropriate accommodation for under 18s.

TB/10/49d Audit Committee 7 June 2010 (item 4.4)

Taken under item 9.

**It was RESOLVED to RECEIVE the minutes from Trust Board Committees.**

**TB/10/50 Chief Executive's report (agenda item 5)**

The Chief Executive (SM) highlighted the following from his report.

- Adrian Berry has been appointed as Director of Forensic Services following a formal interview process. The appointment takes effect from 1 July 2010. He also reported on the appointment of interim Heads of Service and General Managers for Business Delivery Units.
- Trust Board joined SM in wishing Noreen Young well with her continued recovery.
- A twelve-year lease has been signed on the Priestley Unit at Dewsbury District Hospital. Negotiation of a formal lease for the Dales continues. The Trust has been given assurance of security of tenure by Calderdale and Huddersfield NHS Foundation Trust (CHFT); however, the terms of the Trust's sub-lease cannot be agreed until the lease between CHFT and the PFI provider is agreed. JC expressed a concern that the Trust is investing a significant sum of money with no signed lease. She asked SM to escalate the issue to Chief Executive level and requested a timescale for resolution.

- SM also reported on the resolution of a number of issues with local authority partners around the Care Programme Approach (CPA) Policy, which now has the full support of all partners. He particularly thanked Jonathan Philips, Director Adults, Health and Social Care at Calderdale Council, for his help in facilitating a resolution.
- The Trust is holding an open day on the re-provision of services in South Kirklees on Thursday 8 July 2010 at Huddersfield Town Hall.
- He also commented on the celebration events for members held on 21 and 28 June 2010, which were very interesting and reasonably well attended.

**It was RESOLVED to NOTE the Chief Executive's report.**

**TB/10/51 South Kirklees re-provision of services (agenda item 6)**

TB introduced this item and assured Trust Board that work was on track for both the re-provision of in-patient and community services. An options appraisal paper on a long-term solution will be presented to the Project Board in September 2010 with a view to bringing a recommendation to Trust Board in January 2011. Engagement continues and includes the open day on 8 July 2010. Further public events will be held.

JC reminded Trust Board that the Members' Council had asked to see contingency plans if interim in-patient arrangements were not ready for the move by the end of December 2010. TB responded that the plans were on track so there was no urgent need to formulate a contingency position. Terry Dutchburn (TD) confirmed that there are no areas currently causing concern and the Project Board has a risk log in place which includes any contingency plans needed as a part of mitigating action. The Strategic Project Board, which involves CHFT, will provide a greater understanding of plans to vacate the site. JC asked for a further update prior to the Members' Council at the end of July.

**It was RESOLVED to NOTE the report.**

**TB/10/52 Clinical Governance issues (agenda item 7)**

TB/10/52a Trust approach to public health (agenda item 7.1)

Nisreen Booya (NHB) introduced this item. The following comments were made.

- HW would have liked to see more focus on prevention work, how the public health needs of the Trust's service users are met in the community, and how the public mental health needs of the wider community are addressed. NHB responded that it is intended to develop outcome measures for public health, which can then be monitored through Trust processes.
- TD suggested linking this Strategy to the GP Engagement Strategy in terms of physical activity requirements.
- SM suggested that this should be linked to promotion of social value and JC to anti-stigma activity. As links in Calderdale and Kirklees are already in place, it was agreed to raise this at the Kirklees and Wakefield Partnership Board. Further links with Public Sector Partnership Boards would also be useful in terms of ensuring service users make the best use of public health services.

It was agreed that the Executive Management Team (EMT) should consider the suggestions and bring a further paper on public health promotion back to Trust Board in October.

**It was RESOLVED to APPROVE the Public Health Strategy.**

TB/10/52b Being Open: principles and implementation (agenda item 7.2)

Trust Board made a public commitment to implementing the principles of 'Being Open' in accordance with the actions identified in the National Patient Safety Agency Being Open Patient Safety Alert (NPSA/2009/PSA003).

**It was RESOLVED to MAKE the public commitment to the principles of 'Being Open'.**

TB/10/52c Serious Untoward Incidents update (agenda item 7.3)

The paper was noted by Trust Board. SM alerted Trust Board to the tragic incident not included in the report that occurred on Trinity 2 in Wakefield, which resulted in the death of a service user.

**It was RESOLVED to NOTE the update on serious untoward incidents.**

**TB/10/53 Month 2 performance reports 2010/11 (agenda item 8)**

TB/10/53a Section 1 – Integrated performance report: strategic overview (agenda item 8.1)

In introducing this item, Alex Farrell (AF) commented on the following.

- The development of the format of the document continues based on the '4+2' framework and the four domains from the balanced scorecard. The document also explains the principles behind reporting performance against targets, which will be reported to Trust Board on an exception basis. She suggested further work with Non-Executive Directors on the format and content of the report based on the introduction of service line reporting by October 2010. It was agreed that Non-Executive Directors would advise JC on how they would like to contribute to this process.
- Trust Board noted that the current assessment of the Trust's Monitor risk rating is green/amber due to the requirements for data quality not being met. This is a worst case scenario and an action plan is in place to improve the Trust's performance by quarter 2.
- This also impacts on the Trust's Care Quality Commission (CQC) registration as data for quarters 1 and 2 of 2009/10 are used to determine Trust performance. As previously explained to Trust Board, the difficulty is with HoNO/SaRN reporting and this is currently being addressed by the CQC nationally. If the Department of Health (DoH) is supportive of an application for consideration of extenuating circumstances by all Trusts in the national project, then Monitor would accept this mitigation against its targets.

The following comments were made on the report.

- Peter Aspinall (PA) asked what plans are in place to address the higher than planned sickness absence. Alan Davis (AGD) responded that a number of initiatives, including case management of long-term sickness, a pilot for fast-track muscular-skeletal physiotherapy service, and a physical fitness pilot, will provide a targeted approach to meeting the indicator.
- BF commented that, at the recent Medicines Management workshop, a significant number of service users did not think they had a care plan. TB responded that language is very important and the Trust is working with staff to ensure that service users understand this terminology.
- HW asked for progress on benchmarking to which AF responded that this will be reported to Trust Board on a quarterly or six-monthly basis, which would be based on internal data initially and then against other providers.
- Trust Board noted that the recent admission of a young person under the age of eighteen to Trust services had been successfully managed.
- JC asked whether any progress had been made to resolve the issues around demand management of psychological therapy services. It was agreed to receive a paper in July on progress.
- Trust Board asked to receive an update on staffing and sickness levels in the psychiatric intensive care unit (PICU) in July.

TB/10/53b Section 2 – Finance report month 2 2010/11 (agenda item 8.2)

AF highlighted the following:

- the current underspend is due to the level of vacancies being managed;
- the Trust is above target on its Cost Improvement Programme (CIP);
- there are a number of cost pressures in the system, which would affect the achievement of the CIP if no action is taken;
- the Monitor risk rating on target.

SM suggested that Trust Board might want to receive the long form of the finance report in future to reflect the move to Business Delivery Units and to service line reporting.

TB/10/53c Section 3 – Exception reports: Sustainability Strategy (agenda item 8.3(i))

IB commented that the Strategy will be supported by more detailed timescales and specific actions, which the Trust will take forward, and asked whether Trust Board would want regular reports on progress. It was agreed to receive reports quarterly during 2010/11 and then six-monthly.

AF commented that there were three strands to the work undertaken by KPMG:

- development of the Strategy presented to Trust Board at this meeting;
- performance indicators for estates;
- benchmarking for support services.

These strands will be supported by quantification of what this means in terms of cost savings, benefits and efficiencies. Sustainability efficiencies were included in the plan to Monitor, mainly around procurement in 2010/11 but with a wider impact in future years. This will be reported to Trust Board in the performance report.

BF commented that the Strategy appears to present the Trust as behind other sectors and questioned whether the Trust should drive the sustainability agenda more rapidly. AGD responded that the Trust has tended to concentrate on 'easy wins' and the challenge will come in introducing initiatives that require a cultural shift. It was agreed to seek comments on sustainable estate at the session on 6 July 2010.

JC asked that a staff award relating to championing sustainability be included in the Excellence '10 event.

**It was RESOLVED to APPROVE the Sustainability Strategy and that implementation plan is delivered and monitored through the Sustainability Project Group.**

**TB/10/54 Annual report and accounts 2009/10 (agenda item 9)**

JC began by reminding Trust Board that the Audit Committee met on 7 June 2010 to scrutinise and approve the annual accounts. AF clarified that this was for both the period when the Trust was an NHS Trust (1 to 30 April 2009) and for the period as a Foundation Trust (1 May 2009 to 31 March 2010). No substantial recommendations had been made on either set of accounts. A year-on-year comparison will be developed for the Members' Council and Annual Members' Meeting, which will be presented to the Audit Committee in July.

Trust Board noted that Grant Thornton had been able to give an unqualified opinion on both sets of accounts and an unqualified value for money opinion. The Trust's Auditor's Local Evaluation score remains at level 3.

**It was RESOLVED to RECEIVE and ADOPT the annual report and accounts for the period when the Trust was an NHS Trust (1 to 30 April 2009) and for the period as a Foundation Trust (1 May 2009 to 31 March 2010).**

Trust Board also noted that IB, who chaired the Audit Committee in June, had commended the Finance Team for the preparation of the accounts and its work with Grant Thornton.

**TB/10/55 Treasury Management Policy (agenda item 10)**

**It was RESOLVED to APPROVE the changes to the Treasury Management Policy and to review the Policy again in two years, subject to any legislation that changes the structural basis of the banks the Trust is investing with.**

**TB/10/56 Use of Trust seal (item 11)**

**It was RESOLVED to NOTE the use of the Trust's seal as outlined in the report.**

**TB/10/57 Date and time of next meeting (agenda item 12)**

The next public meeting of Trust Board will be held on Tuesday 28 September 2010 in the Hardcastle Room, 5th Floor, F Mill, Dean Clough, Halifax. This will be

followed by the annual general meeting relating to the period 1 to 30 April 2009 when the Trust was an NHS Trust. There will be a business and risk meeting of Trust Board on Tuesday 27 July 2010.

**Signed** ..... **Date** .....