



With all of us in mind

## Minutes of Trust Board meeting held on 25 January 2011

<b>Present:</b>	Joyce Catterick Peter Aspinall Ian Black 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 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>	Anna Basford Adrian Berry Tim Breedon Cherrine Hawkins Dawn Stephenson Noreen Young Bernie Cherriman-Sykes	District Service Director (Calderdale and Kirklees) Care Group Director (Forensic Services) District Service Director (Wakefield) Acting Director of Finance Director of Corporate Development and Constitutional Affairs Director of Nursing, Compliance and Innovation Board Secretary (author)
<b>Apologies:</b>	Bernard Fee	Non-Executive Director

### **TB/11/01 Welcome, introduction and apologies (agenda item 1)**

The Chair (JC) welcomed everyone to the meeting. The apology, as above, was noted.

### **TB/11/02 Declarations of interest (agenda item 2)**

No declarations of interest were made over and above those received by Trust Board in March 2010 and at subsequent meetings.

### **TB/11/03 Minutes of and matters arising from Trust Board meeting held on 14 December 2010 (agenda item 3)**

It was **RESOLVED** to **APPROVE** the minutes of the public session of Trust Board held on 14 December 2010 as a true and accurate record of the meeting.

There were two matters arising.

#### TB/10/80a Middleground

Alan Davis (AGD) reported that he had had a further meeting with Robertson Cooper and agreement was reached to develop materials to promote the model with a further meeting in February. Feedback from participants continues to be positive and an in-depth analysis will take place, including a benefits analysis of resilience profiles.

#### TB/10/106 Creative Minds Strategy

Helen Wollaston (HW) reported that she met with Phil Walters to discuss links to strategic objectives, which will be included in the Strategy linked to the development of a business case to take the Strategy forward.

**TB/11/04 Assurance from Trust Board Committees (agenda item 4)**  
Audit Committee 12 October 2010 (item 4.1)

**It was RESOLVED to RECEIVE the minutes from the Audit Committee.**

**TB/11/05 Chief Executive's report (agenda item 5)**

The Chief Executive (SM) took Trust Board through the Chief Executive's briefing circulated on 24 January 2011.

With regard to Transforming Community Services (TCS), he reported that Monitor appears to have grouped the Calderdale and Wakefield transactions with Barnsley to come to an aggregate risk rating. Further negotiations are needed with Monitor to separate the transactions to enable the two smaller transactions to transfer on 1 April 2011. JC asked for views from Trust Board.

HW felt there was advantage in staging the transfers, particularly as two are so much smaller. Ian Black (IB) supported this saying that the district model enables this. Gill Green (GG) commented that it seemed sensible to stage the transfers from a clinical perspective and had no concerns.

Following Trust Board support, it was agreed that SM would contact Monitor to seek clarification with formal follow up if required.

**TB/11/06 Transforming Community Services (agenda item 6)**

The update report was noted.

**TB/11/07 South Kirklees re-provision of services (agenda item 7)**

Anna Basford (ABa) introduced this item. The first section concludes the re-location of services from the St. Luke's Hospital site. The second proposed a timescale and process for a decision regarding the long-term solution. SM commented that any long-term solution must be based on the revised service offer, clinical need and financial affordability in the future.

**It was RESOLVED to NOTE the report and AGREE the proposed timetable and process to determine the preferred long-term estate solution for the provision of mental health services in Kirklees.**

**TB/11/08 Quarter 3 performance reports 2010/11 (agenda item 8)**

TB/11/08a Section 1 – Integrated performance report: strategic overview (agenda item 8.1)

Dawn Stephenson (DS) alerted Trust Board to the move in the Monitor governance risk rating from 'Green' to 'Amber/Green'. This relates to underperformance on service targets relating to data quality: identified indicators (98.2% against a target of 99%) and data quality: outcomes identified (44.5% against a target of 50%). Monitoring through the Executive Management Team has been robust and work within BDUs will bring the Trust up to target in Quarter 4.

With regard to the implementation of RiO V6, NHS Barnsley was planning to introduce this to CSD before the end of this financial year. The PCT has agreed to defer implementation to 2011/12 to enable both the Trust and CSD to implement V6 at the same time. JC asked for assurance that RiO will enable clinicians to carry out their role not act as data inputters. She was assured that, given the flexibility of V6, the system should be much easier to use.

Adrian Berry (ABe) explained to Trust Board that the non-achievement of the CQUIN relating to 'service user experience, empowerment and involvement' in forensic services related to the content of a report rather than a missed target and assured Trust Board that this would not happen in Quarter 4.

TB/11/08b Section 2 – High level summary reports: human resources and workforce development (agenda item 8.2(i))

AGD reported that sickness absence remains a concern although the Trust is still benchmarking well regionally. Further work has been identified including ensuring absence policy is followed for individuals with prolonged episodes of sickness absence. Staff side and managers on Middleground have been informed of the impact of this level of sickness and the implications for the cost of Trust services and, therefore, its sustainability and viability. Ultimately, this may require a review of the policy, which would be done in consultation with staff side, as the current situation is unsustainable.

AGD confirmed that sickness reduction is not part of the cost improvement programme; however, managing sickness will allow better e-rostering, which is where efficiencies will come. The Trust is reinforcing the message that managing sickness is a key part of a manager's role. If the Trust does not see any improvement by 1 April 2011, a different approach to managing attendance will be adopted. IB commented that it will take time for culture change to work through but there are signs that absence is beginning to be managed robustly. The Remuneration and Terms of Service Committee will receive a more detailed analysis of sickness absence reporting.

GG commented that a number of local authorities are considering not paying people for the first three days of absence; therefore, there is a possibility that Trust will have to manage two systems within teams with an effect on morale.

AGD commented that the Trust was in the last stages of implementing e-rostering, which figures heavily in the cost improvement programme in 2011/12. Issues for 2011/12 are:

- allocation of annual leave and how it is managed across the year;
- hours of work based on service need;
- re-allocation of staff on wards;
- elimination of flexible working arrangements that do not meet Trust policies and procedures or service need;
- handover arrangements (linked to Productive Ward).

TB/11/08c Section 2 – High level summary reports: compliance (agenda item 8.2(ii))

GG introduced this item.

The Care Quality Commission (CQC) will begin a series of visits to the Trust to assess compliance with registration regulations from February 2011. This is seen as a positive approach by the CQC.

Trust Board noted that the Trust was some way from achieving the 95% target for all staff to undertake training on information governance. Although there is no financial penalty attached to the target, it will be an issue for the CQC.

In relation to an issue previously raised by JC regarding potential double inputting by Trust and local authority staff, GG reported that the Trust is now at the stage where it can agree a common assessment with the local authorities, which will standardise inputting on the system. JC also received assurance that it is now standard practice to notify all GPs within 24 hours of a discharge.

#### TB/11/08d Section 3 – Finance report month 9 2010/11 (agenda item 8.3)

JC began by acknowledging the contribution from Cherrine Hawkins (CH) during Alex Farrell's (AF) acting up period during SM's secondment. AF endorsed JC's remarks.

CH reported that the Trust is forecasting an outturn of £3.5 million, which is £1.4 million ahead of plan. This is primarily driven by underspend on operational budgets and release of provisions, £2 million of which relates to early delivery of CIPs for 2011/12.

With regard to the capital position, the Trust is running £600,000 behind plan although this has not reached a level where the Trust would need to submit a revised plan to Monitor. This position will be maintained at quarter 4. The forecast is £1.6 million behind plan, of which Monitor is aware.

Peter Aspinall (PA) asked whether provisions were confirmed at £3.8 million. CH responded that they were; however, there will be an accrual for anticipated redundancies in 2011/12 to cover 180 staff. The accounting treatment for this will be agreed with Deloitte.

#### TB/11/08e Section 4 – Service delivery and activity report Q3 2010/11 (agenda item 8.4)

No issues were raised from the report.

HW asked whether performance indicators in future would look at areas such as recovery, which would demonstrate what the Trust has done to help people in their lives. Tim Breedon (TB) responded that this was being considered by BDUs and through recording of recovery stars in relation to the Care Programme Approach on RiO. Reporting in 2011/12 will be related to the quality of service provision and the piece of work involving the Members' Council will feed into this.

#### TB/11/08f Section 5 – Exception reports: Members' Council involvement (agenda item 8.5(i))

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

SM commented that the Members' Council will be involved in the service re-design/re-modelling work. HW asked whether there were any plans to evaluate the role of the Members' Council. DS responded that this is done annually as part of the evaluation session facilitated by Ken Tooze in May and the results will come back to Trust Board.

TB/11/08g Section 5 – Exception reports: External reviews (agenda item 8.5(ii))

**It was RESOLVED to:**

- **NOTE the external review process undertaken by HASCAS and the subsequent publication of the three external reviews;**
- **NOTE that the Trust is awaiting the HSE response to its formal submission in September 2010.**

**TB/11/09 Monitor quarterly return (agenda item 9)**

DS confirmed the report will be updated before submission to Monitor to reflect the performance position (as explained in item TB/11/08a). DS was asked to ensure that the Chair was updated on the position.

**It was RESOLVED to approve the exception report to Monitor.**

**TB/11/10 Assurance Framework and risk register (agenda item 10)**

DS explained that further work is needed on the risk register by the Executive Management Team. Using the revised scoring matrix, risks rating fifteen before mitigation will be reported to Trust Board and the next quarter will see a revised risk register.

IB expressed a concern that this would mean the risk register would lose rare but catastrophic events so he would like to continue to see such issues recorded whatever the likelihood. DS agreed to look at the risk definition in the guidance to accommodate this.

JC asked whether deterioration in workforce relationships as redundancies come into effect and local authority cuts begin to affect the Trust should be included. AGD responded that relationships with staff side were very positive currently and staff side is fully involved in Middleground. Industrial action is included in emergency planning arrangements, particularly in relation to integrated teams. This is managed through the Emergency Planning Group.

With regard to the Assurance Framework, objectives will be refined in 2011/12 making the Framework more streamlined.

**It was RESOLVED to:**

- **NOTE the assurances provided for Q3 of 2010/11;**
- **AGREE the changes to the risks recorded on the risk register.**

**TB/11/11 Date and time of next meeting (agenda item 13)**

The next public meeting of Trust Board will be held on Tuesday 29 March 2011 in rooms 49/50, Large Mill, Folly Hall, Chapel Hill, Huddersfield. The February strategy meeting will focus on the service offer and the estate falling out of this with an element of formal business required for the Transforming Community Services process.

**TB/11/12 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**

**Signed .....**      **Date .....**