



With all of us in mind

Minutes of Trust Board meeting held on 26 April 2011

Present:	Joyce Catterick	Chair
	Peter Aspinall	Non-Executive Director
	Ian Black	Deputy Chair
	Bernard Fee	Non-Executive Director
	Jonathan Jones	Non-Executive Director
	Helen Wollaston	Non-Executive Director
	Steven Michael	Chief Executive
	Nisreen Booya	Medical Director
	Alan Davis	Director of Human Resources and Workforce Development
	Alex Farrell	Deputy Chief Executive/Director of Finance
	Gill Green	Acting Director of Nursing, Compliance and Innovation
In attendance:	Anna Basford	District Service Director (Calderdale and Kirklees)
	Adrian Berry	Care Group Director (Forensic Services)
	Sean Rayner	Transitional District Service Director (Barnsley)
	Dawn Stephenson	Director of Corporate Development and Constitutional Affairs
	Noreen Young	Director of Nursing, Compliance and Innovation
	Bernie Cherriman-Sykes	Board Secretary (author)
Apologies:	Tim Breedon	District Service Director (Wakefield)

TB/11/24 Welcome, introduction and apologies (agenda item 1)

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

TB/11/25 Declarations of interest (agenda item 2)

No declarations of interest were made over and above those received by Trust Board in March 2011.

TB/11/26 Minutes of and matters arising from Trust Board meetings held on 29 March 2011 (agenda item 3)

Item 3.1 Public meeting 29 March 2011

In relation to minute TB/11/21c, it was agreed to add a sentence to refer to ongoing work on implementing the service user and carer experience framework. Subject to this amendment, **it was RESOLVED to APPROVE the minutes of the public session of Trust Board meeting held on 29 March as a true and accurate record of the meeting.**

There were two matters arising.

TB/11/19c Quality priorities (page 5)

Ian Black (IB) asked whether the local indicator had been chosen by the Members' Council as part of the audit of Quality Accounts for 2010/11. Gill Green (GG) responded that there was a meeting the following day with the sub-group of the Members' Council to come to a decision. IB reiterated his previous comments that he would wish to see the Members' Council come to a decision; otherwise, he would seek to raise this at the full Members' Council meeting.

TB/11/21b Finance report (page 8)

IB has asked for further information on the underspend on gas and electricity, which Alan Davis (AGD) will provide.

Item 3.2 Private meeting 29 March 2011

It was RESOLVED to APPROVE the minutes of the private session of Trust Board meeting held on 29 March 2011 as a true and accurate record of the meeting.

There was one matter arising, which was discussed in the private session, relating to TB/10/77 Proceeds from the sale of the St. Luke's site.

TB/11/27 Audit Committee annual report (agenda item 4)

Peter Aspinall (PA), as Chair of the Committee, commented on the positive, enthusiastic and professional approach to the process from all involved, which represented significant progress in this area to build on in future years.

It was RESOLVED to NOTE the view of the Audit Committee that it can provide assurance to Trust Board that, in terms of the effectiveness and integration of risk Committees, risk is effectively managed and mitigated through assurance that Committees meet the requirements of their Terms of Reference, that Committee workplans are aligned to the risks and objectives of the organisation within the scope of their remit, and that Committees can demonstrate added value to the organisation.

TB/11/28 Chief Executive's report (agenda item 5)

SM took Trust Board through the Chief Executive's briefing circulated on 21 April 2011 and highlighted, in particular, the local position for developing new commissioning arrangements. Nisreen Booya (NHB) asked whether the Trust should have a framework for engaging GPs, particularly GP consortia. JC reminded Directors that a paper had come to Trust Board some months ago. She thought further work should be included within the BDU Directors' remit and she would leave SM to agree how this would be reported back to Trust Board. SM commented that he thought it timely to provide Trust Board with an update.

SM also commented that this meeting could be used to provide a framework to review and appraise investment opportunities to support the Trust's strategic direction. Alex Farrell (AF) responded that a framework is in place; however, this tends to be on a case-by-case basis. It would be a logical next step to develop an overarching framework. SM suggested that the Young Foundation Innovation Appraisal tool could be used as a basis for a Trust Board discussion on a framework for evaluation of opportunities and include as part of the May strategic discussion with a view to introducing a formal evaluation tool/framework from June 2011.

TB/11/29 Transforming Community Services – Barnsley (agenda item 6)

Dawn Stephenson (DS) took Trust Board through the paper, particularly areas of assurance provided to Trust Board and mitigation of risks associated with the

transaction. She also reported that Monitor will give a green governance rating and a financial risk rating of 3, which provides additional assurance to Trust Board on the transaction.

As part of the paper, DS asked Trust Board to confirm that it was satisfied that, although NHS Barnsley Non-Executive Directors had not been through the Trust's processes for Hospital Managers, they had been through training processes in Barnsley, which are deemed suitable. **It was RESOLVED to SUPPORT the proposal to appoint seven Non-Executive Directors of NHS Barnsley as Hospital Managers for this Trust.** (It was noted that these individuals continue as Non-Executive Directors of NHS Barnsley.) This arrangement will be supplemented by a number of the Trust's Hospital Managers who have indicated a willingness to cover the Barnsley area as required. Helen Wollaston (HW) confirmed that the new Hospital Managers would receive a presentation from the Trust lead on the Mental Health Act and from the Chair of the Hospital Managers' Forum. BF commented that this was not an unusual situation as a number of mental health trusts use Non-Executive Directors in this role.

Trust Board also RESOLVED that the existing staff within Care Services Direct authorised to accept papers in relation to detention under the Mental Health Act could continue to do so.

Subject to satisfactory resolution of three outstanding issues, **Trust Board unanimously RESOLVED to:**

- **NOTE the processes adopted and the assurances received in respect of the acquisition of Care Services Direct, including Monitor's assessment;**
- **APPROVE the transfer of Care Services Direct from NHS Barnsley at 00:01 on 1 May 2011;**
- **REQUEST the EMT to develop a performance management framework to underpin phase 2 of the transaction (integration phase and delivery of early benefits and synergies) for June 2011 Trust Board.**

JC summarised that this was a good outcome and thanked SR and the team in Barnsley for their hard work in facilitating the transfer. She will contact Tom Sheard, Chair of NHS Barnsley, to formally confirm Trust Board's decision.

TB/11/30 Newton Lodge full business case (agenda item 7)

It was RESOLVED to APPROVE the full business case with delegated authority to agree the Guaranteed Maximum Price and contract with the P21 provider, Interserve.

TB/11/31 Month 12 performance reports 2010/11 (agenda item 8)

TB/11/31a Section 1 – Integrated performance report: strategic overview (agenda item 8.1)

AF highlighted two issues running throughout 2010/11 relating to sickness absence and data quality, which will remain an issue in 2011/12.

In relation to sickness absence, AGD commented that actions put in place during 2010/11 are beginning to have some affect and the rate is beginning to reduce but not sufficiently to achieve the 4.5% target. Action will continue in 2011/12 with the focus on supporting managers in implementing the attendance policy consistently. There will also be a focus on physical wellbeing. He also commented that the Trust is performing well in comparison with other mental health trusts in Yorkshire and the Humber. The focus on the 4.5% target will remain in 2011/12 but there may be a move nationally to set this at 4%. He confirmed that CSD had a sickness level of 4.29% at the end of February 2011.

BF asked whether the Trust was setting an unachievable target as benchmarking shows the Trust is performing well. PA asked whether any benchmarking was undertaken with the private sector. AGD commented that he would expect support services to be significantly lower to offset higher levels in services. This is a big area of expense for the Trust and the approach is often very different in the private sector. Staff side has acknowledged that the target is challenging but is supportive that it is at the right level.

AF tabled end of year information in relation to Barnsley. CSD met its financial plan with a surplus of £500,000 and income variation of £1 million (£2 million was taken out to contribute to pooled savings and there was a £1 million income charge for children's services, which exceeded QIPP targets). The main area for compliance with targets remains with data quality. The ten-day turn round for performance reporting will prove a challenge for community services but a system will be in place for quarter one reporting in July 2011.

JC asked when the perinatal pathway work would be completed. GG responded that there is a workshop in May to update and refresh the pathway in each BDU and assured Trust Board that the Trust is able to provide advice to individuals accessing Trust services.

JC also asked whether e-rostering would be rolled-out to community teams. AGD responded that the first phase covered in-patient services and a decision will be needed on whether it should be rolled-out to community mental health services as the benefits are less likely to be financial and will focus on productivity and increased efficiency. This will also link into the RiO optimisation project currently underway.

TB/11/31b Section 2 – High level summary reports: HR and workforce development (agenda item 8.2(i))

AGD reported that fire lecture and appraisal targets had been met. E-rostering is making a real difference to agency spend and more work will be done on more effective use of bank staff instead of overtime. There will also be a re-profiling of service support staff to bring the Trust more into line with other mental health trusts. AGD will also provide an annual report on equality and diversity of Trust workforce to highlight the work the Trust is doing to address gaps. A more detailed report will be made to the Remuneration and Terms of Service Committee, particularly in relation to salary bands and ethnicity.

IB asked whether there was any scope for BDUs to set HR targets, which might indicate what 'good' looks like in a more meaningful way given that HR measures are

flat Trust targets. Anna Basford (ABa) responded that BDUs work with HR business partners currently to address underperforming areas to support the corporate position. ABe commented that sickness absence is different but other areas, such as appraisal and fire lecture attendance, should be the same across all parts of the Trust. SR commented that, in Barnsley, long-term absence is netted off the figures and then service lines are asked to explain why they cannot meet corporate targets. AGD suggested that a more detailed discussion would be useful at the Remuneration and Terms of Service Committee.

TB/11/31c Section 2 – High level summary reports: Compliance (agenda item 8.2(ii))
JC commented that she would like the format of the report to be reviewed for quarter 1 of 2011/12.

GG reported on a number of issues.

- The Quality Accounts have been sent to PCTs, local authority Overview and Scrutiny Committees, and Local Involvement Networks for consultation. The Clinical Governance and Clinical Safety Committee will approve the accounts on 17 May 2011 and Deloitte has begun its audit.
- An action plan has been developed and approved by the EMT to address the recommendations contained in the CQC Mental Health Act annual statement.
- The Trust is discussing the arrangements for an external review of the homicide in September 2009 in South Kirklees with NHS Kirklees.
- Work is ongoing with West Yorkshire Police in relation to responsibilities when a service user is absent without leave. Both organisations are also looking at developing a memorandum of understanding on the use of taser within NHS mental health settings. HW suggested a detailed discussion on this at the Mental Health Act Committee with a short paper to Trust Board.

TB/11/31d Section 3 – Finance report month 12 2010/11 (agenda item 8.3)
AF highlighted the following.

- The accounts were submitted on time to Monitor the previous Thursday.
- The end of year outturn is £3.6 million, which is different to month 11 due a £200,000 increase in the accrual for holiday pay through use of the e-rostering system to assess the level and provision for TCS costs of £300,000.
- There has been a reconciliation of the utilisation of underspend and what will be carried forward to 2011/12 and AF agreed to circulate this to Trust Board.

In response to a comment from PA, AF confirmed that a review of the use of provisions will be made every month and included in the finance report. SM commented that this will also inform decisions regarding investment opportunities.

BF asked whether it would be possible to determine margin in overall terms. AF responded that financial reporting and BDU monitoring will embed trend analysis and assessments of 'profitability'. IB also commented that there may be a case for reporting less detail and to focus more on trends.

TB/11/31e Section 4 – Exception reports: Risk assessment of performance targets 2011/12 (agenda item 8.4(i))

AF commented that the paper provides a prudent financial risk rating of performance targets in 2011/12. Key issues for will be data quality, 18-weeks, the Information Governance Toolkit, urgent and non-urgent assessments, and nutrition recording. She confirmed the Trust incurred a penalty of £45,000 against CQUINs in 2010/11.

CQUINs have become increasingly challenging and stretching in 2011/12. ABa commented that there is a realism within services that they have to take a pragmatic approach to achieving targets although services will work hard to ensure all are achieved. She also confirmed that agreement on targets still has to be reached with NHS Kirklees as the current proposal is unacceptable to the Trust.

It was RESOLVED to NOTE the content of the report and the changes to the performance and compliance requirements.

TB/11/31f Section 4 – Exception reports: Medical re-validation – organisational readiness self-assessment tool (agenda item 8.4(ii))

A paper was tabled. NHB commented that re-validation will be introduced in late 2012 and the organisation is required to assess its readiness against each step of implementation. She assured Trust Board that the Trust is well placed in terms of its self-assessment. Barnsley staff have been included and involved in development of policies and procedures. She also confirmed there will be a cost to the Trust associated with setting higher standards for appraisal and monitoring costs of approximately £50,000.

It was RESOLVED to APPROVE the ORSA submission for 2010/11 and to continue to support the development and running of the systems and processes necessary to ensure medical staff meet their obligations.

TB/11/31g Section 4 – Exception reports: NHS Services: personal, fair and diverse (agenda item 8.4(iii))

It was RESOLVED to:

- **NOTE the information set out in the briefing; and**
- **APPROVE the proposal to invite Surinder Sharma to a future Trust Board meeting as part of the ongoing development and commitment to the equality agenda.**

TB/11/32 Monitor Quarter 4 return 2010/11 (agenda item 9)

It was agreed to make a minor amendment to refer to provisions in the information on outturn. Subject to this amendment, **it was RESOLVED to APPROVE the exception report to Monitor.**

TB/11/33 Assurance Framework Q4 2010/11 and Risk Register and draft Assurance Framework for 2011/12 (agenda item 10)

Further work will be done by SM and AF on the format of the Assurance Framework for 2011/12 to ensure it remains a workable and live document, particularly as it is used for Executive Directors' quarterly reviews.

In relation to the risk register, BF commented that it was difficult to see the difference between high and extreme risk. SM responded that scoring means that items can be put onto the register despite sufficient mitigating action reducing the risk to a manageable level. Further work is needed to pare down the register to show high level risks, which will be reviewed for quarter 1 and Trust Board was generally supportive of the direction indicated by SM.

It was RESOLVED to:

- **NOTE the assurances provided for Q4 of 2010/11;**
- **APPROVE the draft assurance framework for 2011/12, subject to a further review of its format; and**
- **AGREE the risks recorded on the risk register.**

TB/11/34 Date and time of next meeting (agenda item 11)

The next public meeting of Trust Board will be held on Tuesday 28 June 2011 in the Wainhouse room, 5th floor, F Mill, Dean Clough, Halifax.

Signed **Date**