



Minutes of Trust Board meeting held on 26 June 2012

Present:	Ian Black	Chair
	Peter Aspinall	Non-Executive Director
	Bernard Fee	Non-Executive Director
	Julie Fox	Non-Executive Director
	Jonathan Jones	Non-Executive Director
	Helen Wollaston	Acting Deputy Chair
	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
In attendance:	Dawn Stephenson	Director of Corporate Development and Constitutional Affairs
	Bernie Cherriman-Sykes	Board Secretary (author)
	Alison Moreton	Wakefield LINK
Apologies:	Noreen Young	Director of Nursing, Clinical Governance and Safety

TB/12/32 Welcome, introduction and apologies (agenda item 1)

The Chair (IB) welcomed everyone to the meeting. The apology was noted.

TB/12/33 Declaration of interests (agenda item 2)

The following additional declaration was considered by Trust Board.

Name	Declaration
NON-EXECUTIVE DIRECTOR	
Helen Wollaston	Director, UK Resource Centre, a community interest company that promotes women in science, engineering and technology.

There were no comments or remarks made, therefore, **it was RESOLVED to formally note the declarations above.** No further declarations were made over and above those received by Trust Board in March 2012.

TB/12/34 Minutes of and matters arising from Trust Board meeting held on 24 April 2012 (agenda item 3)

It was RESOLVED to APPROVE the minutes of the public session held on 24 April 2012 as a true and accurate record of the meeting. There were no matters arising.

TB/12/35 Assurance from Trust Board Committees (agenda item 4)

TB/12/35a Remuneration and Terms of Service Committee 22 May 2012 (agenda item 4.1)

IB alerted Trust Board to the human resources exception report circulated with the minutes, which provides background information on performance matters.

TB/12/35b Audit Committee 10 April and 28 May 2012 (agenda item 4.2)

The minutes from April were noted. The meeting in May approved, on behalf of Trust Board, the annual report, accounts, and Quality Accounts for 2011/12, which form part of the agenda for this meeting.

TB/12/35c Clinical Governance and Clinical Safety Committee 3 April, 15 May and 12 June 2012 (agenda item 4.3)

Bernard Fee (BF) commented that the report from Deloitte on the Trust's Quality Accounts raised a number of areas for development and improvement during 2012/13, which Noreen Young (NY) will lead. The minutes were noted.

TB/12/35d Mental Health Act Committee 23 March and 15 May 2012 (agenda item 4.4)

Helen Wollaston (HW) drew Trust Board's attention to the service delivery objectives derived from the equality objectives as these have a much wider application than areas covered by the Committee.

TB/12/36 Chair's report (agenda item 5)

IB raised a number of issues.

- He would like a discussion at a future Trust Board on the unannounced visits in relation to process, themes and areas for action.
- Following reviews with all Non-Executive Directors, IB will confirm the Trust Board Committee structure in July 2012.
- The Trust will need to assess the implications of the Secretary of State's decision to take South London Healthcare NHS Trust into liquidation and the comments regarding other Trust's in a similar position. Steven Michael (SM) commented that the NHS Development Agency has been tasked with getting the remainder of NHS Trusts to Foundation Trust status and to put in place arrangements for those Trusts who cannot meet the requirements. The Trust may be required to be part of a local health economy solution.

TB/12/37 Chief Executive's report (agenda item 6)

SM commented on the following.

- The work by KPMG on integrated care pathways and integrated packages of care, and the Deloitte work on the forensic market offer.
- Monitor provided feedback on the Trust's annual plan 2012/13, which was very positive and a stage 2 review is unlikely. Two issues were raised in relation to data quality, which will be resolved by the end of Q2, and the fall in EBITDA. Monitor was assured by the rationale and explanation provided by the Trust.
- The stakeholder perception audit was a useful report and a communications plan has been agreed. It will support the basis for the review of the vision and values. An action plan will come back to Trust Board in July 2012.
- In relation to Investors in People, Trust Board would welcome a discussion on the consistency and fit with the values of the organisation and the benefits of accreditation.
- The first anniversary event for the Change Lab was held on 25 June 2012 and was well attended. The focus now is on embedding in mainstream services.
- The BMA day of action caused minimal disruption to services, most staff worked normally and there was no impact on patient safety.
- An interim clinical programme group has been set up in Barnsley to oversee development of the application for one clinical commissioning group for the area.

TB/12/38 Annual report and accounts 2011/12 (agenda item 7)

SM confirmed that the Trust received an unqualified audit opinion on the 2011/12 accounts and a positive opinion on the requirement to demonstrate Value for Money. The Head of Internal Audit Opinion for 2011/12 provided significant assurance that there is a generally sound system of internal control, designed to meet the organisation's objectives, and that controls are generally being applied consistently.

It was RESOLVED to RECEIVE and ADOPT the annual report and accounts for 2011/12.

Trust Board formally thanked all those involved in the production of the report and accounts.

TB/12/39 Quality Report 2011/12 (agenda item 8)

It was RESOLVED to RECEIVE and ADOPT the Quality Report for 2011/12.

TB/12/40 Month 2 performance reports 2012/13 (agenda item 9)

TB/12/40a Performance report (item 9.1)

Alex Farrell (AF) raised two issues in relation to CQUIN performance, particularly psychological therapies, and data quality, which would put the Trust at amber/red currently for Monitor's governance rating. Action is in place within each Business Delivery Unit (BDU) to address underperformance.

Peter Aspinall (PA) commented that the position with data quality appears to have been the same for some time. In response to comments made by Nisreen Booya (NHB) and AF, Jonathan Jones (JJ) commented that there were three aspects to the issue:

- that the Trust has the right policies and procedures in place;
- that it ensures staff follow these; and
- that it has the software in place to produce data that Trust Board can take assurance from.

SM responded that there is a clear link between policy, practice and compliance and offered a five-step plan for resolution.

- A group to be established with BDU, Quality Academy and clinical representation.
- Identification of key issues for compliance and clinical practice.
- Development of solutions for consideration by the Executive Management Team (EMT), linked back to policies and procedures.
- Assurance provided to the Clinical Governance and Clinical Safety Committee.
- Agreement of any further audit work required.

He agreed to bring a paper to the July 2012 meeting outlining progress with the above and the work to align policies, practice and compliance across BDUs.

Julie Fox (JF) commented that appraisal, disappointingly, remains an issue. Alan Davis (AGD) confirmed that the target was to achieve 80% by the end of Q1,

although there may be a delay in recording. A revised system will be introduced in April 2013, which is currently in the pilot stage, and this will clearly link performance, values and behaviours.

HW asked what more the Trust could do to achieve the Improving Access to Psychological Therapies (IAPT) targets. It was agreed this would be part of a much more detailed discussion in July. AF did comment, however, that the Trust is constrained somewhat by the model it is commissioned to deliver in Kirklees and, therefore, further discussion may be required with commissioners. HW asked for information on ethnicity of users of the service to be included in the paper.

It was RESOLVED to RECEIVE the performance report for month 2 2012/13.

TB/12/40b Finance report (item 9.2)

AF reported that the Trust is on track overall financially; however, there is an overspend in BDUs, which is mitigated by an underspend in support services. She is holding early meetings with BDU Directors to agree action to bring spend back to budget by the end of Q1 and assess any implications this will have for investment funding in this financial year. This will include any implications for capital spend. SM reminded Trust Board that funding of the capital programme can only be realised through delivery of the cost improvement programme.

AF also confirmed that there will be a review of provisions quarterly during 2012/13 (in July and then in October with the forecast year-end position).

It was RESOLVED to RECEIVE the finance report for month 2 2012/13.

TB/12/40c Exception report and action plans – serious incidents annual report 2011/12 (agenda item 9.3(i))

NHB introduced this item in NY's absence. BF commented that this had been a challenging year with more incidents than the Trust would want; however, the trend does reflect that experienced nationally. A number of key learning points were identified as a result of the internal audit of learning from serious incidents and action is in place to address the recommendations made. SM commented that sharing of best practice and learning is now far more embedded in Trust processes.

PA asked whether investigators would have the necessary degree of impartiality. NHB responded that the investigators will have wide experience of investigations and of identifying best practice and lessons to be learned and will be supported by a Clinical Reference Group made up of specialist advisers and clinical staff. This will be part of the Quality Academy structure and will also ensure learning is shared.

It was RESOLVED to RECEIVE the report, to NOTE the reference made to 'never events' and to APPROVE the priorities for 2012/13.

It was agreed that Trust Board would continue to receive assurance through the Clinical Governance and Clinical Safety Committee with the annual report coming to Trust Board annually. A presentation on the annual report will be made to the Members' Council on 1 August 2012.

TB/12/40d Exception report and action plans – ‘What matters’ customer experience report and Customer Services annual report (agenda item 9.3(ii))

Trust Board welcomed the report and provided feedback on the format and content, which will be taken into consideration for the next report in September 2012. SM suggested that this could also form an item for further discussion at the strategic session in November 2012. The report will also be presented to the Members’ Council on 1 August 2012.

It was RESOLVED to NOTE the patient experience report and the overview of complaints management in 2011/12.

TB/12/40e Exception report and action plans – Annual report on diversity in the workplace (item 9.3(iii))

Trust Board found the summary report useful and the recommendations were noted. It was suggested that it is received on an annual basis with detailed scrutiny through the Remuneration and Terms of Service Committee. Further analysis by BDU and by job role shows different profiles which demonstrates the strong link to BDU workforce plans and recruitment approaches within BDUs.

IB asked whether there was a corresponding profile of Trust service users. Dawn Stephenson (DS) responded that the Mental Health Act Committee receives information on detained patients as part of its monitoring of the Trust’s use of the Mental Health Act. It was agreed to bring a profile back to a future Trust Board to include all service users.

It was RESOLVED to NOTE the report.

TB/12/40f Exception report and action plans – Projects supported by the Innovation Fund (item 9.3(iv))

In introducing the paper, AF commented that the Fund had been well received internally and she would like to continue the Fund in 2012/13; however, the Trust must be mindful of realising measurable benefits from the projects supported. IB was slightly concerned that setting the bar too high might mean that the Fund is not taken up; however, JF responded that initiatives such as this take time to embed so she would like to see it repeated this year based on service user feedback and focussing on quality and sustainability. BF commented that he would prefer to see the Trust giving BDUs a set sum, which can be used locally as BDUs wish. Trust Board was keen that a review process is in place to ensure the Fund is utilised.

It was RESOLVED to NOTE the report.

TB/12/40g Exception report and action plans – Sustainability Strategy update (item 9.3(v))

The report was noted. IB suggested that, at some point prior to 2014/15, the Trust should review its carbon management targets and he would like reporting to Trust Board to show where the Trust is in relation to its targets when reporting mechanisms are in place. It was also agreed that sustainability should be a key part of the Innovation Fund.

It was RESOLVED to NOTE the update and the priorities for the coming year.

TB/12/41 Items for approval (agenda item 10)

TB/12/41a Review of Standing Orders, Standing Financial Instructions and Scheme of Delegation (agenda item 10.1)

It was RESOLVED to APPROVE the proposal to defer a review of the Standing Orders, Standing Financial Instructions and Scheme of Delegation until October 2012, pending any changes required to the Constitution as a result of the Health and Social Care Act 2012.

TB/12/41b Research and Development Capability Statement (agenda item 10.2)

It was RESOLVED to RECEIVE the Research and Development Capability Statement.

TB/12/41c Treasury Management Policy (agenda item 10.3)

JF asked if there were any changes proposed as a result of the downgrading of a number of banks the previous day. AF responded that there were not as yet and confirmed the Trust had experienced no issues as a result of the problems at Royal Bank of Scotland. It was noted that a request has been made to Monitor to update its guidance.

It was RESOLVED to NOTE the report and the actions taken by the Audit Committee to mitigate investment risk.

TB/12/42 Use of Trust seal (agenda item 11)

It was RESOLVED to NOTE use of the Trust's seal since the last report in March 2012.

TB/12/43 Date and time of next meeting (agenda item 12)

The next public meeting will be held on Tuesday 25 September 2012 in Rooms 49/50, Ground Floor, Large Mill, Folly Hall, Huddersfield.

Signed **Date**