



Minutes of Trust Board meeting held on 31 July 2012

Present:	Ian Black	Chair
	Peter Aspinall	Non-Executive Director
	Bernard Fee	Non-Executive Director
	Helen Wollaston	Acting Deputy Chair
	Steven Michael	Chief Executive
	Nisreen Booya	Medical Director
	Tim Breedon	Acting Director of Nursing
	Alan Davis	Director of Human Resources and Workforce Development
In attendance:	Anna Basford	District Service Director, Calderdale and Kirklees (item 6)
	Dawn Gibson	Deputy Director of Finance
	Sean Rayner	District Service Director, Barnsley (item 6)
	Dawn Stephenson	Director of Corporate Development and Constitutional Affairs
	Karen Taylor	Director of Service Improvement and Development (item 6)
	Bernie Cherriman-Sykes	Board Secretary (author)
Apologies:	Julie Fox	Non-Executive Director
	Jonathan Jones	Non-Executive Director
	Alex Farrell	Deputy Chief Executive/Director of Finance
	Noreen Young	Director of Nursing, Clinical Governance and Safety

TB/12/44 Welcome, introduction and apologies (agenda item 1)

The Chair (IB) welcomed everyone to the meeting, in particular Dawn Gibson (DG), attending for Alex Farrell (AF), and Tim Breedon (TB), attending as Acting Director of Nursing in the absence of Noreen Young (NY). Trust Board noted that TB will also assume the role of Caldicott Guardian during this acting period. The apologies were noted.

TB/12/45 Declaration of interests (agenda item 2)

Trust Board noted the removal of a declaration from the Chief Executive (SM) in relation to the Harrison Trust. There were no comments or remarks made, therefore, **it was RESOLVED to formally note the removal.** No further declarations were made over and above those received by Trust Board in March 2012.

TB/12/46 Minutes of and matters arising from Trust Board meeting held on 26 June 2012 (agenda item 3)

It was RESOLVED to APPROVE the minutes of the public session held on 26 June 2012 as a true and accurate record of the meeting. There was one matter arising.

TB/12/40 Data quality – an update on the progress of the five-step process outlined by SM is included in agenda item 8.5(i).

TB/12/47 Developing the next stage vision for the Trust (agenda item 4)

SM commented that the paper comes to Trust Board at a pertinent time and reflects the work that has gone into developing the next stage of the vision. It was generally agreed that the mission still holds true although there may be more fitting words to

describe the Trust's purpose, such as enabling people to live "healthy and fulfilling lives". The following comments were made during the discussion.

- Helen Wollaston (HW) commented that the values should articulate what the Trust will do to meet the shared aspirations for service users and staff.
- She also questioned whether the envisioned future was realistic and it was generally agreed it needed to be qualified whilst retaining a sense of ambition.
- In response to a question from Peter Aspinall (PA), Nisreen Booya (NHB) commented that the differentiation between senior managers and clinical leaders was appropriate as these are two distinct groups and, historically, occupy different positions in relation to leadership within the organisation. The Trust would wish to reconcile these two groups in the leadership of the organisation and work has begun with the development of Business Delivery Units (BDUs).
- Bernard Fee (BF) commented that the value of the Leeds Metropolitan University work was that it demonstrated the need for embedding the Trust's mission, vision and values and the need to engender transformational change. Alan Davis (AGD) supported this as the Trust's values need to be part of day-to-day operations, for example, during recruitment and appraisals.
- SM responded that the Trust needs a bottom-up approach driven from the top of the organisation. BF commented that the Trust may not have always encouraged staff to work to its vision and values. Trust Board must be responsible for ensuring it operates within the vision, particularly Executive Directors, and instils the values at all points in the organisation.
- IB commented that he would like to see tangible outcomes and achievements to reflect the aspirations set out in the paper and to set aside time to assess where the Trust is against these. Trust Board is also vital to the communication to support organisational culture.

With regard to the name of the Trust, BF felt the values the Trust holds for individuals is more fundamental and how the organisation demonstrates these values than lengthy deliberation on the Trust's name. PA was of the view that the acronym 'SWY(P)FT' works; however, the Trust does not have to have partnership in its title to successfully work in partnership with others.

There was a general feeling that 'South West Yorkshire' is meaningless and that there may be scope to explore local identity based on an organisational name, which reflects the communities the Trust serves. SM commented that there is a positive response to the Trust's 'logo', which could be localised and this could be further explored with staff and stakeholders.

It was RESOLVED to:

- **APPROVE the content of the report as a clear means of addressing the recommendations outlined in the recent stakeholder audit undertaken by Leeds Metropolitan University;**
- **AGREE the outline vision for the Trust as detailed in the paper as the starting point for further stakeholder consultation, subject to consideration of the comments made by Trust Board;**
- **AGREE the principles as described in the paper as reflective of the organisation's culture and values and that these are used as part of the stakeholder consultation referred to above;**

- **INCLUDE** consideration of the Trust's name in the engagement process bearing in mind the comments made by Trust Board;
- **DEVELOP** a framework for tangible outcomes and deliverables for consideration at Trust Board in September.

TB/12/48 Estates Strategy (agenda item 5)

AGD took Trust Board through the paper and outlined the next steps including development of a consultation and engagement plan and prioritisation of developments, linked to financial and capital plans. Trust Board noted that the Trust is to receive approximately £2 million from NHS Barnsley for the re-location of the stroke rehabilitation unit from poor quality accommodation at Mount Vernon to a newly refurbished unit at Kendray Hospital. NHS Barnsley is providing the capital monies for the scheme as landlord and commissioner to ensure sustainability of the service as an integral part of the stroke pathway in Barnsley.

HW asked whether, as the proposals were set out by BDU, this precluded a Trust-wide approach, particularly to in-patient services. AGD responded that a review of in-patient services, led by Karen Taylor (KT), will begin in September/October and will make links and connections to other areas of the Strategy. Therefore, it will remain a flexible and live document to reflect changing opportunities and challenges. However, the initial focus will be on community infrastructure and this will have implications, links and connections to other areas, such as existing in-patient provision and support services.

IB did not support the proposal for the Estates Forum to approve the Strategy. He was of the view that this was a matter for the full Board; however, Trust Board does not have to receive the full, detailed Strategy and appendices, which can be scrutinised in detail through the Estates Forum. He was happy for the full document to be circulated to those Directors who wished to see the detail.

SM commented that he would wish to see the Estates Forum continue for a further period to ensure the implementation plan is developed and prioritised and that the estate transfer from NHS Barnsley is completed as the Forum's role and contribution so far has been invaluable.

A detailed prioritised implementation plan will come to Trust Board in October and SM suggested a presentation over lunch to inform and support this.

IB asked whether the timescales were sufficiently quick in terms of the level of the Trust's surplus although he accepted that the consultation and engagement processes could be lengthy. He would like to see the implementation plan resolve this contradiction. Dawn Stephenson (DS) commented that early engagement on the principles with Overview and Scrutiny Committees will be vital across all four local authorities. IB asked whether the Trust would consult on the entire plan or just specific parts. SM responded that the plan should be supported by a clear and detailed communications and engagement plan over the five-year scope of the Strategy.

IB also commented that the Trust needs to be clear what its cash is for and BF's comment that the Estates Strategy will also generate cash through efficiency savings and disposal of surplus properties was noted. PA commented that cash could be used in other areas where the Trust can develop its services.

IB also asked for a detailed capital plan to be included in the paper in October and he indicated that he would like to see more capital proposals coming through to Trust Board for approval and not just in support of the Estates Strategy. BF commented that, although pace is important, the plan needs to be well constructed and well designed to ensure it reflects a corporate approach to delivery of services. NHB commented that community hubs must be linked to models of service and, therefore, the funds the Trust has might not be sufficient.

It was RESOLVED to NOTE the process adopted to formulate the Estates Strategy. This was considered a good process, which has worked well and could be replicated in other areas in future. **It was also RESOLVED to:**

- **APPROVE the priorities as appropriate for the Trust's current strategic position; and**
- **APPROVE the Estates Strategy with a detailed prioritisation plan coming back to Trust Board in October.**

TB/12/49 Improving Access to Psychological Therapies (IAPT) (agenda item 6)

Anna Basford (ABa), KT and Sean Rayner (SR) joined the meeting.

It was RESOLVED to SUPPORT the approach outlined in the paper presented by KT.

TB/12/50 Investment appraisal framework (agenda item 7)

DS introduced this item on behalf of AF and **it was RESOLVED to NOTE the progress made on key investment projects.**

TB/12/51 Month 3 performance reports 2012/13 (agenda item 8)

TB/12/51a Performance report (item 8.1)

DG highlighted the following.

- The Monitor governance risk rating is amber/green due to the underperformance against the target for the % of service users on CPA who have had a formal review recorded in the last twelve months. A commitment has been made to Monitor to achieve this target by the end of Q2.
- The Monitor financial risk rating remains green.
- CQUINs are risk rated as amber/green due to performance on urgent and non-urgent access, access to psychological therapies, nutrition standards and wellbeing indicators.
- Issues remain with mental health clustering.

- Sickness levels are above the Trust's target; however, they remain on a downward trend.
- A delay in releasing the electronic information governance training programme nationally has resulted in an underperformance on the Trust's target.
- Trust Board noted that the appraisal target has been met and asked for the findings of the pilot of the new appraisal process to be brought back to Trust Board as appropriate.

It was RESOLVED to RECEIVE the performance report for month 3 2012/13.

TB/12/51b Strategic workforce report: Investors in People (item 8.2)

AGD explained how the process had focussed on the BDU structure and reflected a lean and effective, bottom-up approach, driven internally and externally validated and evidenced. There are a number of areas for development, which were outlined in the paper.

SM commented that this was an excellent achievement but he had reservations about going for GOLD in 2013/14. He asked what value it would offer given the huge challenges the Trust is facing in the next two years. AGD responded that liP is a flexible model and supports the next phase of the Trust's vision. SM, however, remained concerned that it would put pressure on services already challenged. IB was happy for Trust Board to support the approach if it did not mean more work or increased investment and represented a recognition of what the Trust does already.

It was RESOLVED to NOTE that the Trust successfully achieved liP re-accreditation for the whole organisation.

TB/12/51c Quality and compliance report Q1 2012/13 (item 8.3)

TB took Trust Board through the report, which also contained an analysis of the unannounced visits programme. BF asked for 'softer' information in the form of comments and quotes from service users and staff involved in the next report. He also suggested capturing what action has been taken as a result of the themes emerging. He would also like to see this feedback given to service users and staff who have participated in the visits. NY's contribution in setting up and promoting the programme was noted. IB commented that he would like to participate in more unannounced visits given their usefulness and the positive outcomes.

It was RESOLVED to NOTE the report.

TB/12/51d Finance report (item 8.4)

DG outlined the key points from the report.

- The overall position at month 3 is showing a net surplus of £1.5 million, which is in line with plan. The planned surplus for the year is £5.9 million and the current projection is that this will be achieved; however, the year-to-date position includes £150,000 overspend position in BDUs, which is offset by an underspend in support services and increased income from interest on investments. Plans are in place within each BDU to bring this position back to plan.
- At month 3, the cash position is £22 million, which is in line with plan.

- Capital expenditure to June is £1.9 million which is in line with plan. The capital programme for the year is £10.4 million and the forecast is to achieve this position.
- At month 3 the cost improvement programme is showing a £70,000 underperformance against a plan of £2.3 million. Remedial action is being taken to ensure the CIP is delivered to plan.
- The Financial Risk Rating at June is 3.7 slightly above the plan of 3.6.
- The Better Payment Practice Code target for payment of invoices is 95% within 30 days. At 30 June 2012, 97% of non-NHS and 98% of NHS invoices have been paid to this target.
- Information on the provisions position was also included in the report as requested previously by Trust Board.

BF asked that BDUs are given a clear message that each needs to achieve its financial targets rather than using contingencies, such as the Innovation Fund, to cover overspends. He asked that one key contributory area, that of the sickness level in forensic services, is considered by the Remuneration and Terms of Service Committee in more detail. IB commented that Trust Board felt a strong affinity with the Innovation Fund to support improvements in services. SM agreed that he would discuss further with the Executive Management Team to determine how the forecast will come back into line with the plan. At month 5, Trust Board needs a more detailed understanding of the overspend position, including how the Trust is spending its Innovation Fund. Trust Board did not want to see a further delay in its implementation.

There will also be a more detailed review of CQUINs at month 4, which will inform a more detailed paper for Trust Board in month 5.

It was RESOLVED to NOTE the finance report for month 3 2012/13.

TB/12/51e Exception report and action plans – Clinical data quality (agenda item 8.5(i))

TB introduced this item on behalf of AF and outlined the key messages from the report.

- TB assured Trust Board that immediate action was taken following the information governance incident reported the previous week.
- PA asked about timescales for implementation of the action plan and TB agreed to provide further information outside of the meeting.
- HW noted that Barnsley BDU performs higher on the % of service users on CPA with a formal review. One key difference is a culture in Barnsley of recording activity to demonstrate performance and the InPaC team is looking at performance across all BDUs to learn lessons. There is a commitment to achieve this target by the end of Q2 2012/13.
- IB asked if there were any areas or vital signs that the Trust should be looking for standardisation regionally or nationally. NHB outlined a number of areas where this would make a big difference.
- BF commented that the report was not easy to read and asked that it followed a similar framework to the finance and performance reports if it is to be presented to Trust Board again.

It was RESOLVED to NOTE the key strategic issues in relation to data quality.

TB/12/52 Monitor quarter 1 return 2012/13 (agenda item 9)

DS took Trust Board through the report and it was **RESOLVED to APPROVE the exception report to Monitor.**

TB/12/53 Governance issues (agenda item 10)

TB/12/53a Health and Social Care Act 2012 (item 10.1)

It was RESOLVED to NOTE the briefing and the approach taken by the Trust.

TB/12/53b Annual health and safety report 2011/12 and action plan 2012/13 (item 10.2)

The report will be used as a benchmark for future years and the format will be reviewed for 2012/13. Trust Board noted the significant assurance from an internal audit of health and safety arrangements and the action plan included in the report.

It was RESOLVED to NOTE the report and to APPROVE the high level action plan for 2012/13.

TB/12/53c Assurance Framework and organisational risk register Q1 2012/13 (item 10.3)

It was RESOLVED to:

- **NOTE the process for producing the 2012/13 assurance framework and assurances provided for Q1 2012/13; and**
- **NOTE the areas where gaps in assurance have been identified through the risk register and are being addressed through specific action plans as appropriate, led by the lead Director.**

TB/12/54 Trust Board Committees

IB confirmed one change to Trust Board Committee membership. From 1 August 2012, Julie Fox will take over as Chair of the Charitable Funds Committee and the current Chair, Jonathan Jones, will stand down from the Committee. The Estates Forum, chaired by Jonathan Jones, will remain in place for the next few months.

TB/12/55 Date and time of next meeting (agenda item 11)

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**