

Minutes of Trust Board meeting held on 19 December 2017

Present:	Angela Monaghan	Chair
	Charlotte Dyson	Deputy Chair
	Laurence Campbell	Non-Executive Director
	Rachel Court	Non-Executive Director
	Chris Jones	Non-Executive Director
	Kate Quail	Non-Executive Director
	Dr Adrian Berry	Medical Director
	Tim Breedon	Director of Nursing and Quality
	Alan Davis	Director of Human Resources, Organisational Development and Estates
	Mark Brooks	Director of Finance and Resources
	Rob Webster	Chief Executive
Apologies:	Nil	
In attendance:	Carol Harris	District Director - Forensics and Specialist Services, Calderdale and Kirklees
	Kate Henry	Director of Marketing, Communications and Engagement
	Sean Rayner	District Director - Barnsley and Wakefield
	Karen Taylor	Director of Delivery
	Salma Yasmeen	Director of Strategy
	Emma Jones	Company Secretary (author)

TB/17/93 Welcome, introduction and apologies (agenda item 1)

The Chair, Angela Monaghan (AM) welcomed everyone to the meeting. There were no apologies.

AM advised that prior to the Trust Board meeting the Board attended a learning and development session on health and safety, including corporate manslaughter and fire safety.

TB/17/94 Declaration of interests (agenda item 2)

Chris Jones (CJ) declared a potential interest as the Interim Chief Executive Officer at Bradford College from January 2018.

There were no further declarations over and above those made in the annual return in March 2017 or subsequently.

TB/17/95 Minutes and matters arising from previous Trust Board meeting held 31 October 2017 (agenda item 3)

It was **RESOLVED** to **APPROVE** the minutes of the public session of Trust Board held 31 October 2017 as a true and accurate record. The following matters arising were discussed:

TB/17/87c Workforce race equality standard (WRES) summary report

Alan Davis (AGD) advised that the WRES would go as a regular update to the Equality and Inclusion Forum.

17/88a Safe Working Hours Doctors in Training report - quarter 1 2017/18

Dr Adrian Berry (ABe) advised that there was no formal benchmarking information available. The Trust was similar in comparison to a review of other mental health and community Trusts' published reports.

TB/17/90 Assurance from Trust Board committees (Audit Committee 10 October 2017)

Mark Brooks (MB) advised that the updated risk register would come to Trust Board in January 2018.

TB/17/96 Chair and Chief Executive's remarks and Service User Story (agenda item 4)

Chair's remarks

AM advised the following changes to committee membership from 1 December 2017:

- Audit Committee - Rachel Court will now be a member.
- Clinical Governance & Clinical Safety Committee - Angela Monaghan and Kate Quail will now be members.
- Mental Health Act Committee - Kate Quail will now be a member.
- Remuneration & Terms of Service Committee - Angela Monaghan will now be a member.
- Equality & Inclusion Forum - Angela Monaghan will now be the Chair of the Forum and Chris Jones will now be a member.
- Charitable Funds Committee - Angela Monaghan and Kate Quail will now be members.

AM advised that her appointment as Chair had created a Non-Executive Director vacancy. Following consideration, recruitment for a replacement Non-Executive Director would be placed on hold due to financial constraints and would be reviewed in 2018. The current number of Non-Executive Directors is still in accordance with the Trust's Constitution.

Service User Story

Tim Breedon (TB) read a story in the service user's own words entitled "Two short stories about motherhood." The story would be used for the launch of the perinatal service in Wakefield at St Swithun's Community Centre and provided an example of the depth of need of a community-based perinatal service.

Chief Executive's remarks

Rob Webster (RW) highlighted the following:

- Nationally the budget included additional resource for the NHS over winter with around £20m for mental health schemes. The Trust had secured around £200k for services across Barnsley, Calderdale, Kirklees and Wakefield, primarily around supporting discharge and mental health liaison. The Trust needs to report to NHS England and to confirm what the money will be spent on, along with a fortnightly update on the spend and how it is making a difference to the NHS.
- Further correspondence is being received from national bodies to Trusts and CCGs, coordinated by Sustainability and Transformation Partnerships (STPs) asking for more work to be done on a range of schemes so that additional funds can be provided for the services.
- The West Yorkshire & Harrogate STP Chair & Chief Executive meeting discussed the development of Committees in Committee (CiC) to strengthen partnership working. It felt like a good meeting of true partners who want to do the right thing for the service.

- Care Quality Commission (CQC) pre-inspection information was submitted on time and was a substantial piece of work. Thank you to staff for the time taken to process the requests.
- Inpatient services provided by the Trust at Mount Vernon has now ended with the transfer of staff to Barnsley Hospitals. We wanted to mark the passing of services that have been provided there for decades with compassion and care, which was recognised by the CQC. Thank you to staff involved in the transformation of services into Barnsley Hospital and a new model of intermediate care.

It was RESOLVED to note the Chair and Chief Executive's remarks, Service User Story and Chief Executive's report.

TB/17/97 Performance reports (agenda item 5)

TB/17/97a Integrated performance report month 7 2017/18 (agenda item 5.1)

MB advised that due to timing of the December meeting, month 8 data was not yet available. The report for month 7 was provided along with a separate report on finance for month 8 under agenda item 5.2.

TB highlighted the following in relation to Quality:

- The number of under-18 admissions to adult wards remains a concern although the appropriate governance is in place to assure safe services. Tier 4 Child and Adolescent Mental Health capacity is being addressed at regional and national level but the timescales for resolution remain distant.
- Safe staffing levels have been maintained. Pressures continue to be present in some areas resulting in a dilution of skill mix to maintain safe ratios
- Out of area bed days are showing an increase. Staff attended a Change Acceleration Programme and gained insight on further work that can be done, as well as lessons learned from other areas that can be incorporated.
- Work taking place on the complaints review process with more focus from clinical perspective and process mapping to improve response time. The 40-day target is a self-set target against the system requirement of six months.
- There was a Duty of Candour breach where the Trust was unable to contact the person.
- Medicines Omissions where people refuse medication was showing improvement against the target.
- Supervision is a new metric with work to do in relation to recording of supervision information. Carol Harris (CH) commented that assurance was provided to the Operational Management Group (OMG), with further work needed on embedding the process.
- Care Quality Commission (CQC) provider information request has been submitted as required and they will decide when they will revisit around service visits and the well-led review. Data will be refreshed every six months.
- Information Governance (IG) confidentially breaches have reduced with one matter reported to Information Commissioners Officer (ICO) with actions identified.

Laurence Campbell (LC) asked for an update on the progress against the CQC 'must do' action on psychological therapies, which is RAG rated red. TB advised that there was ongoing dialogue with the CQC as some areas are not within the Trust's control due to commissioner funding. This has been an area of focus by the Clinical Governance and Clinical Safety Committee.

RW asked for assurance in relation to improving performance against the supervision metric. Karen Taylor (KT) advised that the discussion at the OMG accepted that the system was not up to date and that if performance was measured on the manual process it would reach the target. TB comment that evidence through visits shows that that supervision is in place and the new metric assists to ensure it is recorded.

Sean Rayner (SR) highlighted the following in relation to Locality (Barnsley and Wakefield):

- The new intermediate care model is now live in Barnsley. The A&E Board has been successful in a bid to open further escalation beds. It will be important to consider whether this masks the impact of the new model.
- The Trust hosts the South Yorkshire Liaison and Diversion scheme and is receiving positive feedback in relation to this from the national and regional team. Two additional posts have been secured to support work to develop a Vulnerable Persons Hub in Barnsley. Close partnership working with the Council, the police and Safer Neighbourhood teams have been instrumental in securing the investment
- The Improving Access to Psychological Therapy (IAPT) service has met all three Key Performance Indicators (KPIs) in October 2017. Progress against the improvement plan and trajectories following the collaborative approach with the CCG and national Support Team is positive.
- An increase in managing aggression and violence (MAV) incidents is noted in the report. Debriefs with the MAV team are undertaken following each incident to ensure that any lessons are learned. Analysis of any trends or themes takes place at the BDU Clinical Governance and Service Line meetings.

RW commented that there had been some national messages around physical violence and aggression and the inappropriate use of restraint and sought assurance that this had been considered. TB advised that the Clinical Governance & Clinical Safety Committee receive a report on MAV with a reducing physical interventions group working solely on that area. The Trust has good systems and processes in place with all alerts going through to MAV specialist advisors for review.

CH highlighted the following in relation to Locality (Calderdale and Kirklees):

- Works to showers on The Dales has meant a two bedroom reduction for past 6-8 weeks, which caused pressure on admissions.
- Psychiatric Intensive Care Unit (PICU) use and need remains high, especially female PICU.
- Delayed Transfer of Care (DTC) in older adults in Calderdale have been subject to a great deal of activity and focus. It is now picked up in Greater Huddersfield and Calderdale Better Care Fund reporting and Council and Clinical Commissioning Group (CCG) colleagues are providing additional focus and capacity to all DTC issues including those in mental health services. Some Better Care Fund (BCF) monies in Kirklees and Calderdale are identified for mental health activity. We are working up proposals in both areas.
- Improving Access to Psychological Therapies (IAPT) in Kirklees is showing a significant improvement. The teams are undertaking weekly reviews of performance based on an agreed action plan with commissioners concerning access targets to treatment.

CH highlighted the following in relation to Forensic Services:

- Service review work is continuing nationally. Further stakeholder event was held 13th November. Whilst West Yorkshire technically does not need a reduction in overall bed capacity, the configuration of the beds is an issue in order to ensure all service users are catered for within the STP footprint.
- Looking at the possible use of Gaskell Ward to assist with reduction of out of area placements for PICU as an interim measure.
- Significant improvements made in the delivery of 25 hours meaningful activity have continued. The service will continue to monitor this to ensure that improvements are embedded.
- Work around the implementation of the regional Forensic CAMHs (FCAMH) service is progressing well and the implementation is being negotiated with NHS England.
- FCAMHs/LCH won the national Nursing Times Award for Partnership Working.

CH highlighted the following in relation to Specialist Services:

- Recently announced that the West Yorkshire and Harrogate STP will receive £13m funding for a new CAMHS inpatient unit (Leeds Community Healthcare Trust). This investment will complement the new models of care work regarding improved crisis response within specialist child and adolescent mental health services. As part of this work, 3 care navigators will shortly be appointed across the STP area to strengthen inpatient admission/discharge processes.
- The CAMHS waiting list initiative has, at the end October 17, enabled 192 children/young people to receive more timely support and be removed from the waiting list. The initiative has increased staffing to secure additional bank/agency capacity for a 6month period (September 2017 to March 2018). In total it is expected that 400 children/young people will be supported by the initiative. CAMHS is an area of focus of the Clinical Governance & Clinical Safety Committee, which receives a report including vacancies and the impact on service users and waiting times.
- Learning Disability local reporting identifies significant improvement with regard to waiting times. However, urgent intensive support response times in Barnsley dipped below target in October 17. This is not expected to be a recurrent problem.
- OFSTED visit in relation to ASAD/ADHD in Wakefield found that the system was not working together to address issues identified. The local authority arranged a working group to put together a plan which has seen significant improvements. OFSTED were satisfied that the plan will meet their requirements. It is a good example of where there was a shared problem and partners came together as a system to address it.

SY highlighted the following in relation to Priority Programmes:

- Flow and Out of Area Beds - has been discussed previously
- Older Peoples Transformation - production of the community workforce modelling has been delayed for this priority and although a revised plan is in place the project is RAG rated as yellow as the business case will not be submitted as planned in November.
- Clinical records system - continues in initiation phase with significant progress being made. System demonstrations are taking place and there is good staff engagement.
- Leadership management - a range of workstreams/key deliverables have progressed to agreed timescales in this priority. This programme is still on track and a revised implementation plan with extension to some work-streams is in place.

AGD highlighted the following in relation to Workforce:

- Work taking place to develop an internal wellbeing and attendance management programme with clearer guidance provided to managers and areas identified for a deep dive.
- Appraisal rate for staff is below target with reminders in place.
- The Trust is participating in an NHS Improvement programme on retention with work taking place to understand our annual turnover rate which is low compared to others however is a key issue for the Trust.
- Flu vaccination levels currently at 68.4% and close to the target. MB highlighted that the Trust would lose £170k of CQUIN income if 70% not achieved and welcomed the continued focus.

It was RESOLVED to NOTE the Integrated Performance Report.

TB/17/97b Finance report month 8 2017/18 (agenda item 5.2)

MB highlighted the following:

- Reported pre-STF (Sustainability and Transformation Funding) surplus of £0.4m generated in November. Excluding the one-off final insurance settlement there is an underlying net deficit of £0.1m.
- Cumulatively there is now a pre STF surplus of £235k which is £58k below plan. In-month out of area bed costs were £277k meaning the year-to-date overspend is now in excess of £1.5m. Roughly half is female PICU.
- Agency costs of £531k were the highest of any month this year and were £120k above the lower value agency cap in November. Year-to-date costs are now £3.8m which is a 43% reduction compared to the same period last year and £0.2m below the cap.
- CIP delivery of £4.8m is £458k adverse to plan.
- Pay costs were broadly in line with previous month and £0.2m lower than plan.
- Achievement of the year-end control pre STF total of £1.02m total remains a significant challenge given the variances associated with out of area beds and reduced income relating to intermediate care. This will further reduce as the new model is introduced and care navigation decommissioned.
- Cash is slightly ahead of plan at £20.9m with lower than plan capital expenditure and continued focus on working capital management.
- Currently maintaining year end forecast and it will take a very concerted effort to achieve it.
- Looking at plans for 2018/19 and given what we know now there will be a significant challenge of approximately £12-13m.

CJ asked what the assumption was behind the normalised surplus from £300k to £1m at year end. MB commented that most significant would be the ability to recognise the CQUIN risk reserve income.

AM asked if staff were fully aware and briefed on the current financial situation. RW advised that an update is provided to staff in the monthly communications through *The Brief*. Staff are conscious of the challenges faced and have responded well with non-pay and pay expenditure showing significant savings.

It was RESOLVED to NOTE the Month 8 Finance report.

TB/17/97c Serious incident report quarter 2 2017/18 (agenda item 5.3)

TB commented that the report is received and discussed by the Clinical Governance and Clinical Safety Committee and highlighted the following:

- Overall figures have increased following a slight downward trend in the previous two quarters.
- 89% incidents were graded as low or no harm.
- Physical aggression/threat still remains the highest category and work is taking place to see whether there are linkages to the Smoking Policy.
- No Never Events.
- Number of Serious Incidents was slightly higher than last year which needs to be looked at over a longer period, including the apparent suicide category.
- Many reports are outside the 60 day target, all of these have agreed extensions with Commissioners. The team have noted an increase in the complexity of investigations and steps are being made to reduce backlog of reports by increasing capacity of internal and external investigators.
- The National Confidential Inquiry into Suicide and Homicide by people with Mental illness annual report 2017 will be discussed at the next Clinical Governance & Clinical Safety Committee meeting.

AM asked if there were any themes in connection to the Smoking Policy. CH commented that the group reviewing the Smoking Policy was looking at lessons learned from other Trusts including the possibility of introducing vaping. TB commented that the Chief Executives of providers of mental health services in Yorkshire and the North East have asked that a system approach be established to assist with service users who move around the system.

It was RESOLVED to NOTE the quarterly report on incident management and the assurance given by the Clinical Governance and Clinical Safety Committee.

TB/17/98 Governance matters (agenda item 6)

TB/17/98a Single Oversight Framework update (agenda item 6.1)

MB highlighted that NHS Improvement introduced the Single Oversight Framework in 2016 and after consultation have issued a revised framework. Within the update the area that impacts the Trust is the introduction of a metric around out of area beds. The timescale for implementation was to be confirmed.

It was RESOLVED to NOTE the forthcoming changes to the Single Oversight Framework which will be reported on via the Integrated Performance Report (IPR).

TB/17/98b NHS Constitution assessment (agenda item 6.2)

Emma Jones (EJ) reported that the NHS Constitution, which was published in 2009, sets out the principles and values for the NHS in England and rights to which patients, public and staff are entitled. The NHS Constitution also includes pledges which the NHS is committed to achieving, together with responsibilities which the public, patients and staff owe to one another to ensure the NHS operates fairly and effectively. Annually the Executive Management Team provides the attached report to the Trust Board as assurance that the Trust is meeting its obligations under the NHS Constitution, which supports the Trust to adhere to its mission and values.

RW commented that in relation to the staff obligations there was a lot of polices and groups mentioned as evidence, however adherence and performance could be outlined further. He gave the example that the NHS staff survey showed bullying was still an area raised and the report could include narrative in future around the work taking place to address this.

It was RESOLVED to APPROVE the paper which demonstrates how the Trust is meeting the requirements of the NHS Constitution.

TB/17/97c Receipt of public minutes of partnership boards (agenda item 6.3)

A list of agenda items discussed and Minutes where available were provided for the following meetings:

- Wakefield Health and Wellbeing Board 23 November 2017 - SR commented that the Health Housing and Estates initiative was a programme of work focusing on how partners could work together to improve and understand social housing. It looks at seconding staff into the Clinical Commissioning Group.
- Kirklees Health and Wellbeing Board 14 November 2017 - CH commented that the Clinical Commissioning Group and Council are working together in a new committee structure for commissioning. Feeding into that is a commissioner board and a provider board, with the Trust as a member of the provider board.
- Barnsley Health & Wellbeing Board - SR advised that the December meeting had been cancelled due to lack of business.

TB/17/99 Assurance from Trust Board Committees (agenda item 7)

Clinical Governance and Clinical Safety Committee 14 November 2017

CD highlighted the following discussed by the Committee:

- Corporate/Organisational level risk in relation to waiting lists and the improvement plan. It is clear that demand is increasing which has a demand on resources.
- Child and Adolescent Mental Health Service (CAMHS) - detailed update provided.
- Safeguarding Adults annual report.
- Safeguarding Children annual report.
- Ligature annual report.
- Patient Safety annual report.
- Positive outcome of (Patient Led Assessment of the Care Environment) PLACE.

RW commented that the positive outcome of PLACE was an example that we are putting the right amount of focus in the right areas and asked whether they could be further strengthened with greater service user and carer involvement. AGD commented that PLACE follows national guidance and included a group of service users who had been trained on how to conduct the assessment.

Mental Health Act Committee 21 November 2017

CJ highlighted the following discussed by the Committee who receive assurance from a range of areas including the local authorities, coordinated by the Trust's legal team:

- The meeting was not quorate and a further meeting would take place on 19 December 2017 to ratify any decisions.
- New requirements for Sections 135 and 136 may have an impact on demand and capacity.
- Section 49 requirements and impact on workforce capacity.
- Outliers in relation to patient transfers, particularly in Dewsbury.

- Poor response rate to the Community Treatment Order audit. The Committee felt they were unable to take assurance from the audit results.
- Management of recurrent themes identified from Care Quality Commission visits and BDU response to action plans.

RW commented that NHS Improvement had requested assurance in relation to the new requirements under Section 135 and 136. To be discussed at the next Committee meeting.

Action: Dr Adrian Berry

Remuneration & Terms of Service Committee 19 December 2017

RC advised that following notice from Dr Adrian Berry that he would retire as Medical Director in April 2018, a meeting of the Remuneration & Terms of Service Committee took place to discuss arrangements for recruitment to the position. The Committee agreed to commence an internal recruitment process in January 2018 and if it was not successful it would be advertised externally.

TB/17/100 Use of Trust seal (agenda item 8)

It was **RESOLVED** to **NOTE** use of the Trust's seal since the last report in October 2017.

TB/17/101 Trust Board Work Programme (agenda item 9)

It was **RESOLVED** to **NOTE** the Work Programme.

TB/17/102 Date of next meeting (agenda item 10)

The next public meeting of Trust Board will be held on Tuesday 30 January 2018 in the Boardroom at Kendray in Barnsley.

Signed:



Date: 30 January 2018