

## Northumberland, Tyne and Wear



NHS Foundation Trust

## DRAFT Minutes

## Board of Directors' meeting

<b>Date:</b> Wednesday, 24 February 2016	<b>Time:</b> 13:30 – 15:30	<b>Venue:</b> St George's Park, Morpeth
<b>Present:</b>		
Hugh Morgan Williams	Chair	
Dr Leslie Boobis	Non-Executive Director	
Alexis Cleveland	Non-Executive Director	
Martin Cocker	Non-Executive Director	
Lisa Crichton-Jones	Executive Director of Workforce and Organisational Development	
James Duncan	Deputy Chief Executive / Executive Director of Finance	
John Lawlor	Chief Executive	
Paul McEldon	Non-Executive Director	
Dr Rajesh Nadkarni	Acting Executive Medical Director	
Lisa Quinn	Executive Director of Performance and Assurance	
Peter Studd	Non-Executive Director	
<b>In attendance:</b>		
Susan Hamilton	Administration Officer	
Eric Jarvis	Board Secretary	
Vida Morris	Group Nurse Director, Urgent Care (on behalf of Gary O'Hare)	
<b>Also present:</b>		
Mr Chris Macklin	NTW Governor	
Wendy Pinkney	Membership Manager	
Mr George Saint	Member of public	

Agenda Item	Discussion Captured	Action owner
16/16	<b>Welcome and apologies</b>  Neil Hemming            Non-Executive Director Gary O'Hare            Executive Director of Nursing and Operations Ruth Thompson        Non-Executive Director	
17/16	<b>Declarations of interest</b>  There were no declarations of interest to note.	

18/16	<p><b>Minutes of previous meeting held on 27 January 2016</b></p> <p>The following amendments were agreed:</p> <ul style="list-style-type: none"> <li>• Item 09/16 - page 6 - first paragraph - first sentence - should refer to the position to <b>31 December 2015</b> (rather than January 2016).</li> <li>• Item 09/16(ii) - page 7 – final sentence should read '<b>The focused visit was in response to concerns raised by carers</b>'.</li> </ul> <p>Subject to these amendments, the minutes were agreed as a true and correct record and duly signed.</p>	
19/16	<p><b>Matters arising not included on the agenda</b></p> <p>The schedule of matters arising was noted.</p> <p>Hugh referred to the Chair's report and the ratification of Ruth Thompson as Senior Independent Director (SID) and explained that since then Ruth had been granted reduced duties for personal reasons, and this will be reviewed in July. Ruth will continue to chair the Mental Health Legislation Committee.</p> <p>Hugh said that linked to this development are that other supporting arrangements need to be put in place in the interim as follows:</p> <ul style="list-style-type: none"> <li>• Paul McEldon has agreed to present Ruth's Mental Health Legislation Committee update report to the Board.</li> <li>• Dr Les Boobis has agreed to chair the Quality and Performance Committee.</li> <li>• Martin Cocker has agreed to be the Senior Independent Director (SID), subject to Board approval.</li> </ul> <p>Hugh said that the interim arrangements had received Nominations Committee support, which partly satisfies the requirement that the appointment of the SID should be in consultation with the Council of Governors. The Nominations Committee next reports to the Council of Governors on 8 March 2016.</p> <p><b>The Board approved the appointment of Martin Cocker as the Senior Independent Director until the position is reviewed in July, subject to comments from the Council of Governors.</b></p>	
20/16	<p><b>Action Checklist</b></p> <p>The checklist was noted.</p>	
21/16	<p><b>Chair's Report</b></p> <p>Hugh Morgan Williams highlighted that he had attended a national conference to launch the planning round for the five year period from April 2016 with John Lawlor. He had also attended the Mental Health Network Annual Conference.</p>	

22/16	<p><b>Chief Executive's Report</b></p> <p>John Lawlor presented the Chief Executive's report. The contents were noted by the Board.</p> <p>When considering the junior doctors' contract, Dr Rajesh Nadkarni said that the Trust has a good relationship with junior doctors and it continues to engage with them. He added that a further six days of action is planned for April and May.</p> <p>During discussions on the strategic alliance with Malhotra PLC, Peter Studd asked what was the potential benefits for the Trust. James Duncan said that it was an ideas sharing arrangement especially around estate management. Malhotra's expertise is in the leisure industry and as a provider of care home services and we could learn from their dynamic approach, with a view to exploring and testing ideas.</p>	
23/16	<p><b>Quality, clinical and patient issues</b></p> <p><b>i) Safer Staffing – monthly report</b></p> <p>Vida Morris presented the report which focussed on those wards where staffing is 10% under planned and 20% over planned for January 2016. The contents were noted by the Board.</p> <p>She highlighted that the Trust is currently involved in two recruitment campaigns, with other recruitment campaigns planned for next week and March. As a result of this, increased permanent staff will enable us to further reduce our reliance on agency staff.</p> <p>Dr Les Boobis queried the wards indicated as “green” where this is due to increased clinical activity and asked whether the acuity should be highlighted in the report rather than report over staffing. John Lawlor explained that the format is set nationally, so there are constraints on how the data is presented.</p> <p>Alexis Cleveland suggested that the report would benefit from some narrative around the exceptions.</p> <p>Peter Studd queried whether there are programmes in place to support the Trust's unqualified staff to become qualified. Vida responded that there are schemes known as “Grow Your Own” whereby an individual works in the role for 3 days per week and trains in the other 2 days.</p>	
24/16	<p><b>Performance and Assurance</b></p> <p><b>i) Performance report</b></p> <p>Lisa Quinn presented the Performance Report to 31 January 2016 and James Duncan presented the finance dashboard. The contents were noted by the Board, in particular that for Monitor's Risk Assessment Framework, NTW had a governance risk rating of “green” and a financial sustainability risk rating of “4.”</p> <p>Lisa confirmed that the overall position is similar to last month. She highlighted that Monitor have been notified of the risk to delivery of the Early Intervention in Psychosis 2 weeks access standard with the 50% standard anticipated to be achieved in July. We are looking to recruit into the teams.</p> <p>Hugh Morgan Williams referred to the Workforce Dashboard and in particular sickness absence and said that it would be useful to have some narrative</p>	

around the reasons for the variances, i.e. mitigating actions. The continual decrease in the rolling 12 months average is very encouraging and we must strive to decrease the levels even further.

Dr Les Boobis referred to the Principal Community Pathways Benefits Realisation Dashboards and asked what is it telling us? Lisa explained that there is a suite of benefits realisation metrics and is a small proportion of the total and their intention is that the metrics should tell us where we are now compared to where we were before and where we would like to be. It was agreed that Lisa and Les would discuss further outwith the Board meeting.

John Lawlor commented that positive feedback is being received from service users and GPs and stressed that there is still some work to do.

James Duncan reported a revised financial target of £4.2m following Monitor's approval of a capital to revenue transfer. The first phase of Transforming Corporate Services, which has included some redundancies, is completed and we are now in the second phase and looking to re-deploy staff wherever possible.

## **ii) Quarterly Board Assurance Framework and Corporate Risk Register**

Lisa Quinn presented the documents that had gone through a significant review and incorporated recommendations from the "Well Led review," outlining the new format. The contents were noted by the Board.

Lisa highlighted that the documents were being presented to the Board for comments and then approval prior to the annual audit review.

Martin Cocker, as Chair of the Audit Committee and a member of the Quality and Performance Committee commented that this was an excellent piece of work.

Peter Studd commented that the impact of the risk is not always obvious from the wording and perhaps this could be looked at. Lisa confirmed that the Board Assurance Framework will be considered again by the Board in April, so there will be a number of opportunities to review the details within the documents.

Alexis Cleveland remarked that the reader would expect residual risk, i.e. after applying controls, to be lower than the risk on identification, but this is not always the case, as presumably the risk has been re-assessed for changes in the environment. On such occasions, the report would therefore benefit from an explanatory note. Lisa said that at this stage it had been important to provide an audit trail and agreed to include explanatory notes, wherever appropriate.

**The Board approved the documents subject to the aforementioned changes.**

## **iii) CQC Registration update**

Lisa Quinn presented the update that outlined CQC activity since the last board meeting. The Board noted the contents.

Alexis Cleveland asked if there had been any feedback from the recent unannounced CQC inspection visit to Ferndene, with Lisa Quinn confirming that the Trust has received informal feedback and the formal report is awaited.

<p>25/16</p>	<p><b>Strategy and Partnerships</b></p> <p><b>i) Learning Disability Transformation update</b></p> <p>John Lawlor presented the update on delivering the Learning Disability and Autism Transforming Care Agenda. The contents were noted by the Board.</p> <p>Dr Rajesh Nadkarni said that along with the Belsay ward, there are also plans to reduce some secure beds and work is currently being undertaken with Commissioners and colleagues at Tees Esk and Wear Valley Foundation Trust to manage this.</p> <p>John Lawlor highlighted that Clinical Commissioning Groups and Local Authorities are struggling to support and provide resources for people in the community with learning disabilities.</p> <p>Dr Les Boobis queried the closure of medium secure units and highlighted the potential for people in the community to be readmitted stressing that they may end up in prison if the beds no longer exist. He went on to say that there was a recent report that stated not to use prisons for people with mental health conditions and highlighted that this is a contradiction. In response, Dr Nadkarni said that he is a member of the National Clinical Reference Group and that Simon Stevens has asked us to reduce the number of people with mental health conditions in prisons. He then stressed that wards will not be closed until we are confident that people would be properly supported. There are all sorts of challenges to work through and we need to ensure that people are not spending more time than they need in hospital.</p> <p>Hugh Morgan Williams said it will be a challenge for Local Authorities to provide the right package of care. Regular updates will be brought to the Board.</p> <p>Paul McEldon queried how the new Autism Unit fits into this, highlighting that it is a service with a very small number of units. James Duncan responded that the model for the new unit is an Assessment and Treatment model and he explained that the pathway will support people to move on within a maximum of 18 months. He stressed that the closure of institutions may lead to an increase in demand for services such as this in the future.</p>	
<p>26/16</p>	<p><b>Minutes / Papers for information</b></p> <p><b>i) Remuneration Committee</b> Hugh Morgan Williams presented the report. The contents were noted by the Board.</p> <p><b>ii) Council of Governors issues</b> Hugh Morgan Williams reported that:</p> <ul style="list-style-type: none"> <li>• Fiona Grant is undertaking her Lead Governor role with great enthusiasm;</li> <li>• Margaret Adams is now chair of the Quality Group;</li> <li>• Lucy Reynolds continues to chair the Membership and Communications Group, which has been bolstered by Bill Scott joining;</li> <li>• the Nominations Committee will meet on 8 March to consider further recruitment; and</li> <li>• Ken Tooze is to facilitate a governors' session on 17 March focusing on the role of the governor and the Non-Executive Director.</li> </ul>	

	<p><b>iii) Safeguarding annual reports summaries</b></p> <p>Vida Morris presented a summary of the Safeguarding Adults' annual reports for 2014/15. She highlighted that this is a significant period for all Safeguarding Adults' Boards due to the preparation for the implementation of and ensuring compliance with the Care Act and its associated legal requirements.</p> <p>Vida then presented a summary of the key issues from the Safeguarding Children's reports for 2014/15. She reported greater emphasis in the work of all Boards on preventative approaches, early intervention and early help, working in partnership in a multi-agency context and significantly more with Education Services.</p>	
<b>27/16</b>	<p><b>Questions from the public</b></p> <p>Chris Macklin referred to the Performance Report and in particular the Waiting Times Dashboards where references are made to "any very long waits are potentially data quality issues and are to be explored further." He asked how confident the Board were that there are actual data quality issues.</p> <p>Lisa Quinn responded that there are data quality issues around cluster allocation and that more clarity will be provided in future reports.</p> <p>Chris Macklin then referred to the Principal Community Pathways Benefits Realisation dashboards relating to psychosis and asked if there is an underlying issue.</p> <p>Lisa responded that waiting times are a concern and confirmed that there was an increase in January. Teams have been asked to review why this has happened. James Duncan added that at a recent event in Sunderland, there was an opportunity to "Walk the Wall" to see how it should work. There are also a range of initiatives looking at process improvement and the teams are engaged in supporting this approach.</p>	
	<p>Prior to the completion of the Board meeting, Martin Cocker referred to this Board meeting being the last one attended by Eric Jarvis and he proposed a vote of thanks to Eric for his commitment, dedication and guidance. Hugh Morgan Williams added that Eric has been an incredible font of knowledge, particularly around the Trust's Constitution and he has been extraordinarily useful with his encyclopaedic knowledge. On behalf of the Board of Directors, Hugh wished Eric well in his retirement.</p>	
<b>28/16</b>	<p><b>Date, time and place of next meeting</b></p> <p><b>Wednesday, 23 March 2016, Board Room, St Nicholas' Hospital</b></p>	