

## DRAFT Minutes

## Board of Directors' meeting held in public

<b>Wednesday, 27 July 2016</b>	<b>1.30pm – 3.30pm</b>	<b>Board Room, St Nicholas' Hospital</b>
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**Present:**

Hugh Morgan Williams	Chair
Dr Leslie Boobis	Non-Executive Director
Alexis Cleveland	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
Dr Rajesh Nadkarni	Executive Medical Director
Gary O'Hare	Executive Director of Nursing and Operations
Lisa Quinn	Executive Director of Commissioning and Quality Assurance
Peter Studd	Non-Executive Director

**In attendance:**

Susan Hamilton	Administration Officer (minutes)
Caroline Wild	Deputy Director Corporate Relations & Communications

Agenda Item		Action
<b>85/16</b>	<b>Welcome and apologies</b>  Apologies were received from Non-Executive Directors Martin Cocker, Neil Hemming, Paul McEldon and Ruth Thompson.	
<b>86/16</b>	<b>Declarations of interest</b>  There were no declarations of interest for this meeting.	
<b>87/16</b>	<b>Minutes of previous meeting held on 27 July 2016</b>  <b>Page 2, 75/16, Chair's Report</b> - Second sentence should read: 'Hugh reported that the inspectors were very <b>pleased</b> by the openness and honesty of staff and the welcome they received'.  <b>Page 3, 76/16, Quality, clinical and patient issues, ii) Lone Working Devices</b> - Second sentence of fourth paragraph should read: 'He recognised that the report gave him much greater assurance on the Trust's position with regards to lone working devices and he noted that the number of amber alerts were increasing, which might indicate that more people are using the devices'.	

	<p><b>Page 3, 76/16, Quality, clinical and patient issues, iv) Board Assurance Framework and Corporate Risk Register</b> – Second paragraph should read: ‘The Board Assurance Framework has been <b>reviewed</b> by Internal Audit and there were no issues of note’.</p> <p>Subject to these amendments, the minutes were agreed as a true and correct record and duly signed.</p>	
<b>88/16</b>	<p><b>Matters arising not included on the agenda</b></p> <p>The schedule was noted.</p>	
<b>89/16</b>	<p><b>Chair’s Report</b></p> <p>Hugh provided feedback from the NHS Providers’ Governance Conference on Sustainability and Improvement, held on 7 July 2016. He reported that the conference was a very interesting and informative event. Following the conference, NHS Chairs held a private meeting to discuss provider issues.</p> <p>Hugh reported that Non-Executive Director Paul McEldon will retire from his position at the end of 2016. A recruitment process to replace Paul is currently ongoing.</p> <p>The CQC inspection was completed in June and there were no significant issues highlighted in the initial feedback. The draft formal report is awaited.</p>	
<b>90/16</b>	<p><b>Chief Executive’s Report</b></p> <p>John referred to the Mental Health 5 Year Forward View and the summary report was tabled. He reported that this sets out the priorities for mental health services and for mental health organisations.</p> <ul style="list-style-type: none"> <li>• Dr Rajesh Nadkarni recently provided the Medical Staff Committee with a presentation on the 5 YFV.</li> <li>• John highlighted the National Suicide Prevention Strategy. John reported that suicide rates in England have steadily increased in recent years.</li> <li>• The health of the workforce is also covered in the report. NHS Trusts will be holding more discussions in the future around the mental health of our workforce.</li> </ul> <p>Referring Junior Doctors’ training, John reported that the Deanery has a process to review the quality of our Junior Doctors’ training. HENE is a key area for junior doctors to provide feedback on the quality of their training.</p> <p>The financial reset was received last week from NHS Improvement and NHS England. This sets out consequences if NHS Trusts fail to live within their financial means. There is a lot of detail in the appendices and this is worth a read.</p> <p>NHS England has published CCG ratings. There will be actions taken by NHS England for any CCG rated inadequate with two local CCG’s in this category. Board colleagues will be kept informed.</p>	<b>JL</b>

**i) Quality and Safety Report: January – June 2016**

Gary O'Hare introduced the paper, which is the first report in the amended cycle of reporting. The report now incorporates staff safety in addition to patient safety issues. The report was noted by the Board.

Responding to a query from Peter Studd about the increase in incidents, Gary explained that the numbers have not changed significantly but are reported through the new framework. Peter asked whether some of the spikes represent a significant change and Gary explained that there will always be spikes but in some services, incidences are attributed to a few very challenging service users.

The increase in incidents was also noted by John Lawlor who queried what could be behind this increase. Gary responded that the Trust's acquisition of new drug and alcohol services could be one of the reasons, as this is an area of high patient risk.

The increase in incidences of fracture neck of femur was noted and James Duncan suggested additional focus on this, as although there appears to be no specific trend identified, this is an important area.

The increase in informal complaints was also noted and a query was raised as to why this is the case. Gary suggested that a greater understanding of the process, i.e via the recent CQC inspection may be attributed to the increase. The new process of triaging complaints is having a positive impact and contributes to be a speedier response to resolving many informal complaints.

Alex Cleveland suggested a change to the way some of the information is displayed, suggesting that bar charts would be more appropriate.

**ii) Quarter 1 Service User and Carer Experience summary report**

Lisa Quinn presented the report, which was noted by the Board. The report covers the period April to June and a total of 1059 responses were received from service users and carers. It was noted that the Patient Friends and Family Test (FFT) responses have declined. There has also been a small decline in the 'recommended' score. As a result, Gary O'Hare and Lisa Quinn are undertaking a piece of work to try to improve the overall position. This will include looking at the experience of other Trusts.

Hugh Morgan Williams commented on the low response rate for reviews on websites. Lisa Quinn responded by explaining that comments on the NHS Choices website are generally low.

Lisa Quinn stated that priorities this year are to standardise and embed processes to obtain feedback.

Les Boobis said that TEWV use lots of different ways to obtain feedback such as iPads or touch screens. Lisa Quinn confirmed that touch screens are available at Walkergate Park, however, these methods are not routinely used at the moment. A text facility is also available as well as email. Alexis Cleveland suggested a possible Board development session for the future so we can understand this issue better and it was agreed that this would be planned.

	<p><b>iii) Quarter 1 Service Visit Feedback Themes</b>  Gary O’Hare presented the summary report for information, which was noted by the Board.</p> <p>The individual reports are available to view from Gary’s office. Gary agreed to recirculate the feedback form as there are some feedback reports outstanding from Board members. Gary confirmed that Non-Executive Directors may submit their feedback via email.</p>	<p><b>CW</b></p> <p><b>GO</b></p>
<p><b>92/16</b></p>	<p><b>Performance and Assurance</b></p> <p><b>i) Commissioning and Quality Assurance Report</b>  Lisa Quinn presented the Month 3 position, which was noted by the Board. The Trust’s Financial Sustainability Risk Rating has decreased from 3 to 2 and the Governance rating remains Green.</p> <p>Hugh referred to the CQC inspection and Lisa reaffirmed that the draft formal report is expected mid August, although initial feedback has already been received.</p> <p>The Trust is currently achieving all quality standards and is forecasting that all 10 CQUINs will be achieved.</p> <p>Four out of the seven quality priorities have been achieved. The other three are rated amber.</p> <p>It was noted that appraisal rates have increased to 85%.</p> <p><u>Finance</u>  James Duncan presented the finance report. The Trust plans to submit to Monitor an agreed control total of £4.7m for the current year. STP funding would take our control total to £6.5m. STP funding will only be allocated to organisations that achieve the controlled total. The Trust has a deficit of £0.3m at the end of quarter 1. Pressures are articulated in the report.</p> <p>Main pressures are in the Specialist Care Group (SCG) and Community Care Group (CGC) which are due to a number of key areas where the levels of service delivery exceed that being commissioned. However, action plans are in place in each area to recover the position, subject to commissioner support. We are currently in the process of meeting with our Commissioners and a further update will be provided to the Board next month.</p> <p>Responding to a query from Peter Studd around the fluctuation of agency hours, James explained that Monitor put into place a stepped reduction of the agency cap with the cap levels further reduced from April 2016. James stated that this has been carefully managed and we expect to reach the revised cap by 1 August.</p>	<p><b>JD</b></p>

	<p><b>ii) Quarter 1 Staff Friends and Family report</b>          Lisa Crichton-Jones presented the result of the Quarter 1 Staff Friends and Family Test (FFT) which was noted by the Board. She reported that all staff were provided with the opportunity to feedback their views. 2,333 members of staff completed the test, equating to a response rate of 36% which is an improvement on the previous quarter.</p> <p>The low scores in some Corporate areas were noted. James Duncan explained that a lot of work around cost savings in corporate areas has been carried out resulting in a reduction of staff and in addition, many staff in the Estates and Facilities Departments, part of the Deputy Chief Executive's office, have infrequent access to PCs.</p> <p>Alexis Cleveland suggested holding local conversations to see how we could improve response rates in specific areas.</p>	
93/16	<p><b>Strategy and Partnerships</b></p> <p><b>i) Learning Disability Transformation update</b>          Gary O'Hare presented the update, which was noted by the Board. Gary reported that escalation letters addressing the Trust's concerns to NHS England are in the process of being prepared.</p> <p><b>ii) Accountable Care Organisation (ACO) – Northumberland</b>          John Lawlor presented the report which was noted by the Board. John explained that the Memorandum of Understanding (MoU) will commit us to carry on working together over the next year, as we explore a full ACO model.</p> <p><b>The Board was content to sign the Memorandum of Understanding.</b></p> <p><b>iii) Deciding Together</b>          The CCG's Deciding Together press statement was noted by the Board. James Duncan reported that the Trust's preferred option was a two site model, but the CCG have opted for a three site model. The Trust continues to have concerns about how to implement the model and will be submitting a formal response to the CCG.</p> <p>Alexis Cleveland referred to the CCG press release, in particular the mention of a business case and she queried whether the CCG will still be able to progress this. James Duncan replied that this will need to be clarified with the CCG.</p>	

<p><b>94/16</b></p>	<p><b>Workforce</b></p> <p><b>i) Workforce Directorate Quarterly update</b>          Lisa Crichton-Jones presented the highlights of the report, which was noted by the Board. The report includes seven areas of ongoing work. Lisa highlighted the Workforce Disability Standard and reported that NHS England is now developing a disability standard and through the Trust's work with NHS Employers, the Trust has been given an opportunity to pilot this.</p> <p>Preparation is underway for the re-assessment of the Investors in People Standard, the assessment period will commence in October.</p> <p>The Trust was successfully nominated in regional CIPD awards in June. It was noted that NTW was the only NHS Trust shortlisted.</p> <p>The Trust is also involved in the Regional Streamlining Programme.</p>	
<p><b>95/16</b></p>	<p><b>Regulatory</b></p> <p><b>i) Quarterly Report to NHS Improvement (Risk Assessment Framework)</b>          Lisa Quinn reaffirmed that the Quarter one position is Green for Governance and the Finance Sustainability Risk Rating is 2. As a consequence of the Finance Sustainability Risk Rating of 2 and the surplus position, the Trust is not able to confirm the first declaration to obtain a risk rating of 3, however, we confirm the further 3 declarations.</p> <p>James Duncan said we are reporting that we will get back to a risk rating of 3 and discussions are underway with NHS Improvement. The Board will receive an update of these conversations. James clarified that the Trust has a recovery plan in place.</p> <p>It was noted that NHSI has changed its submission times.</p> <p><b>The Board cannot confirm compliance with all of the governance statements this quarter.</b></p>	
<p><b>96/16</b></p>	<p><b>Minutes / Papers for information</b></p> <p><b>i) Committee minutes</b>          It was noted that the Quality and Performance Committee has moved to bi-monthly reporting. Les Boobis reported there were no specific issues to note from the last meeting.</p> <p>There was no Audit Committee this month.</p> <p><b>ii) Council of Governors' issues</b>          There were no specific issues to highlight to the meeting.</p>	

<p><b>97/16</b></p>	<p><b>Any Other Business</b></p> <p>The Board was reminded that the Annual Members' Meeting will be held tomorrow at the Gosforth Marriott Hotel. Board members were encouraged to attend.</p>	
<p><b>98/16</b></p>	<p><b>Questions from the public</b></p> <p>Chris Macklin referred to the Service User and Carer Experience report and asked whether there would be a role for the Council of Governors to improve the response rate. Lisa Quinn agreed that would be a good opportunity.</p> <p>Chris Macklin referred to the new business rules for Commissioners and he asked whether the Trust would be able to apply for some non-recurring support from NHS England. James explained that this is an option that will be looked into. However, NHS England has recently announced an overspend for first time and he stressed that currently it is also a difficult financial environment for Commissioners.</p>	
<p><b>99/16</b></p>	<p><b>Date, time and place of next meeting</b></p> <p><b>Wednesday, 28 September 2016, 1.30pm, Recovery College, 5<sup>th</sup> Floor, Broadacre House, Market Street NE1 6HQ</b></p>	