

**Minutes**

Board of Directors' meeting held in public																										
<b>Wednesday, 26 July 2017</b>	<b>13:30 – 15:30</b>	<b>Conference Room 1 &amp; 2, Ferndene, Prudhoe, NE42 5PB.</b>																								
<p><b>Present:</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Alexis Cleveland</td> <td>Chair</td> </tr> <tr> <td>John Lawlor</td> <td>Chief Executive</td> </tr> <tr> <td>Gary O'Hare</td> <td>Executive Director of Nursing and Operations</td> </tr> <tr> <td>James Duncan</td> <td>Deputy Chief Executive / Executive Director of Finance</td> </tr> <tr> <td>Les Boobis</td> <td>Non-Executive Director</td> </tr> <tr> <td>Lisa Crichton-Jones</td> <td>Executive Director of Workforce and Organisational Development</td> </tr> <tr> <td>Lisa Quinn</td> <td>Executive Director of Commissioning and Quality Assurance</td> </tr> <tr> <td>Martin Cocker</td> <td>Non-Executive Director</td> </tr> <tr> <td>Miriam Harte</td> <td>Non-Executive Director</td> </tr> <tr> <td>Peter Studd</td> <td>Non-Executive Director</td> </tr> <tr> <td>Rajesh Nadkarni</td> <td>Executive Medical Director</td> </tr> <tr> <td>Ruth Thompson</td> <td>Non-Executive Director</td> </tr> </table>			Alexis Cleveland	Chair	John Lawlor	Chief Executive	Gary O'Hare	Executive Director of Nursing and Operations	James Duncan	Deputy Chief Executive / Executive Director of Finance	Les Boobis	Non-Executive Director	Lisa Crichton-Jones	Executive Director of Workforce and Organisational Development	Lisa Quinn	Executive Director of Commissioning and Quality Assurance	Martin Cocker	Non-Executive Director	Miriam Harte	Non-Executive Director	Peter Studd	Non-Executive Director	Rajesh Nadkarni	Executive Medical Director	Ruth Thompson	Non-Executive Director
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Agenda Item		Action
<b>72/17</b>	<p><b>Welcome and apologies</b> Alexis Cleveland opened the meeting and welcomed those in attendance. No apologies were received for this meeting.</p>	
<b>73/17</b>	<p><b>Declarations of interest</b> There were no conflicts of interest declared for this meeting.</p>	
<b>74/17</b>	<p><b>Minutes of previous meeting held on 28 June 2017</b> Item 66/17i) a typing error was amended in the last sentence resulting in the word 'thanks' being changed to 'thanked'.  The minutes as amended were agreed to be a true and accurate record of the meeting and were signed by Alexis Cleveland.</p>	

75/17	<p><b>Action list and matters arising not included on the agenda</b> The action list was reviewed and no updates were required. There were no matters arising.</p>	
76/17	<p><b>Quality, Clinical and Patient issues</b></p> <p><b>i) Fire Response</b> Paul McCabe and Jeff Sabiston attended the meeting and spoke to the enclosed ‘fire safety of cladding systems’ paper. It was explained that as a result of the Grenfell Tower fire tragedy, NHS Improvement requested all NHS providers to jointly evaluate their buildings alongside local fire services on the 24 June 2017, to ensure they are safe. Jeff referred to the enclosed response to NHS Improvement that was submitted on the 25 June 2017.</p> <p>The Board was assured that the cladding on Trust buildings had been investigated and that there were no risks found. All cladding was confirmed to be different to that used on the Grenfell Tower. Despite there being no concerns, it was explained that staff fire training would be used to reinforce compartmentation and the restriction of lighters that patients have.</p> <p>John Lawlor thanked Paul McCabe for the work completed over the weekend with short notice to enable the checks to be made and response submitted to NHS Improvement.</p> <p>Discussion took place in relation to fire risks associated with patients bringing lighters on to wards. Gary O’Hare explained the situation in detail and made the Board aware of new metal detectors that the Trust will be starting to introduce which will have the capability to detect lighters that patients may have.</p> <p>The Board received the paper, noted its contents and next steps.</p> <p>Jeff Sabiston and Paul McCabe left the meeting at 2.20pm.</p>	
77/17	<p><b>Workforce issues</b></p> <p><b>i) Equality Delivery System 2 / Workforce Race Equality System updates.</b></p> <p>Chris Rowlands spoke to the enclosed report to provide an update in relation to the Trust’s position against the Workforce Race Equality Standard and Equality Delivery System which are both requirements of the NHS standard contract.</p> <p>Chris explained that the incorporation of EDS2 into the devolved way of working had been successful and action plans are being revisited to reflect the locality models as a result of the new operational structure.</p> <p>Detail was provided in relation to staff networks, development of the Equality and Diversity strategy and WRES indicators.</p> <p>In response to a request from Lisa Crichton Jones, it was approved that the staff survey results would be the topic at a future Board Development meeting to enable a detailed review.</p> <p>Rajesh Nadkarni requested that faith networks be revisited.</p>	<p><b>LCJ</b></p> <p><b>CR</b></p>

	<p>In response to Alexis Cleveland's offer of Board support, Lisa Crichton Jones asked for Board members to continue supporting the staff networks.</p> <p>Chris Rowlands left the meeting at 2.40pm.</p>	
<b>78/17</b>	<p><b>Chair's Report</b></p> <p>Alexis Cleveland thanked Board members for their attendance at the Annual Members' Meeting that was held on Trust premises at the Jubilee Theatre, St Nicholas' Hospital. Alexis advised that feedback received indicated that the venue had been successful and that holding the meeting in-house had resulted in financial savings.</p>	
<b>79/17</b>	<p><b>Chief Executive's Report</b></p> <p>John Lawlor spoke to the enclosed Chief Executive's report to provide the Board with Trust, Regional and National updates.</p> <p>Detail was provided in relation to the operational restructure, Organisational Development Associates Network launch, quarterly meeting with NHS Improvement, Gateshead Care Partnerships and CQC publication on Mental Health inspections.</p> <p>In response to a question raised in relation to the Gateshead Care Partnerships, James Duncan explained that the partnership is focusing on developing the right solution for community services for the Gateshead area.</p>	
<b>80/17</b>	<p><b>Quality, Clinical and Patient issues</b></p> <p><b>ii) Quarter 1 Safer Care Report</b></p> <p>Damian Robinson spoke to the enclosed report to update the Board on safety related activity for the period April to June 2017. Damian highlighted that the new report had been designed to contain less data and more narrative information.</p> <p>Detail was provided in relation to serious incidents for quarter 1, deaths reported and the level of investigation.</p> <p>John Lawlor requested a footnote be added to the table 'Deaths recorded, reported and investigated' to explain which deaths are investigated.</p> <p>In response to the lessons learned case vignette, Alexis Cleveland and Ruth Thompson requested that detail be added to demonstrate how learning is then embedded into Trust systems or processes.</p> <p>In response to a question raised relating to the complaints received data, Gary O'Hare explained that one complaint may contain a variety of different issues that are all recorded and considered.</p> <p>Les Boobis questioned the complaints category 'unable to investigate'. It was explained that occasionally complainants do not engage with the Trust to enable the investigation to take place or complaints are raised on events that had taken place many years prior.</p> <p>Damian Robinson left the meeting at 2.35pm.</p>	<p><b>DR</b></p> <p><b>DR</b></p>

### **iii) Safer Staffing Levels**

Gary O'Hare spoke to the report to provide the Board with an update in relation to safer staffing compliance for quarter 1. This included the ratio of qualified to unqualified staff and the six monthly skill mix review of current staff.

The Board was made aware that there had been a reduction in the use of nursing bank and agency staff during the period.

Gary referred to the appended document from the Trust wide valued based recruitment and retention group and explained the positive impact that values based recruitment has had on the Trust.

In terms of the challenge relating to the gender mix of nursing staff, Gary explained that work is ongoing to address the gender balance (to seek to increase the number of male nurses) which will support patient choice.

### **iv) Annual Deanery Monitoring Report**

Dr Bruce Owen spoke to the enclosed report to update the Board on the joint review conducted by the Trust and HEE NE. It was explained that the review involved a self-assessment against quality metrics and GMC standards to ensure learners are receiving high quality education and training within clinical environments.

Findings concluded that the Trust is performing well. Particularly in relation to the quality of training delivered, results of the GMC survey (the Trust being in the top quartile of providers) and results of the trainer survey.

Discussion took place in relation to recruitment issues. It was explained that issues are a result of junior doctors taking career breaks, a lack of flexibility with HEE programmes and the junior doctor contract. Rajesh Nadkarni assured that the Trust is working on ways to retrain and reskill existing doctors such as those in staff grade positions.

In response to a question raised by John Lawlor, it was explained that the lack of flexibility was a national issue and not specific to the region.

Alexis Cleveland thanked Dr Owen for the update.

Dr Bruce Owen left the meeting at 2.50pm.

### **v) NHS England Revalidation Annual Board Report and Statement of Compliance**

Eilish Gilvarry and Hermarette Van Den Bergh spoke to the enclosed report to provide the Board with an update on the current situation with medical revalidation in the Trust.

It was confirmed that 99% of doctors who were available had completed an appraisal between 1 April 2016 and 31 March 2017.

Further detail was provided in relation to the functionality upgrades to the SARD online appraisal system, appraiser training and formal feedback processes.

The Board was made aware of two significant changes. This included implementing initial appraisals for new clinicians to the Trust to take place within three months of joining and allowing Doctors to choose their own appraiser.

Les Boobis highlighted that the processes to identify concerns were reassuring and questioned how concerns were addressed. It was explained that all concerns are reviewed by Rajesh Nadkarni, Executive Medical Director.

Rajesh Nadkarni thanked Eilish and Hermarette for their work in relation to GMC revalidation.

The Board approved the sign off of the statement of compliance for the higher level responsible officer for NTW and St Oswald's Hospice.

Eilish Gilvarry and Hermarette Van Den Bergh left the meeting at 3.00pm.

#### **vi) Service User and Carer Experience**

Lisa Quinn spoke to the enclosed report to update the Board on the service user and carer experience feedback received for the quarter 1 period. It was highlighted that the results have continued to improve and the reduction in responses received was expected as service users only receive two feedback requests per year.

It was explained that work is ongoing to improve the position particularly in operational services in which teams have been proactively using their feedback dashboard to focus on improving issues raised.

Martin Cocker questioned the metrics that measure the reduction waiting times and time spent with patients. Lisa explained that the data is based on the perceptions of the service user of how long they felt they had spent with the clinician and this had not been correlated against actual time spent.

#### **vii) Month 3 Commissioning and Quality Assurance Report**

Lisa Quinn spoke to the report to update the Board in relation to the Trust's position against the Single Oversight Framework (SOF). It was confirmed that all CQUINs had been achieved at the end of the quarter and there had been a small increase in appraisal rates.

Detail was provided in relation to the CPA metrics that were not fully achieved across local CCGs during quarter 1. Lisa explained that the metrics are being considered with the Community Group within the Trusts accountability meetings.

James Duncan provided an update on the Trust's financial position detailed within the report and confirmed a surplus of £1m at month 3 which is on plan. The Board were reminded that the Trust requires an end of year surplus of £7m therefore the underlying position for 2017-18 remains challenging.

#### **viii) Quarter 1 Staff Friends and Family Report**

Lisa Crichton Jones spoke to the enclosed report to update the Board on the Quarter one results of the staff friends and family survey. Lisa made the Board aware that there had been a significant increase in responses (49%

	<p>compared to 40% previously received). It was explained that it was the first time the report contains data split by professional group which has shown that medical staff have reported the lowest levels of satisfaction. It was confirmed that the data will be explored in more detail with options considered in how to engage with the medical workforce. It was confirmed that some of the topics would be incorporated into future Speakeasy meetings.</p> <p><b>ix) Seasonal flu vaccination plan</b>  Anne Moore presented the Seasonal flu vaccination plan 2017/18 to the Board. It was explained that there is a requirement for the plan to be submitted to Public Health England with the approval of the Board.</p> <p>Anne referred to the plan and explained the key points, including, the responsibility for protecting staff and service users against flu, the new CQUIN target for 2017/18, training of vaccinators and intensive communications campaign.</p> <p>Discussion took place in relation to achieving the target, the inclusion of NTW Solution staff, reasons why staff decline the vaccine and the number of vaccinated staff required to achieve the CQUIN target of 75%.</p> <p>It was agreed that the flu vaccination would be available for Board members to receive at the next Board of directors meeting on the 25 September 2017.</p>	<b>AM</b>
<b>81/17</b>	<p><b>Strategy and Partnerships</b></p> <p><b>ii) Physical Health Strategy</b>  Anne Moore, spoke to the enclosed physical health and wellbeing strategy and referred to the earlier Board development meeting where the contents had been reviewed in detail. Key areas discussed included the aim to make 'every contact count', the opportunities for health promotion and signposting to services. It was explained that the strategy fully supports the mental health pathways and the Sustainability and Transformation Plan (STP).</p> <p>Rajesh Nadkarni thanked Anne and the team for their work in developing the strategy.</p> <p>The Board of Directors received and approved the physical health and wellbeing strategy.</p> <p>Anne Moore left the meeting at 3.00pm.</p>	
<b>82/17</b>	<p><b>Quality, Clinical and Patient issues</b></p> <p><b>i) Quarterly Report of Safe Working Hours</b>  Rajesh Nadkarni spoke to the enclosed Guardians Report to update the Board on safe working hours of junior doctors, April to June 2017. Detail was provided in relation to the exception reports received for the period, locum bookings and appointment of the regional Guardian. Rajesh explained that the Trust Guardian would present a full report to the Board at the September meeting.</p> <p>Discussion took place relating to difficulties associated with providing junior doctors' time off in lieu.</p>	<b>RN</b>



	<p><b>ii) Board Assurance Framework and Corporate Risk Register</b>  Lisa Quinn spoke to the Board Assurance Framework and Corporate Risk register and informed the Board of the new reporting process. It was explained that the within the new process of assurance, risks are reviewed through their relevant committee structures prior to being reviewed by the audit committee.</p> <p>Peter Studd raised that the Resources Business Assurance Committee (RBAC) had successfully reviewed their first report and were keen to understand how far the risks were from the agreed risk appetite.</p> <p>Martin Cocker provided feedback that the Audit Committee were happy with the report and the new reporting structure.</p>	
<b>83/17</b>	<p><b>Strategy and Partnerships</b></p> <p><b>i) State of the Provider Sector Report &amp; Mental Health Infographic</b>  John Lawlor advised that the NHS Providers report had been included for information and included a significant section on Mental Health.</p>	
<b>84/17</b>	<p><b>Regulatory</b></p> <p><b>i) Local Safeguarding Boards update</b>  Gary O'Hare spoke to the Local Safeguarding Board report to update the Board on issues raised at the Local safeguarding Boards.</p> <p>Peter Studd questioned the number of Prevent referrals due to the reduction in numbers and highlighted that it is different to the national trends which are increasing. Discussion took place in relation to Prevent and the effectiveness of Operation Griffin.</p> <p>The Board received and noted the contents of the report.</p>	
<b>85/17</b>	<p><b>Minutes/ Papers for Information</b></p> <p><b>i) Council of Governors' issues</b>  Alexis Cleveland advised the Board that the Council of Governors election process would be commencing in the autumn.</p> <p><b>ii) Committee updates</b>  There were no specific issues to highlight to the meeting.</p>	
<b>86/17</b>	<p><b>Any Other Business</b>  There was no other business to note for this meeting.</p>	
<b>87/17</b>	<p><b>Questions from the public</b>  There were no questions raised from members of the public in attendance.</p>	
<b>88/17</b>	<p><b>Date, time and place of next meeting</b>  Wednesday, 27 September 2017, Board Room, St Nicholas' Hospital  1.30pm – 3.30pm</p>	