

MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS OF SOUTH STAFFORDSHIRE AND SHROPSHIRE HEALTHCARE NHS FOUNDATION TRUST HELD AT ST GEORGE'S HOSPITAL, STAFFORD AT 1330 HRS ON THURSDAY 19TH DECEMBER 2013

1 Present

Ron Hilton	Non Executive Director (Vice Chair)
Dr Claire Barkley	Medical Director
Paul Bunting	Non Executive Director
Alison Bussey	Director of Nursing/Chief Operating Officer
Neil Carr	Chief Executive
Lesley Crawford	Director of Mental Health
Jayne Deaville	Director of Finance and Performance
Steve Grange	Director of Business Development
Marina McQuade	Non Executive Director
Greg Moores	Director of Human Resources, Organisational Development and Equalities
Sue Nixon	Non Executive Director
Liz Nicholson	Non Executive Director
Dr Ian Wilson	Non Executive Director

2 In Attendance

Jane Landick, Company Secretary

ITEM 1 WELCOME AND INTRODUCTIONS

- 3 Ron Hilton welcomed all present to the meeting.

ITEM 2 APOLOGIES FOR ABSENCE

- 4 Steve Jones, Chairman
Therèsa Moyes, Director of Quality and Clinical Performance
Howard King, Director of Specialist Services

ITEM 3 STAFF STORY: HANNAH'S STORY

- 5 Ron Hilton welcomed Hannah and her colleague Alexis to the meeting. Neil Carr advised that he had had the opportunity to meet Hannah and hear her story earlier in the year and had extended an invitation to share it with the Board. The Board noted the following key points:
- Following almost six months absence from work due to serious illness, Hannah also had to deal with the news that the prison with which she and her team worked was due to close.
 - An early return to work following sick leave was facilitated through a flexible and adaptable approach taken by colleagues, managers and the Trust to working practices, time-off and home working, supported by occupational health
 - Support during sick leave including regular communication by the Trust and colleagues which was timely and reassuring
 - A supportive approach and well managed transition following the prison closure and a shared commitment within the team to managing the impacts on the team

and individuals.

In response to a question from Neil Carr, Hannah advised that given a previously good sickness absence record, she had no awareness of what to expect when she went off sick, but that she could not identify any way in which things could have been handled any better than they had been. Ron Hilton thanked Hannah for her story and commented that it was particularly pleasing that despite the risk of isolation, particularly for staff working at a distance to the Trust, a positive example of how support and contact could be achieved and maintained during transition and change, had been highlighted.

ITEM 4 QUESTIONS FROM THE FLOOR

- 6 Ron Hilton invited questions from the floor on any issue specific to the public Board agenda for the meeting. None were forthcoming. Ron Hilton advised that some questions had been submitted by Tony Price, Lead Governor relating to the declaration of interests arrangements and plans for the Staff Opinion Survey results to be discussed and shared with governors. Ron Hilton advised that a written response had been e-mailed back to the effect that a revised declaration of interests policy was being developed for governors in line with Monitor's revised Code of Governance and that it was proposed that the Staff Opinion Survey results would be reviewed by the staff governors, reporting to the Council of Governors via the Performance and Assurance Group.

ITEM 5 MINUTES OF THE MEETING HELD ON THURSDAY 28TH NOVEMBER 2013

- 7 The minutes of the Board of Directors meeting held on Thursday 31st October 2013 were agreed and signed by the Chair as a true and accurate record, subject to noting the attendance of Marianne Cleeve, Head of Accountancy and Assurance, representing Jayne Deaville. Dr Abid Khan's role was also amended to Deputy Medical Director and the date of the meeting corrected to 31st October 2013.

ITEM 6 MATTERS ARISING FROM THE 31ST OCTOBER 2013 MINUTES

- 8 All actions were noted as having been completed or in progress. Greg Moores advised that the Mandatory Training Report would be presented to the governors at the Performance and Assurance Group meeting in February 2014. Alison Bussey advised that the uptake of flu vaccinations was at 60% representing approximately 1250 staff and that an increase was expected following a further push early in the new year.

ITEM 7 CHIEF EXECUTIVE'S REPORT AND ENVIRONMENTAL SCAN

- 9 Neil Carr reported on the following events/activities and issues:
- 9.1 Key national guidance and reports during the month were highlighted and in particular the New Economics Foundation (NEF) literature review on co-production in mental health, which represented valuable learning and guidance with respect to the Trust's recovery agenda. Also noted was the Care Quality Commission (CQC) document outlining the new approach that CQC will be taking to the inspection of mental health services which was expected to result in greater integration and harmonisation across inspections against essential standards and the Mental Health Act aspects of the CQC role. An increased focus on community mental health services was also

highlighted in the report. In response to a question from Paul Bunting, Lesley Crawford summarised steps being taken to ensure that the Trust's community services would stand up to this increased scrutiny, including the development of actions plans, work to realign and modernise community services in line with the Trust's strategic direction, work on care clusters and the extension of essential standards review visits to community services.

- 9.2 Submission of the Trust's capital plan to Monitor by 10th January 2014 was noted and in particular the three phase approach to prioritisation of work required to ensure a safe environment and the reduction of risk; work to upgrade facilities which were currently functional but not considered to be highly valuing of service users and thirdly environments requiring significant upgrade or replacement to be fit for purpose. In response to a question from Paul Bunting, Jayne Deaville advised that the submission to Monitor was a high level five year plan and that meeting the targets contained within the Plan would be important, particularly in the early years of its delivery.
 - 9.3 The Dementia Partnership was noted to be progressing well and that commissioners had a good understanding of the service needs. Opportunities to collaborate with services in North Staffordshire were being explored to serve the best interests of patients and pathways between the Trust and South Staffordshire and Stoke on Trent Partnership Trust were progressing with a view to sign off by both Boards and deployment by April 2014.
 - 9.4 The replacement of the Foundation Management Team with the Trust Management Team and the Senior Leadership Forum was noted. In response to a question from Ian Wilson, Neil Carr confirmed that summary reports from these groups would continue to be received by the Board.
 - 9.5 A Local Area Team (LAT) approach to the delivery of learning disability services was welcomed as contributing to addressing the issues and recommendations arising from the Winterbourne View report was noted and welcomed.
- 10 The following Board Committee reports were received and noted:
- 10.1 **Human Resources, Organisational Development and Equalities Committee** [27th November 2013]: Ron Hilton highlighted in particular the discussion which took place on psychological and organisational development, transitional change and the use of LEAN methodologies, which was facilitated by Rachel Lucas.
 - 10.2 **Foundation Management Team** [9th December 2013]: Neil Carr referred to and commended the recovery workshop held on 18th December 2013 which Sue Nixon had also attended, along with a number of service users.
- 11 11.1 The **Care Cluster Policy** was formally ratified by the Board having been approved at the Quality Governance Committee on 12th December 2013.

ITEM 8 TRUST ASSURANCE REPORT

- 12 The report was received and noted. Exception reports and comments from Board members were recorded as follows:
- 12.1 **Care Quality Commission Visit to Oak House:** it was noted that the final report on the visit had not yet been received but that it was expected to contain reference to ensuring completeness of recording in the patient record.

Neil Carr advised that this was a focus for Therèsa Moyes and her team and that RiO was expected to lead to improvements in this area. Lesley Crawford and Alison Bussey also confirmed that action was being taken within the Division supported by the communications team to raise awareness and through the use of live clinical supervision. Jayne Deaville advised that this was also monitored through regular health records audits. Neil Carr asked for an update on action and progress in April 2014.

- 12.2 **Finance:** Jayne Deaville reported that at month seven the income and expenditure position showed a year-to-date surplus position of £7.07m, representing a favourable variance of £3.54m against the year-to-date budget of £3.53m. With respect to savings plans, she advised that the Trust was forecasting to deliver 97% of its 'gross' CIP target for 2012/13, although only 68% would be delivered on a recurrent basis leaving a recurrent shortfall of £2.0m going into 2014/15, which would be reflected in the budget setting process. A positive position was noted with respect to supplementary staffing. Jayne Deaville advised that the cash position showed that investments and cash in hand totalled £30.9m at the end of the month, which was below the planned Q2 figure of £42.5m. This variance was noted to be due to the plan for the drawdown of the remaining £15m loan at the end of Q2 which has been deferred until March 2014. It was noted that as from quarter three Monitor would be adopting the new 'Continuity of Services' risk rating with more emphasis being placed on short-term liquidity and capital servicing capacity. Jayne Deaville advised that at quarter two the Trust scored a favourable risk rating of 4 (the highest possible) under the new risk rating assessment framework, which was applied in 'shadow form' for the first time
- 12.3 **Information Governance:** Jayne Deaville advised that one Freedom of Information (FOI) Act statutory deadline breach occurred in October 2013 due to delays in allocating responsibility and commencing data collection. No breaches of deadlines were noted with respect to Access to Records requests.
- 12.4 **Contract Activity and Projects:** Jayne Deaville advised that contract activity and target reports (Monitor and host CCGs) covering the period April to October 2013 continued to be met and that all block contracts with our host CCGs were now performing above contracted levels. She advised that under performance in Specialist Services were being addressed in the financial projections.
- 12.5 **Commercial Activity/Business Development:** Steve Grange highlighted the MOD Network event and the publication of the network's annual report. The GP Helpline was seen to be adding value despite the low usage reported. It was noted that the analysis of the usage of online and social media was expected to be available for review by the Business Development and Investment Committee in January 2014 and subsequently to the Board. Steve Grange gave an update on BluSky initiatives currently in progress. Jayne Deaville advised that the Section 75 agreement was more likely to be signed off in March 2014 in light of outstanding issues to resolve surrounding data entry and information sharing between clinical systems.
- 12.6 **Human Resources:** Greg Moores advised that the Trust response rate of 53% for the Staff Opinion Survey compared favourably with the average of 47% for the Trust's survey provider. Mandatory training was noted to have improved over the year to 86% with particular improvements in out of area services, although it was acknowledged that more remained to be done. Greg Moores advised that work was also taking place to reduce the numbers of overdue and outstanding DBS checks each month and that all those outstanding in the report had since been resolved.

ITEM 9.1 CLINICAL SYSTEM REPLACEMENT PROJECT

- 13 The update report was received and noted. Jayne Deaville advised that the roll out was progressing well, teething issues were being resolved and that the system was evaluating very positively with staff.

ITEM 9.2 LIVED EXPERIENCE INFLUENCING SERVICE IMPROVEMENTS: PILOT EVALUATION

- 14 Jane Landick presented the paper and summarised the background to the development of the project based on consultation with the Service User and Carer Sub Committee which had produced recommendations against which the pilot implemented during 2013 had been evaluated. Sue Nixon advised that the evaluation had been presented to the sub committee at its December 2013 and that they had confirmed their support for the use of the Manchester model to present patient stories to the Board as one of a range of methods and approaches to communicating the patient experience to the Board and more widely within the organisation. Liz Nicholson commented that the use of patient stories using DVD recordings still allowed for service users and carers who wanted to come to the Board in person, to attend and contribute but also gave the opportunity for stories from those who were unable or unwilling to attend. Marina McQuade commented that it was encouraging that the feedback from service users and carers who had attended to present their stories during 2013 was that their experience and the support they had received both prior to, during and after the Board meeting, was overwhelmingly positive. The Board of Directors formally approved the implementation of the Manchester Approach for the future delivery of patient stories to the Board noting the benefits in terms of their dissemination and use as a driver change throughout the Trust and as part of the Trust's wider organisational development strategy but agreed that this approach would not be implemented to the exclusion of other avenues and opportunities for the Board to receive stories from service uses and carers.

ITEM 10.1 NON EXECUTIVE AND EXECUTIVE DIRECTORS: DECLARATION OF INTERESTS AND REGISTER OF INTERESTS

- 15 Jane Landick presented the paper and advised that the amendments to the document were to ensure compliance with the Trust constitution and various legislative changes and would also support compliance with the revised Code of Governance issued by Monitor and form part of the declarations which are required to provide assurance that Board members are Fit and Proper Persons. The document was formally approved and it was agreed to receive the updated Register of Interests at the January 2014 Board meeting.

Action: Review of Register entries (all Board members)

ITEM 10.2 MONITOR ANNUAL PLANNING PROCESS 2014/15

- 16 Steve Grange presented the paper and advised that the report outlined the draft Monitor Annual Planning Process for 2014/15. It was noted that the structure and timing had altered for this financial year. Steve Grange advised that the initial draft guidance was distributed to trusts in a letter in November 2013 and that the final guidance was expected before Christmas to enable Trusts to start to complete the

two phase planning process for submissions in April and June 2014. It was noted that work was in progress with respect to the numbers and narrative based on what the guidance was expected to contain and that in line with the statutory duty to consult with governors, this would be discussed at the Strategic Direction Engagement Group and had been flagged with the Group's Chair, David Gill to ensure it was reflected in the agenda planning arrangements. Sign off with respect to the Annual Plan was anticipated for the March 2014 and May 2014 Board meetings.

ITEM 11 ANY OTHER NOTIFIED BUSINESS

- 17 a) **Media Activity:** Neil Carr notified the Board of media interest in a coroner's case relating to a married couple and the application of adult safeguarding arrangements but advised that the Trust was not one of the principal agencies involved in the case.

ITEM 12 SUMMARY OF DECISIONS MADE AND AGENDA ITEMS FOR THE NEXT MEETING

- 18 Decisions made were summarised by the Company Secretary as follows:
- The future approach to bringing Patient Stories to the Board was agreed to be based on the Manchester approach but not exclusively, to ensure other approaches and opportunities were pursued.
 - The Care Cluster Policy was ratified.
 - Amendments to the declaration of interest arrangements were agreed.
- 19 The following future agenda items were agreed:
- Reporting on actions to address improvements in recording information in patient notes (LC/AB/TM) (April 2014)
 - Register of Interests (January 2014)
 - Annual Plan Sign Off (March 2014 and May 2014)

ITEM 13 DATE AND TIME OF NEXT MEETING

- 20 The next public Board meeting will take place on Thursday 30th January 2014 at **1300 for 1330 in the Board Room, Trust Headquarters, St George's Hospital, Stafford.**