

Minutes of the Board of Directors Meeting held at 1pm on Wednesday 29 June 2016  
at Sentinel House, 4-6 Nuffield Road, Poole, Dorset, BH17 0RB

**Present:**

Ann Abraham	Chair
Fiona Haughey	Acting Chief Executive/Director of Nursing and Quality
David Brook	Non-Executive Director
John McBride	Non-Executive Director
Sarah Murray	Non-Executive Director
Peter Rawlinson	Non-Executive Director
Nick Yeo	Non-Executive Director
Linda Boland	Locality Director-Poole and East Dorset
Colin Hague	Director of Human Resources
Sally O'Donnell	Locality Director-Dorset
Nicola Plumb	Director of Organisational Development, Participation and Corporate Affairs
Eugine Yafele	Locality Director – Bournemouth and Christchurch

**In Attendance:**

Keith Eales	Trust Secretary
Nick Jenvey	Associate Director of IM&T
Ian Rodin	Acting Medical Director
Sarah Wright	Associate Director of Finance

**Apologies:**

Ron Shields	Chief Executive
John Hughes	Non-Executive Director
Jackie Chai	Director of Finance
Lynne Hunt	Deputy Chair and Non-Executive Director
Nick Kosky	Medical Director

**Governor Observers:**

Judith Adda	Public Governor (Bournemouth)
Chris Balfe	Public Governor (Dorset RoE) (Lead Governor)
Scottie Gregory	Public Governor (Dorset RoE)
Sue Howshall	Public Governor (Dorset RoE)
Stefan Morawiec	Public Governor (Dorset RoE)
Jan Owens	Public Governor (Dorset RoE)
Patricia Scott	Public Governor (Poole)
Sue Evans-Thomas	Public Governor (Poole)
Angela Bartlett	Staff Governor
Peter Kelsall	Staff Governor
Becky Aldridge	Partner Governor (Service User Group Representative)
Bobbie Dove	Partner Governor (Bournemouth Borough Council)

## **590/16 Welcome and Apologies**

The Chair welcomed members and observers to the meeting and reported the apologies received.

## **591/16 Patient Story**

The meeting commenced with a story illustrating the experience of a patient supported by the Rehabilitation Services at St. Leonards Community Hospital following a referral from The Royal Bournemouth & Christchurch Hospitals NHS Foundation Trust.

The patient had been advised that he would be discharged and referred for rehabilitation after spending four months in The Royal Bournemouth & Christchurch Hospitals NHS Foundation Trust. However, he was subsequently advised that the referral would not proceed because St. Leonards Community Hospital did not accept patients requiring a hoist. Following a letter from a Consultant, and a visit by the Trust Matron for St. Leonards and a physiotherapist, the referral was arranged. The patient's experience at St Leonards was good and had a positive outcome.

The Acting Chief Executive/Director of Nursing and Quality advised that it was not the case that referrals could not proceed if patients required a hoist. It was recognised that further investigation was required into the circumstances surrounding the initial referral which did not proceed.

Board members sought clarification with regard to whether admission thresholds varied between Trust Community Hospitals. The Locality Director Poole and East Dorset advised that this should not be the case but was now under investigation.

**The Board noted the patient story.**

## **592/16 Declarations of Interests in Relation to Agenda Items**

No declarations were made.

## **593/16 Minutes and Notes of Previous Meetings**

The Board approved as a correct record the minutes of the meetings held on the morning and afternoon of 25 May 2016, and the Workshop notes of 1 June 2016.

The minutes of the Board meeting held on 1 June 2016 were approved subject to the addition of the following as a fourth bullet point on page 2 of minute 589/16:-

- 'how IM&T costs beyond 2016/17 could be funded out of income and expenditure rather than reserves'.

## **594/16 Matters Arising**

The Trust Secretary submitted a report on matters arising from previous meetings.

**The Board noted the report.**

## **595/16 Chair's Update**

The Chair gave her monthly update to the Board.

The Chair referred to the recent volunteers' tea party that she had attended. This was one of two held to recognise and celebrate the contribution of volunteers to the Trust.

The Board considered that there was merit in receiving a report on the volunteers' strategy and the contribution of volunteers to the Trust.

**The Board noted the report.**

### **596/16 Chief Executive's Update**

The Acting Chief Executive/Director of Nursing and Quality submitted a report setting out key issues of concern and interest.

The Acting Chief Executive/Director of Nursing and Quality advised that the Trust had been required to resubmit the financial element of the Trust Operational Plan for 2016/17 by today, which has been achieved. No further information had been received with regard to the resubmission of the rest of the plan.

However, a further letter had been received from NHS Improvement with regard to the national financial position and the acceptance of control totals by trusts. It was noted that 19 trusts had not accepted their control total. It was recognised that the Board had made clear the basis on which the Trust had not been able to accept the control total. The position remained unchanged.

The Acting Chief Executive/Director of Nursing and Quality updated the Board on developments in respect of the Sustainability and Transformation Plan (STP) and the Clinical Services Review (CSR). It was noted that there were a number of key dates in respect of the CSR in the next month including the Board Workshop on 6 July, the Council of Governors on 13 July, the Clinical Reference Group on the same day and the Dorset Clinical Commissioning Group (CCG) Governing Body meeting on 20 July. The Chair advised that she and the Chief Executive had recently met with the Chair and Chief Officer of the CCG.

The Acting Chief Executive/Director of Nursing and Quality advised that Chalbury Ward was now closed and one patient had been transferred to Alderney Community Hospital.

The Locality Director Bournemouth and Christchurch advised that the Trust had been shortlisted, as part of two consortia, in respect of bids to provide forensic services. Assessment panels were being held later in the day to consider the bids.

The Acting Chief Executive/Director of Nursing and Quality advised that a letter had been sent to all staff, following the outcome of the recent European Union membership referendum, affirming the important contribution of our international staff and the value placed on them by the Trust.

**The Board noted the report.**

### **597/16 Board Integrated Corporate Dashboard**

The Acting Medical Director submitted the dashboard for May.

The Acting Medical Director drew attention to the following:-

- The number of patient on patient violent incidents had remained consistent. However, over the last four years there had been a significant reduction in physical assaults on staff;
- The number of patient falls had remained consistent over the past 13 months;
- There had been a recent increase in the number of incidents of prone restraint;
- The number of seclusion incidents was above the locally set threshold and was the highest reported figure since reporting of the metric began;
- The number of mental health patients readmitted as an emergency within 28 days of a previous discharge was above the threshold.

The Locality Director, Bournemouth and Christchurch commented that the position in respect of readmission rates, prone restraint and seclusion incidents were indicators of a health system under significant pressure.

The Board sought clarification with regard to the reasons for the increase in seclusion incidents. The Locality Director, Bournemouth and Christchurch commented that this reflected the practice nationally of the Police not taking people with a mental illness into custody. Locally, individuals were being taken to St Ann's Hospital, with seclusion being used whilst an assessment was awaited. Individuals were not being admitted following assessment. Discussions were taking place with the Police as this practice was not considered to be in the best interests of the individuals concerned.

Clarification was sought with regard to the action being taken in respect of CMHT services given the rising referral rates and staffing challenges. The Locality Director, Poole and East Dorset advised that a detailed improvement plan was in place in respect of access times. It was anticipated that this would begin to have an impact by December. In addition, additional members of staff had been appointed to the team in Bournemouth and Christchurch, where demand was at its highest.

It was noted that, whilst the indicator in respect of vacancy numbers was within the acceptable range, the quality of data was low. Clarification was sought as to whether this had an impact on reported budget positions. The Associate Director of Finance advised that, annually, budget managers were required to confirm their staffing establishment. This process, which was underway, underpinned the reported position on staffing.

Clarification was sought with regard to the reporting frequency of indicators which were not meeting the planned level of performance but which had an anticipated date by which the target or threshold would be met. The Acting Medical Director advised that if an indicator was not on track to return to the target level of performance, then the Board would be advised in advance of the next scheduled reporting date.

**The Board noted the dashboard for May.**

The Associate Director of Finance submitted the finance report for May.

The Associate Director of Finance advised that, at month two, the Trust had a deficit of £0.7m which was £0.6m ahead of plan. At the end of May, £4.2m of the cost improvement plan for the year had been achieved. The Financial Sustainability Risk Rating at the end of May was '4'.

It was noted that agency expenditure year to date was £0.9m. The Acting Chief Executive/Director of Nursing and Quality advised that a letter had been received from NHS Improvement congratulating the Trust on the progress made in reducing agency expenditure.

Clarification was sought with regard to the reporting of progress in achieving the cost avoidance measures agreed as part of the budget for 2016/17. The Associate Director of Finance advised that this would be monitored by the Programme Management Office on a quarterly basis and included in the monthly finance report.

The Chair advised that she had written to all Board members inviting ideas on approaches to provide the Board with the additional assurances sought in respect of finance.

**The Board noted the report.**

#### **599/16 People Management**

The Director of Human Resources submitted the monthly People Management report.

The Director of Human Resources drew particular attention to the implementation of the Apprenticeship Levy nationally and the action being taken within the Trust, funding changes to be implemented by Health Education England from 1 August and a range of organisational development initiatives being implemented.

The Acting Chief Executive/Director of Nursing and Quality referred to the conference held on 22 June for Trust Bank staff. This had been a success with over 80 Bank staff attending.

**The Board noted the report.**

#### **600/16 Annual Plan Deliverables 2015/16 and 2016/17**

The Director of Organisational Development, Participation and Corporate Affairs submitted a report on the achievement of the Annual Plan deliverables for 2015/16 and proposing an approach to setting the deliverables for 2016/17.

The Board noted the evaluation undertaken in respect of the 2015/16 deliverables.

The Director of Organisational Development, Participation and Corporate Affairs commented that further consideration had been given to the process of setting the deliverables for 2016/17 in the light of the year-end review of those agreed for 2015/16. In particular, it had been recognised that a greater distinction could have been made between the small number of quality and business-critical priorities for the year and those actions that were better recognised as business as usual.

As a result of these reflections, for 2016/17 five over-riding delivery themes had been established with areas for achievement under each.

In endorsing the broad approach for 2016/17 Board members made a number of observations:-

- The target date for the three year financial plan should be available by November 2016;
- There was merit in establishing a baseline position for each theme to support the assessment of progress;
- With regard to integration and transformation, consideration should be given to identifying initiatives for the benefits of patients that were within the control of the Trust;
- Within the theme of quality, further emphasis could be placed on consistency of provision and equality of access;
- With regard to enablers, the focus on IM&T should extend to supporting corporate as well as front-line teams, and with greater clarity on outcomes.

#### **The Board**

**(a) Noted the assessment of progress against the Annual Plan deliverables for 2015/16;**

**(b) Endorsed the approach for setting the deliverables for 2016/17;**

**(c) Agreed that a further report on the themes and areas for achievement would be submitted to the Board following further review by the Executive in the light of discussion at the meeting.**

#### **601/16 IM&T Priorities and Expenditure**

The Director of Organisational Development, Participation and Corporate Affairs submitted a report on the year-end position for IM&T investment and delivery in 2015/16 and the proposed priorities and expenditure for 2016/17, which had been requested as part of the decision to approve the Trust budget for 2016/17.

The Director of Organisational Development, Participation and Corporate Affairs gave an overview of IM&T development in the Trust, areas of expenditure in 2015/16 and the outcomes of the investment made, the recurrent element of the 2015/16 investments and plans for 2016/17.

The Chair of the Audit Committee reported on his recent visit, with the Chair of the Appointments and Remuneration Committee, to the IM&T service and discussions with staff. He commented that it was clear that there was a considerable need for both one-off and continuing investment. It was clear, however, that there was a significant element of ongoing expenditure being met from reserves. This would need to be assessed against other priorities for expenditure and incorporated within the base budget. It was also clear that it was timely to review the IM&T strategy, which could be undertaken at the September 2016 Board Workshop.

The Chair summarised by commenting that the Board was consciously investing in IM&T from reserves in 2016/17, for one year only, pending a review of the direction of IM&T in the Trust. In future years IM&T expenditure would need to be accommodated within the base budget.

### **The Board**

**(a) Noted the report;**

**(b) Agreed the IM&T budget for 2016/17;**

**(c) Agreed to consider the frequency for future IM&T reports at the September Board Workshop.**

### **602/16 Equality and Diversity Objectives 2016/17**

The Director of Organisational Development, Participation and Corporate Affairs and the Director of Human Resources submitted a report setting out a proposed approach to the development of equality and diversity objectives for the Trust.

The Director of Human Resources advised that a three-year approach was being proposed to strengthen, more fully integrate and give priority to equality and diversity throughout the Trust. In 2016/17 the baseline position would be established, with extensive engagement and further analysis in the following year and rolling evaluation, objective setting and annual planning in the third year.

Alongside this, specific objectives were proposed for 2016/17 to build on the achievements of 2015/16:-

- Better health outcomes
- Improved patient access and experience
- A representative and supported workforce
- Inclusive leadership

### **The Board agreed**

**(a) The three-year approach to more fully integrate and give priority to equality and diversity throughout the Trust; and**

**(b) The equality and diversity objectives for 2016/17.**

### **603/16 Quality Improvement Plan**

The Acting Chief Executive/ Director of Nursing and Quality introduced the monthly update on progress in implementing the Quality Improvement Plan following the June 2015 CQC inspection.

The Board noted that of the 60 'must do' recommendations, 37 were complete or rated as green, 12 were rated as amber/green on the basis of being in progress to meet the deadline. One action was rated as being amber and was at risk of not achieving the target date. Ten actions were rated as red and were not progressing or had not met the target date. The Board noted the action being taken with regard to the red-rated actions.

Of the 89 'should do' recommendations, 56 were complete or rated as green, 16 were rated as amber/green on the basis of being in progress to meet the deadline. Three actions were rated as being amber and were at risk of not achieving the target date. Fourteen actions were rated as red and were not progressing or had not met the target date.

The Acting Chief Executive/ Director of Nursing and Quality commented that, reflecting on the year since the inspection in June 2015, it was clear that considerable progress had been made in building front-line engagement with and ownership of the actions plans. There was also a clear recognition on the part of local teams about the improvements that were required.

It was noted that five of the outstanding 'must do' actions related to children's services. The Acting Chief Executive/ Director of Nursing and Quality explained that this was an area of continuing focus.

**The Board noted the report.**

#### **604/16 Revalidation for Dorset HealthCare Nurses**

The Acting Chief Executive/ Director of Nursing and Quality submitted a report setting out progress in respect of the revalidation of Trust nursing staff.

The Acting Chief Executive/ Director of Nursing and Quality gave an overview of the revalidation requirements, explained that 2,086 registered Trust nurses were required to meet the revalidation requirements and summarised the experiences of those who had undertaken the process to date. It was noted that 249 staff would be required to revalidate in September 2016.

**The Board noted the report and requested a further update in October 2016.**

#### **605/16 Trust Meeting Programme**

The Trust Secretary submitted the draft meeting programme for 2017. It was noted that this largely reflected the pattern of meetings in 2016.

**The Board agreed the meeting programme.**

#### **606/16 Annual Cycle of Board Business**

The Board received the annual cycle of business, which formed the basis of Board agendas.

The importance of having a comprehensive cycle of business in place was emphasised. Directors were asked to advise the Trust Secretary of additions or amendments to the draft cycle.

**The Board noted the updated cycle of business.**

#### **607/16 Other Items**

The Locality Director, Dorset advised that the Weymouth Urgent Care Centre would be formally opened on 1 July 2016.

The Chair advised that she had spoken to her counterparts at the other three Foundation Trusts in Dorset to propose a joint Board event to be held on 2 November 2016 at Kingston Maurward College. Further details would be available in due course.

### **608/18 Governor Questions and Observations**

Governors present at the meeting made a number of observations and comments:-

- Clarification was sought with regard to whether or not the Trust would be submitting a bid for the Devon and Dorset Prison healthcare contracts. The Acting Chief Executive/ Director of Nursing and Quality advised that the tender documents were being assessed following which a decision would be made as to whether or not to submit bids.
- Further information was sought with regard to Trust practice in respect of whistleblowing arrangements, complaints processes, appraisals, end of life care and innovation.
- Governors congratulated the Trust on arrangements for the revalidation of nurses. Clarification was sought with regard to the involvement of Bank nursing staff in the revalidation process. The Acting Chief Executive/ Director of Nursing and Quality advised that the processes in place covered Bank nursing staff.
- Reference was made to the integrated corporate dashboard and the number of red ratings in respect of children's services.
- Reference was made to the CCG engagement events on integrated community services which would culminate in a report to the Governing Body on 20 July 2016.

### **609/16 Next Meeting**

The Board noted that the next meeting would be held on 27 July at 1.00pm at Sentinel House, Poole.

Signed:

Date:

Ann Abraham, Chair