

Part I Minutes of the Dorset HealthCare University NHS Foundation Trust  
Board of Directors Meeting held on Wednesday 9<sup>th</sup> April 2014  
at Merley House, Merley House Lane, Wimborne, Dorset, BH21 3AA

<b>Present:</b>	Ms A Abraham	Chair	
	Mr R Shields	Chief Executive	
	Mr M Beesley	Non-Executive Director	
	Ms J Chai	Acting Director of Finance & Performance Management	
	Mr I Cordwell	Non-Executive Director	
	Mr D Brook	Non-Executive Director	
	Mrs G Fozard	Non-Executive Director	
	Ms F Haughey	Acting Director of Nursing & Quality	
	Ms L Hunt	Non-Executive Director	
	Dr L Mynors-Wallis	Medical Director	
	Ms J Wiffen	Representing Director of Human Resources, Colin Hague	
	<b>In Attendance:</b>	Ms L Boland	Director of Children & Young People's Services
		Ms V Deery	Presenting a patient story
Ms J Elson		Director of Mental Health Services	
Ms V Graves		Director of Community Health Services	
Mr C Harvey		Trust Board Secretary (CH)	
Ms G Morris		Assistant to Chris Harvey	
Ms S O'Donnell		Deputy Director Dorset Community Services	
Ms D Steer	Member of Staff		
<b>Governors</b>	Ms L Morris	Public Governor - Dorset/rest of England	
	Ms S Gregory	Public Governor - Dorset/rest of England	
	Ms P Scott	Lead Public Governor – Poole	
	Ms S Evans-Thomas	Public Governor – Poole	
	Ms T North	Staff Governor	
	Ms P Cooper	Staff Governor	
	Ms A Webb	Public Governor – Poole	
	Ms J Brown	Staff Governor	
	Mr C Balfe	Public Governor – Poole	
	Mr P Thackray	Public Governor - Dorset/rest of England	
	Ms A Reed	Public Governor - Dorset/rest of England	
	Ms B Aldridge	Partner Governor	
<b>Apologies:</b>	Mr C Hague	Director of Human Resources (CLH)	
	Mr N Chapman	Non-Executive Director	

## **WELCOME**

## **Action**

Ms Abraham opened the meeting and welcomed the Governors, members of the public, Ms Deery, & Ms Steer. She also noted Mr Shields first meeting as the permanent Chief Executive of the Trust, Ms Haughey as Interim Director of Nursing and Quality and Ms O'Donnell (Deputy Director Dorset Community Services), shadowing Ms Graves. The Council of Governors, both new and returning members, were welcomed and the first meeting date of the Council was noted as 30<sup>th</sup> April 2014

043/14

## **ARE WE CARING AND ARE WE RESPONSIVE?**

The Board listened to a story of a patient who had been admitted to Florence House suffering from severe Post Natal Depression.

Ms Deery recounted the situation and difficulties that led to her being admitted to Florence House. She described the perception of her health her family had prior to her being admitted, and the treatment and support she received as an in-patient and as part of her return to the family environment.

Admission as an in-patient occurred very quickly after her initial consultation, however prior to that stage Ms Deery and her family found it difficult to access help and support and felt that her concerns were played down by Health Visitors. Once admitted, Ms Deery was very positive about the support she received in caring for her son and addressing her fears around parenthood. She was supported and encouraged throughout her stay and this helped her get into a good routine to care for her son.

Ms Abraham asked if anything could have been done to improve Ms Deery's experience.

Ms Deery commented that receiving support earlier may have prevented the need to be admitted as an in-patient; that if she had been left longer she would have been a risk to herself; and that there were issues around contact with other patients whilst at Florence House.

Ms Haughey asked what was Ms Deery's experience prior to admittance to Florence House and what happened after discharge.

Ms Deery said that support during labour was not as good as it might have been. After giving birth, there was no continuity of midwife care, so her health deterioration pattern was not identified.

Ms Haughey went on to ask about support from the Health Visitor.

Ms Deery responded that the feedback to the Health Visitor from her own parents was not taken seriously and that once the issues were taken seriously progress was very slow. She felt that the issues were put down to '*baby-blues*' when her experience was much more severe.

Ms Hunt asked how Ms Deery's health is now.

Ms Deery said that she is now well and that there was no further need for formal support from Florence House but she is able to pop in informally. She commented that she would like to be able to help other women in this situation and reassure them that they will get better and that there is '*light at the end of the tunnel*'.

Ms Abraham thanked Ms Deery for recounting her experience.

044/14

#### **APOLOGIES FOR ABSENCE**

Apologies were received from Mr Chapman & Mr Hague.

045/14

#### **QUORUM**

It was confirmed that the meeting was quorate.

046/14

#### **DECLARATIONS OF DIRECTORS' INTEREST**

There were no further interests declared.

047/14

#### **MINUTES OF PREVIOUS MEETING**

The minutes of the meeting held on 12th March 2014 were approved without any alterations.

048/14

#### **MATTERS ARISING**

There were no comments and the report was accepted.

049/14

#### **KEY ISSUES**

Mrs Fozard asked how the Trust could ensure that actions resulting from patient's experience could be incorporated in the care pathway.

Ms Abraham agreed that it is important to ensure that actions are captured.

Ms Haughey suggested that more work needs to be done to address communication issues between Maternity Services, Health Visitors and General Practitioners, especially regarding early detection of Post Natal Depression.

050/14

#### **CHAIR'S UPDATE**

Ms Abraham updated the Board on the following points:

i. Council of Governors.

Ms Abraham welcomed both new and familiar Governors and went on to thank previous Governors. She referred to her preliminary conversation with Ms Scott about how to improve opportunities for interaction between the Board and the Council of Governors. It was noted that Ms Scott intends to stand down as Lead Governor.

ii. New Senior Independent Director.

It was noted that Mrs Fozard will take up this position from 7<sup>th</sup> April

2014.

iii. Deputy Chair

Ms Hunt will become Deputy Chair at the end of April taking over from Mr Beesley who would be stepping down as a Non-Executive Director.

iv. Non-Executive Directors

Following Ms Abraham commencing as Chair and Mr Beesley's stepping down there would be two vacancies for Non-Executive Directors. It was confirmed that the process had already commenced to recruit two new Non-Executive Directors who would be appointed by the Governors.

v. Board Committees

Ms Abraham advised that Non-Executive Director appointments to Board Committees would be confirmed by Friday 11<sup>th</sup> April 2014.

AA

vi. PM Governance Report

It was noted that the report was being finalised and would be circulated to the Board by Friday 11<sup>th</sup> April 2014. The report and any recommendations will be discussed at a future Board Workshop.

AA

vii. Board Development Partner

A selection process has confirmed the organisation '*Frontline*' as the Board Development Partner. They were considered the best fit with a strong co-production style.

viii. Blueprint

The Blueprint is being finalised in preparation for the Trust's presentation to Monitor on 28<sup>th</sup> April 2014. In advance of this Ms Abraham advised the Board members that she would be meeting with Monitor during week commencing 14<sup>th</sup> April 2014.

051/14

**CHIEF EXECUTIVE'S UPDATE**

Mr Shields updated the Board on the following points:

i. Blueprint

Mr Shields explained that the Blueprint sets out the Trust's five year plan. He confirmed that the Blueprint will be circulated on Friday 11<sup>th</sup> April 2014 in advance of the Board Meeting on Wednesday 16<sup>th</sup> April 2014.

Following Board approval, the Blueprint will be sent to Monitor and the Board will present it to Monitor on 28<sup>th</sup> April 2014.

Mr Shields added that the Blueprint is the starting point in creating detailed implementation plans that will take the Trust towards the

vision set out in the five year plan.

ii. Elderly Services Meeting at Poole Hospital

Mr Shields advised that following the meeting between Elderly Services Clinicians at Poole Hospital, it has been agreed that Poole Hospital NHS Foundation Trust and Dorset HealthCare will jointly define and develop services for the elderly and a Briefing Paper will be presented to the Board.

Mr Cordwell asked if any guidance about joint services has been given by the Clinical Commissioning Group.

Mr Shields responded that the current payment systems do not support claims for multi-agency cross-organisational service provision which often occur in the management of patients with long term conditions. He noted that the Trust needed to work with the Clinical Commissioning Group regarding outcomes and measures-based payment systems.

iii. Director of Strategic Development

Two candidates will be interviewed on 22<sup>nd</sup> April 2014.

iv. St. Ann's Update

Clinicians and Staff have been consulted over the development options and have stated their preference. Detailed specifications are being developed by the Estates team. There have been complications in relation to fire compartmentalisation and potential relocation of Psychiatric Intensive Care Unit to enable the upgrade to happen, however this will not stop work commencing.

v. Locality Pilot

Mr Shields explained that this is progressing however it is slow. GPs in the Purbeck area are very keen to work with the Trust on Community Services and Community Hospitals. He added that the Trust needs to work with all partner service providers to ensure the use of information systems is effective and consistent.

vi. Choice in Mental Health Provision

National guidance is still outstanding. Once this is issued, a briefing paper will be brought to the Board.

## **ARE WE WELL LED? STRATEGY**

052/14

### **Issues to escalate to the Board**

There were no issues to escalate to the Board.

053/14

### **People Management and Organisation Development**

Ms Wiffen presented this report and highlighted the following 3 main areas:

- i. Board Skills Audit  
The Trust has engaged Odgers Berndtson to support the organisation in the recruitment of new Non-Executive Directors.
- ii. Suitability of Staffing  
The key changes to date were described including suitability, attraction & retention.
- iii. Staff Survey  
The Board were advised that the staff survey had been reviewed by the Trade Unions. The Trust will work with Trade Unions in implementing the resulting action plan.

The Board discussed the report and raised the following points:

Mr Cordwell commented that the report contained much information regarding vacancies and how to accelerate the recruitment process however, he noted that the report contradicted other information presented to the Board and asked if this indicated inappropriate measurement.

Ms Wiffen explained that recruitment issues were different in each of the Directorates.

Ms Abraham noted that the current measurement methods were not particularly sophisticated.

Mr Cordwell suggested that the narrative could be more explicit in describing the recruitment challenges in different directorates. Mr Cordwell also referred to the appointment of Ms Plumb, the Director of Organisational Development, Participation and Corporate Affairs which included communications and questioned whether this appointment would imply that line management were absolved of the need to carry out effective communications. He noted that the report illustrated continued communication issues between staff and their line managers.

Mr Shields confirmed that it is line management's responsibility to communicate with their staff.

Mr Cordwell suggested that the report should be rephrased to avoid any suggestion that the Director of Organisational Development, Participation and Corporate Affairs would resolve all communications issues.

Mr Beesley, in welcoming this report and the need for more effective outcome-focused meetings, questioned the impact on the governance structure.

Ms Wiffen confirmed that the feedback was that there are too many meetings and that there is insufficient time to feed all information back to the floor.

Ms Abraham agreed that fewer meetings and improved decision making would lead to improved focus on outcomes. She suggested

that there was an opportunity for the Board to look at meeting structures.

Mr Shields agreed that there were too many meetings and suggested that this highlighted the need to check the purpose of each meeting and ensure that the right attendees were present so that effective decision making can take place.

Mrs Fozard suggested that more focus was required on ensuring Nursing Students had suitable core values and the necessary interpersonal skills prior to acceptance of study offers.

Ms Wiffen said that two useful meetings had taken place with the University. The outcome from the meetings would be the definition of pre-selection criteria for Nursing Students.

Ms Abraham suggested that pre-degree training would give prospective students a clearer idea of the realities of nursing and help improve retention rates.

Ms Hunt suggested that following pre-assessment, there was an opportunity for a '*grow your own*' approach for those who did not pass the initial assessment.

Dr Mynors-Wallis said he was working with Mr Shields to review the Trust's Memorandum of Understanding with the University.

Ms Hunt said that work was underway to develop a new appraisal framework that will address some of the challenges currently being faced.

Ms Wiffen said that the current appraisal system would continue but there will be additional training support for managers. She added that the new system was an enhancement of the current system rather than a wholesale change. This would be demonstrated at the next Board Meeting.

Ms Abraham referred to the emphasis placed on appraisals by Health Education England noting its importance to staff engagement. She added that the enhanced appraisal system needed to be simpler and easier to use.

Ms Graves noted we were emerging from a difficult position and that in reality, appraisals are about managing a conversation between two people. She went on to say that too much time is spent chasing attainment rates rather than focusing on the importance of individual staff members accepting responsibility for the process.

Mr Shields advised that a discussion on appraisals would take place in the following week. He acknowledged that sometimes "*the system*" got in the way of communications between two people and that an appraisal was about the quality of the conversation, rather than just form filling. He added that the appraisal system needed to be fit for purpose and work for everyone.

## Summary

Ms Abraham commented that the report was wide ranging and gave a good indication about what is happening across the whole Trust.

Mr Cordwell noted that the report was easy to read and absorb the information.

Mrs Fozard added that the report contained important key information.

Mr Shields said that the recruitment processes needed to be tested and that the Executive would do this.

**HOW SAFE ARE WE?**  
**QUALITY, PERFORMANCE AND FINANCE ASSURANCE**  
**Integrated Quality, Finance and Performance Report for**  
**February 2014**

054/14

Ms Chai presented the paper and explained that it incorporated feedback from the prior month. She drew attention to the six points in the executive summary. She explained that in the Information Governance Toolkit the Trust had not achieved the 95% compliance required to achieve level two assurance. She additionally explained that because the measure is a rolling 12 month target it is likely this will be achieved by the next measurement period at the end of July.

Ms Chai advised that the Trust was on track to deliver a surplus of £400k.

Ms Hunt stated that it is crucial to deliver the QIPP savings identified for 2014/15 year as this could impact significantly on the Trust's cash position.

Ms Chai emphasised that the 2014/15 QIPP savings are included in the forecast cash position.

Ms Hunt stressed the importance of QIPP savings being included in the Executive Summary. **JC**

Ms Abraham said that the report needs to illustrate what the Trust set out to do, how the Trust did, and forecast where the Trust will close the year. She also requested information on the position against contractual targets and the position the Trust would be in now had they been achieved. **JC**

Mr Cordwell asked why the root cause analysis of the '*never event*' had not taken place as at the time of this meeting. He understood that the root cause analysis should take place within 48 hours of the '*never event*'.

Ms Graves reported that this issue was discussed at the recent Directorate meeting.

Ms Hunt questioned whether there is learning that requires immediate action and how the Board could be assured that actions had taken place.

Ms Abraham said that focus was required on process management,

organisational culture, and how relevant information is available to all committees. She advised that a paper will be presented to the Board on serious incident reporting.

Dr Mynors-Wallis commented that line managers should be aware within 72 hours of an incident adding that more serious incidents require a separate more detailed process. He advised that a paper would be presented to the Quality Assurance Committee. If the Committee approved the paper, it would be brought to the Board.

LMW

Mr Brook said that the Trust was good at reporting '*never events*' but not good at reporting '*near misses*' adding that this area of work is being reviewed by the Quality Assurance Committee.

Ms Abraham noted that it was also important to celebrate best practice and cited, as an example, the achievements of Community Health Dental Services delivering dementia friendly dental care as outlined in the report presented to The Royal College of Surgeons.

055/14

### **To Receive the Standing Financial Instructions**

Ms Chai presented the amendments to the Standing Financial Instructions. She confirmed these had been discussed at the Finance, Investment and Performance Committee and had been reviewed and recommended for approval by the Audit Committee.

**The Board approved the revised Standing Financial Instructions.**

056/14

### **To receive the Quality Account Priorities and approve the Indicators and Measures.**

Ms Haughey presented this paper and reminded the Board that the 2014/15 Quality Account priorities had been previously approved. This paper sought to consider and agree the associated quality indicators and targets.

Mr Brook asked if baselines had been established for the targets, suggesting that rolling measurement could be preferable.

Mrs Fozard referred to the Patient Experience measurement explaining that it could be difficult to capture patient complaints and gain a meaningful percentage of those satisfied by the handling of their complaint.

Ms Haughey said that the quality account is flexible and therefore thought needs to be given to how to position the narrative. She added that it is possible to add information as it becomes available, but not to exclude information previously included.

Ms Abraham noted that Quality Account Priorities and Measures are an important focus for the year ahead.

**The Board approved the Indicators and Measures.**

057/14

**To receive a progress report on the Francis Action Plan**

Ms Haughey presented this paper which updated the Board on the outcomes and recommendations from the internal audit review of the Trust's response to the Francis Report and Recommendations. She reported that Internal Audit had now given significant assurance that the 291 recommendations had been scrutinised and the Trust was measuring itself against the recommendations. She further noted that the Trust is in a position to say that an action plan and specific details are being finalised to evidence progress adding that further information will be presented to the Patients Experience Group and the Quality Assurance Committee in May 2014. She also confirmed that Internal Audit had been kept informed of progress with this action plan.

The Board discussed what information should be made available on the Trust's website concluding that we should publish the Trust's formal response to the Francis Report through a compliance statement and action plan.

058/14

**To approve the appointment of Sue Evans-Thomas and Liz Morris, Mental Health Act Hospital Managers.**

Prior to the discussion of this topic the Chair asked Ms Evans-Thomas and Ms Morris to leave the room.

Mrs Fozard, Chair of the Mental Health Act Hospital Managers Assurance Committee presented this paper seeking the reappointment of Ms Evans-Thomas and Ms Morris as Mental Health Act Hospital Managers.

**The Board unanimously approved the appointment of Ms Evans-Thomas Ms Morris for the duration of two years.**

**HOW EFFECTIVE ARE WE?**

**BOARD COMMITTEE BRIEFING PAPERS**

059/14

**Quality Assurance Committee briefing report held on 27<sup>th</sup> March 2014**

Ms Abraham presented the report on the activities of the Quality Assurance Committee.

The Board noted this report.

060/14

**Audit Committee briefing report held on 14<sup>th</sup> March 2014**

Mr Cordwell presented this report drawing the Board's attention to the key topics of discussion: Policies; Assurance Committee; and Board Assurance Framework. He explained that the draft report from PM Governance had been received. This highlighted a number of issues including the implementation of policies; how Board Committees interrelate; Governance Structure; and Board Assurance Framework.

The Board noted this report.

061/14

**Finance, Investment and Performance Committee briefing report held on 24<sup>th</sup> March 2014**

Ms Hunt updated the Board on the activities of the Finance, Investment and Performance Committee.

The Board noted this report.

062/14

**GOVERNANCE**

**Part 1 Forward Board Agenda Planner.**

The Board noted the forward planner.

063/14

**MINUTES AND USE OF EMERGENCY POWERS FOR INFORMATION**

**Minutes of the following meeting were received and noted**

- Audit Committee Meeting held on 31<sup>st</sup> January 2014
- Quality Assurance Committee Meeting held on 27<sup>th</sup> February 2014
- Finance, Investment and Performance Committee Meeting held on 5<sup>th</sup> February 2014

064/14

**HR & Workforce Development Committee Meeting 'draft' minutes held on 27<sup>th</sup> February 2014.**

The minutes were noted with the proviso of ensuring sign-off by Mr Chapman and Mr Hague.

065/14

**EMERGENCY POWERS**

There were no reported uses of emergency powers.

066/14

**ANY OTHER BUSINESS**

**Mr Beesley Stepping Down**

Ms Abraham reminded the Board that Mr Beesley would be stepping down as a Non-Executive Director the end of April 2014. She took the opportunity to thank Mr Beesley for his contribution to the Trust over the last 8 years. She reiterated what Sir David has said about Mr Beesley, that he is a "valued and dedicated member of the Board". Attention was drawn to Mr Beesley's commitment to the Trust through good and challenging times noting he had helped steer the Trust towards its recovery. Special mention was given to Mr Beesley's contribution as Mental Health Act Hospital Manager, a role he will continue to fulfill.

067/14

**SIGNIFICANT ISSUES FROM DIRECTORS**

There were no significant issues from Directors

068/14

**OBSERVATIONS FROM GOVERNORS**

### Feedback on 'Never Events'

Ms Scott commented that she was pleased that the Board was looking at this issue adding that timing and pace factors needed to be addressed. She suggested that it would be necessary to identify who will be responsible for the outcome. She went on to query how '*never events*' impact on engagement with Monitor.

Mr Shields responded that that unless a specific issue had been raised '*never events*' do not effect engagement with Monitor, however he confirmed that he had notified Monitor of this specific '*never event*'.

Dr Mynors-Wallis stressed the importance of staff feeling comfortable about reporting events and went on to express his disappointment that this '*never event*' was not reported in a timely manner.

### Meeting Documentation

Ms Evans-Thomas was concerned that the Board Meeting papers were not received early enough by Governors prior to the Board Meeting asking what action would be taken to ensure that this would not happen again.

Ms Abraham advised delivery and read receipts would be requested, adding that it was important that IT was fit for purpose. She went on to apologise for the non-delivery.

### Staff Communications

Ms Evans-Thomas expressed her disappointment that 24% of staff say that communications are poor. She described a business dinner where a Trust employee stressed the negative impact of this situation by saying that many employees are looking for other jobs. Additionally, she commented that this was both a potential skills loss and a reputational risk.

Ms Abraham responded that she wanted the Trust to be considered an employer of choice and that staff engagement is a big challenge that needs to be addressed more efficiently and effectively.

### Patient Story

Ms Webb reflected on the patient's story and expressed the sentiment that improved mental health education would help enhance service provision and asked what action the Trust would take.

Ms Elson responded that work was continuing with Health Visitors to ensure that signs of Post Natal Depression were identified early.

### St Ann's

In response to a question from Ms Morris, Mr Shields explained that

detailed specifications for all 3 wards in question at St. Ann's were being developed by the Estates team.

**DATE AND TIME OF NEXT MEETING**

The next meeting of the Dorset HealthCare University NHS Foundation Trust will be held on Wednesday 14<sup>th</sup> May 2014 at Kingston Maurward College, Dorchester, Dorset, DT2 8PY commencing at 1:00pm.

**EXCLUSION OF THE PUBLIC**

To resolve that representatives of the Press and other members of the public, be excluded from the remainder of this meeting having regard to the confidential nature of the business being transacted, publicity of which would be prejudicial to the public interest.

Signed:

Date

Lynne Hunt, Non-Executive  
Director  
Deputising for Chair