

Part I Minutes of the Dorset HealthCare University NHS Foundation Trust  
Board of Directors Meeting held on Wednesday 13<sup>th</sup> August 2014  
at Sentinel House, Nuffield Road, Poole, Dorset, BH17 0RB

|                       |                     |   |
|-----------------------|---------------------|---|
| <b>Present:</b>       | Ms. A Abraham       | Chair   |
|                       | Mr. R Shields       | Chief Executive   |
|                       | Ms. L Boland        | Director of Children and Young People Services                            |
|                       | Mr. D Brook         | Non-Executive Director  |
|                       | Ms. J Chai          | Acting Director of Finance & Performance Management                       |
|                       | Mrs. G Fozard       | Non-Executive Director  |
|                       | Mr. C Hague         | Director of Human Resources   |
|                       | Ms. F Haughey       | Director of Nursing & Quality   |
|                       | Ms. L Hunt          | Non-Executive Director & Deputy Chair                                     |
|                       | Mr. J McBride       | Non-Executive Director  |
|                       | Dr. L Mynors-Wallis | Medical Director  |
|                       | Ms. S O'Donnell     | Interim Director of Community Health Services                             |
|                       | Ms. N Plumb         | Director of Organisational Development, Participation & Corporate Affairs |
|                       | Mr. N Yeo           | Non-Executive Director  |
| <b>In Attendance:</b> | Mr. H Bayayi        | Assistant Director of Inpatient and Crises Services                       |
|                       | Mr. M Dobbs         | Interim Trust Board Secretary   |
|                       | Ms. G Morris        | Assistant to Trust Board Secretary  |
| <b>Apologies:</b>     | Ms. J Elson         | Director of Mental Health Services  |
|                       | Mr. C Harvey        | Trust Board Secretary   |
|                       | Ms. S Murray        | Non-Executive Director  |
| <b>Observers:</b>     | Ms. B Aldridge      | Partner Governor  |
|                       | Mr. C Balfe         | Public Governor (Dorset RoEW)   |
|                       | Mr. B Batty-Smith   | Partner Governor  |
|                       | Mr. M Bevan         | Partner Governor  |
|                       | Ms S Evans-Thomas   | Public Governor (Poole)   |
|                       | Ms. S Gregory       | Public Governor (Dorset RoEW)   |
|                       | Ms. S Lofthouse     | Public Governor (Dorset RoEW)   |
|                       | Ms. L Morris        | Public Governor (Dorset RoEW)   |
|                       | Ms. J Owens         | Public Governor (Dorset RoEW)   |
|                       | Mr. P Rawlinson     | Incoming Non-Executive Director   |
|                       | Ms. A Reed          | Public Governor (Dorset RoEW)   |
|                       | Ms. P Scott         | Lead Public Governor (Dorset RoEW)  |
|                       | Ms. A Webb          | Public Governor (Poole)   |
|                       | Ms. S Wright        | Associate Director of Finance   |

## WELCOME

Ms. Abraham welcomed Mr. McBride, Mr. Yeo, Mr. Rawlinson, Mr. Bayayi, Ms. Wright, Mr. Dobbs and the Governors to the Part I Board Meeting.

142/14

## PATIENT STORY

Ms. Abraham introduced the patient story by reminding Board members of the Board convention on the use of patient stories agreed at the July meeting and the purpose of settling the focus of the meeting on the patient at the start.

Ms. Haughey read the narrative provided.

Ms. Abraham opened the meeting to comments on the patient story.

Ms. Haughey reflected that the Psychiatric Intensive Care Unit provides a safe environment and that closed wards can feel oppressive to patients noting that the intention is to improve the environment.

Ms. O'Donnell reflected positively that staff patient engagement improves the patient experience.

Ms. Boland stressed the importance of environment to recovery.

Ms. Hunt noted the negative comments in the patient story about the regime on '*old wards like Branksome*' in contrast to the positive review of Harbour Ward. She went on to ask whether there are other wards similar to Branksome Ward currently within the Trust's estate and what action is being taken to improve the culture, warmth and attitude seen on those wards.

Ms. Abraham agreed that accommodation can affect patient experience and staff behaviour and went on to ask about the level of Occupational Therapy resource available.

Mr. Bayayi responded that a staff skills matrix is currently being configured to ensure optimum Occupational Therapy opportunities for inpatients.

Mr. Shields advised that he met the service user at the Harbour Ward Open Day on 31<sup>st</sup> July 2014. The patient had contrasted their recent experience with previous less positive inpatient experience. He reflected the importance of staff engagement and care focusing on recovery.

**The Board noted the patient story narrative.**

143/14

**APOLOGIES**

Apologies were received from Ms. Elson, Mr. Harvey, and Ms. Murray.

144/14

**QUORUM**

It was confirmed that the meeting was quorate.

145/14

**DECLARATIONS OF INTEREST**

There were no further interests declared.

146/14

**MINUTES OF PREVIOUS MEETING**

The minutes of the Part I Board Meeting held on 9<sup>th</sup> July 2014 were approved with the following alteration:

130/14 fifth paragraph, last sentence amended to read '*The number of return to practice training places at Bournemouth University is planned to double*'

147/14

**MATTERS ARISING**

The schedule of matters arising from the 9<sup>th</sup> July 2014 was presented. The report was accepted with the following amendment:

108/14 The response was amended to '*completed*'.

148/14

**CHAIR'S UPDATE**

1. Resignation of Mr. Cordwell  
Mr. Cordwell's resignation due to increased work commitments was acknowledged. His contribution to the Board and as Chair of the Audit Committee was noted.
2. Non-Executive Director Recruitment  
Three of the four new Non-Executive Directors were welcomed to the Board Meeting. The significant amount of work undertaken by the Nominations Committee in agreeing a longlist and shortlist and interviewing candidates was noted.
3. Council of Governors Meeting held on 16<sup>th</sup> July 2014  
The agenda included approval of the Non-Executive Director appointments, amendments to the Trust Constitution, a presentation about staff recruitment and

retention and a discussion regarding the forthcoming Annual Members Meeting.

4. Substantive appointments  
Ms. Haughey, Ms. Boland and Ms. O'Donnell were congratulated on their recent substantive appointments.
5. Allied Health Professionals Poster campaign  
The Board and Governors were encouraged to view the posters on display in the Agile Area at Sentinel House following the campaign launch in week commencing 4<sup>th</sup> August 2014. The launch was attended by the Department of Health National Lead for Allied Health Professionals.

149/14

### **CHIEF EXECUTIVE'S UPDATE**

1. Better together  
This county wide multi-agency initiative, which aims to transform services for the elderly, is consistent with the Locality Model being developed. Commissioning models are being reviewed. Bid submissions are due by 19<sup>th</sup> September 2014 for the Better Care Fund which supports acute service providers. A 3.5% reduction in funding is expected with measures being applied if service providers do not achieve the reduction. A Clinical Service Partner Organisation review will take place on 4<sup>th</sup> September and will lead into a grand launch in October 2014. Public consultation is expected from July 2015.
2. Urgent care  
Acute service providers are being challenged by the increased workload in Accident and Emergency Departments. A national advisory group has been engaged to look at systems and work processes and intends to continue the work undertaken by The King's Fund and the Oaks Group reports.
3. West Dorset Mental Health Services review  
The University of West England has been commissioned by the Clinical Commissioning Group to undertake a review of mental health services in West Dorset. The review is likely to identify shortcomings in existing service provision and the Trust then working with Commissioners on an improvement plan.
4. Visit by the Care Quality Commission to the Waterston Unit

The Care Quality Commission visited the Waterston Assessment Unit at Forston Clinic Unit on Monday 4<sup>th</sup> and Tuesday 5<sup>th</sup> August 2014. The report is expected to include shortcomings in care planning and risk assessment documentation and concerns about staffing levels. Actions to address the issues have commenced at the Unit and Monitor has been advised of the visit and initial feedback. Once the report is available it will be circulated to the Board and Council of Governors.

Mrs. Fozard asked if any emergency actions resulted from the visit.

Ms. Hunt asked whether the leadership structure required review.

Mr. Shields responded that no emergency actions were advised and that a review of the Unit is being undertaken.

Ms. Haughey advised that feedback from the Care Quality Commission reported that staff felt that patients were safe. When the report is received it will be shared with the Board. There is an immediate action plan in place in response to the initial feedback from the inspection and ongoing support to ensure appropriate staffing is in place.

5. Joint Pilot Study with Dorset Police

This pilot will look at the experience of mental health service users as victims of crime, and how to help prevent these crimes. Ms. Aldridge will be leading the pilot on behalf of the Trust and will be arranging for the Police Team to meet the Mental Health Service Team clinicians, including the Community Mental Health Team and the Assertive Outreach Team as well as the Dorset Mental Health Forum.

Mrs. Fozard commended the initiative.

6. Ebola

National guidance regarding presenting symptoms and actions required has been issued. It is extremely unlikely that incidence will be seen in the locality, however Immigration Centres are on alert.

**ARE WE WELL LED? STRATEGY**

150/14

**People Management and Organisation Development**

Mr. Hague presented this report and highlighted the progress made regarding substantive appointments to the Board. He commented that the Council of Governors and

the Finance, Investment and Performance Committee had both welcomed the new initiatives to enhance staff recruitment and retention and employee experience. Referring to the national ballots for industrial action due to take place in August and September 2014, he advised that contingency plans are being reviewed.

Ms. Haughey noted that prevention and management of violence and aggression is one of the quality priorities for the current year.

Ms. Abraham was pleased to see that the Trust is able to continue using the Mindful Employer logo and be a signatory to the Mindful Employer Charter.

**The Board noted the People Management and Organisation Development Report.**

151/14

**Locality Leadership Model Progress Report**

Ms. Boland and Ms. O'Donnell jointly gave a progress report on the Locality Leadership Model.

Ms. Boland recounted that excellent feedback had been received from the staff consultations that took place in July saying that, based on the feedback, changes had been made to the Locality Leadership Model. One to one consultations will be completed by the end of week commencing 18<sup>th</sup> August, with leadership selection being completed by 19<sup>th</sup> September. Further review of clinical leadership will take place in a workshop on 9<sup>th</sup> September 2014.

Ms. O'Donnell said that clinical leadership engagement would be an ongoing process. After recruitment for the next tier is complete the induction process, which will include engaging with general practitioner partners, will commence in parallel with the restructure of corporate services.

Mr. McBride asked for assurance that patient care and treatment would not be affected during the period of change.

Mr. Brook requested that corporate services receive adequate attention to limit risks to patient care during the transition to the new structure.

Ms. Boland responded that 'business as usual' would continue during the transitional period.

Mrs. Fozard agreed that clinical leadership is central to care provision. She went on to express concern that site management changes may obstruct co-ordination

between sites.

Mr. Hague advised that meetings had been arranged with Ms. Chai to ensure that corporate services were able to support the new locality structure.

Mr. Shields responded that site management accountability would enhance the use of all community premises. He went on to say that the new structure would be gradually implemented to minimise uncertainty and risk during the transitional period.

**The Board noted the progress and the management response to the consultation proposals.**

152/14

**Organisational Development, Participation, and Communication Strategy Papers.**

Ms. Plumb presented these strategies highlighting that the three papers contain interlocking interests bringing together systems, process, culture and values that will help the Trust celebrate success and empower staff as part of its organisational development. Improving participation and its role and function will be reviewed with input from Ms. Aldridge; and reviewing and implementing communication channels and structure will continue to develop brand integrity whilst supporting the 13 cohesive locality units.

Mr. Hague praised the positive content and tone of the papers and advised the importance of engaging with the trade unions and partnership forums.

Ms. Hunt said that it was important that the whole Trust understand that this is a Board-led initiative providing the Trust with a '*single sight of vision*'.

Mr. Yeo commented that the way in which communications are managed will impact on all work programmes especially during periods of uncertainty such as the Locality Leadership Structure changes.

Mrs. Fozard said that the three papers articulated the Trust's vision and values really clearly.

Ms. Boland noted that the organisational development, participation, and communications strategies will form part of the Induction Programme being developed for the Locality Leadership Model.

Ms. Haughey welcomed the humanistic approach that places care at its centre noting that audit and measurement is a legal requirement that cannot be removed. She requested that the Trust's relationship with

Bournemouth University through Professor Brown's role on the Trust Executive be included.

Mr. Shields stressed the importance of a measured implementation timescale and suggested that this was reviewed to ensure that engagement and ownership is not compromised by too short an implementation period.

Ms. Chai praised the candour of the strategies adding that it is important to be mindful of the impact on staff of cautionary reports, such as the Francis report, which may suppress staff engagement.

Dr. Mynors-Wallis agreed with the papers' content and queried the time and resources available for implementation requesting further details.

Ms. Abraham expressed the importance of the Board in modelling behaviours and encouraged colleagues to positively reinforce the Trust's vision and values.

Ms. Plumb agreed that no single person can be responsible for delivering these strategies adding that a clear sense of vision and purpose will galvanise people.

**The Board noted and approved the Organisational Development Strategy 2014-2017.**

**The Board noted and approved the Participation Strategy 2014-2017.**

**The Board noted and approved the Communications Strategy 2014-2017.**

## **HOW SAFE ARE WE?**

### **QUALITY, PERFORMANCE AND FINANCE ASSURANCE**

153/14

#### **To receive the Integrated Corporate Dashboard and Report for June 2014**

Ms. Chai presented this report and highlighted the new Executive Summary and the inclusion of the Blueprint deliverables. She noted that the Healthcare Acquired Infections indicator was amber due to 5 incidents of Clostridium difficile in quarter one.

In relation to financial measures, the Trust is showing a year to date deficit of £317k against a planned deficit of £992k and is therefore £675k ahead of plan; has achieved more than 50% of the Cost Improvement Programme; and the Capital Programme is on target.

Mrs. Fozard queried whether the incidence of Clostridium difficile had any correlation with levels of staff vacancies,

and went on to ask how the Trust will improve on the level of complaints seen and whether the Trust has the right level of information to identify and address trends. She finally noted the low number of attendees on the Delivering Customer Care with Compassion course.

Ms. Haughey responded that the Clinical Commissioning Group has noted a national rise in the incidence of Clostridium difficile and that an investigation is ongoing with the results due to be taken to the Quality Assurance Committee at the end of August. The cycle of infection and patient movement is being reviewed and laboratory test results are also due. Complaints are a new inclusion in the Integrated Corporate Dashboard and the results need to be reviewed in context of total number of complaints. Finally it was suggested that the Delivering Customer Care with Compassion course could become mandatory.

Dr. Mynors-Wallis noted that the majority of Patient Safety Incidents resulting in moderate to catastrophic harm were related to pressure ulcers. The Medical Director, Director of Nursing and Quality and Head of Patient Safety are working with the service managers to implement a plan to reduce pressure ulcers which includes training, implementation of a tool to ensure all pressure ulcer risks have been considered, and a review of equipment. Progress will be reported quarterly to the Quality Assurance Committee. He went on to emphasise the importance of staff/patient engagement, finally querying whether the drop in staff Personal Development Reviews was indicative of concerns regarding ongoing restructuring required by the Locality Leadership Model.

Ms. Abraham agreed that the Executive Summary should help the Board identify areas to review whilst noting implications on Monitor and Care Quality Commission reporting.

It was noted with concern that two Blueprint deliverables were rated as red:

*'Continue Implementation of the staffing plan agreed by the Board in February 2014'*

and

*'Ensure systems are in place to monitor the key metrics agreed by the Board including staffing levels and a reduction in the use of agency staff to within agreed tolerance limits'*.

Ms. Haughey suggested that the deliverable on staffing levels was considered within the following agenda item on

Staffing and this was agreed.

LMW

Dr. Mynors-Wallis commented that the Board Workshop on 18<sup>th</sup> June 2014 had agreed that the quality metrics currently in place should be reviewed for relevance to clinicians, whether they could be aggregated and used as part of a data-pyramid, and for accuracy, noting that this work was in progress. He suggested that the Blueprint deliverable relating to key metrics could be broken down into specific milestones to aid reporting and this was agreed. Ms. Abraham requested that this revised articulation of the Blueprint deliverable be included in the report for the September Board Meeting.

Mr. Yeo asked about progress being made on the Delayed Discharge Indicator.

Ms. Chai responded that process mapping for discharge arrangements has taken place with some improvements to the process agreed with local authorities.

The Board noted and commended the examples of best practice included in the report from the Intensive Psychological Therapies Service, the Audiology Service and the Children and Young People Service.

**The Board noted the Integrated Corporate Dashboard and Report.**

154/14

**Six-monthly Review of Inpatient Nurse Staffing Establishment**

Ms. Haughey presented this report highlighting the work to date to implement and further understand safe staffing levels particularly on the acute mental health wards.

The Board were asked to consider and note:

- the work that has been undertaken to further understand the staffing requirements of the wards using the evidence based tools, professional judgement and other data and that this will continue to be developed going forward;
- that the acuity/dependency in the Elderly Care/Rehabilitation Wards has increased in the June review using the Safer Staffing Tool and that this will be repeated in January 2015;
- the likelihood that further financial investment will be required as the wards are systematically reviewed using the appropriate methodologies to agree safe staffing levels;
- the high number of vacancies for qualified nurses

- across all service areas, particularly mental health wards and that active recruitment continues to all posts across all service areas;
- the reduced bank and agency spend to support staffing levels in Elderly Care/Rehabilitation services but increased use in mental health services;
  - compliance in meeting the national expectation of submitting staffing data through the Unify system and posting this information on NHS Choices and on the Trust internet;
  - the systematic collection of the planned and actual staffing on a shift by shift basis identifying in real time areas of pressure where staffing shortfalls may impact on patient safety and current staffing pressures notably on Waterston and Haven wards;
  - the development of the quality dashboard to triangulate patient safety data with staffing data, noting that the dashboard will continue to be developed going forward to ensure the Trust is capturing the right safety and patient experience data and enable the Trust to understand more fully the impact of staffing levels on individual wards.

The Board was asked to approve additional funding of £89,109 for the three acute mental health wards in the light of the staffing review at Haven, Dudsbury and Seaview Wards, and to consider additional funding of £167,222 for Harbour and Alumhurst Wards.

Ms. Abraham asked whether the additional funding was affordable and Ms. Hunt asked whether the funding was in addition to the £1.2million investment previously agreed and what impact additional staff funding would have on the Staffing Level Indicators and Staff Vacancy Rates if staff recruitment continued to be challenging.

Dr. Mynors-Wallis advised that increased funding for staff could also affect bank and agency staff usage.

Ms. Chai responded that the £256k could be covered by the contingency fund, whilst a corresponding amount would need to be added to the Cost Improvement Programme for 2015/16.

Mr. Shields said that the initiatives taking place to resolve staff recruitment and retention issues would address some of the concerns.

Mrs. Fozard was in favour of the additional funding but cautioned that “*safe staffing*” is not necessarily the same as “*therapeutic staffing*” and suggested that data on the quality dashboard be triangulated with ward and patient outcomes to ensure a therapeutic baseline against which

to measure.

Ms. Abraham asked that the patient-centred definition of Safe and Therapeutic staffing levels that was discussed at the February 2014 Board Meeting be revisited.

Ms. Haughey agreed to build the safe and therapeutic staffing definitions into the ongoing staffing reports, which will be reviewed at least six monthly by the Board. The Board will receive monthly staffing data highlighting areas for attention within the Integrated Corporate Dashboard and Report. To support the ongoing process the Quality Assurance Committee will receive monthly staffing reports.

FH

Mrs. Fozard expressed concern on the appropriateness of the metrics in use. The Board commented on the wide range of patient safety metrics in place and the need for further refinement in relation to quality metrics generally.

FH

Ms Abraham asked that the narrative in the Blueprint deliverable relating to the Staffing Plan be amended to reflect the current position. Ms Haughey suggested that the deliverable be broken down into key milestones against which to measure performance and this was agreed.

Ms. Hunt advised that the implications of the funding decision would need to be reviewed by the Finance, Investment and Performance Committee.

**The Board noted the Six Monthly Review of Inpatient Nurse Staffing**

**The Board approved the recommended additional funding of £89,109 for Haven, Dudsbury and Seaview Wards and £167,222 for Harbour and Alumhurst Wards.**

## **HOW EFFECTIVE ARE WE?** **BOARD COMMITTEE BRIEFING PAPERS**

155/14

### **Visits by Board Directors to Service Areas and Departments**

It was noted that the purpose of the paper was to implement the Board Convention on visits by Board Directors to Service Areas and Departments agreed at the July Board Meeting.

Whilst the proposals in the paper referred specifically to Non-Executive Directors, Mr. Shields suggested that the same approach and process be used by Executive Directors who do not lead service areas and this was

agreed.

Mr. Hague suggested that Directors might also be interested to observe the Prevention and Management of Violence and Aggression Training, which takes place monthly on a Friday and said that he would be happy to make the necessary arrangements.

It was agreed that Non-Executive Directors, and Executive Directors who do not lead service areas, would liaise with their selected Executive Director 'partner' in accordance with Stage 1 of the proposal, and that the practical arrangements for visits would be put in place by Linda Thomas, PA to the Director of Nursing and Quality, in accordance with Stage 2 of the proposal.

**The Board approved the proposal for Visits by Directors to Service Areas and Departments.**

156/14

**To note the report of the Finance, Investment and Performance Committee held on 5<sup>th</sup> August 2014**

Ms. Hunt presented the report on the activities of the Finance, Investment and Performance Committee.

**The Board noted the Finance, Investment and Performance Committee report.**

**GOVERNANCE**

157/14

**Use of Emergency Powers for Information**

Emergency Powers were not employed in the previous month.

158/14

**Monitor Return for Quarter 1**

It was noted that the Quarter 1 submission to Monitor and the associated Board declarations had been agreed at the Extraordinary Board Meeting held on 30<sup>th</sup> July 2014.

Ms. Chai informed the Board that the Quarter 1 submission to Monitor was made on 31<sup>st</sup> July 2014.

**The Board noted the Quarter 1 Monitor submission.**

159/14

**Non-Executive Director Membership of Board Sub-Committees**

**The Board confirmed the Non-Executive Director**

**Membership of Board Sub-Committees as detailed in the paper.**

160/14

**Chair/CEO Memorandum of Understanding**

Ms. Abraham presented the Memorandum of Understanding between the Chair and Chief Executive highlighting the differing and complimentary leadership roles. She noted that the Memorandum would be useful to help extended teams understand the differing leadership roles.

**The Board approved the Memorandum of Understanding between the Chair and the Chief Executive.**

161/14

**Annual Cycle of Board Business**

Ms. Abraham introduced the paper, which provided the Board with a draft cycle of business for the next eighteen months. She advised that the document would be used to arrange suitable dates for sub-committee meetings that allow for appropriate workflow.

The main Board and Board Workshop meeting dates were confirmed, whilst noting that the document will be further refined during September.

Ms. Chai welcomed the Annual Cycle of Board Business with the caveat that meetings that contribute to the Integrated Corporate Dashboard and Report would need to take place prior to the report being amalgamated.

Ms. Abraham explained that the Annual Cycle of Business would evolve as the overall Board committee structure is developed.

**The Board approved the draft cycle of business in principle, subject to further development of Board committee cycles of business.**

162/14

**To note the minutes of the Finance, Investment and Performance Committee Meeting held on 4<sup>th</sup> June 2014**

**The Board noted the minutes of the Finance, Investment and Performance Committee Meeting.**

163/14

**SIGNIFICANT ISSUES FROM DIRECTORS**

No significant issues from Directors were raised.

164/14

**ANY OTHER BUSINESS**

No other business was raised.

165/14

**OBSERVATIONS FROM GOVERNORS**

Ms. Webb asked whether an incident where there was no registered member of staff on duty as highlighted in the Integrated Corporate Dashboard and Report would constitute a 'never event'?

Ms. Haughey responded that on investigation it was established that a registered member of staff had stayed on from the previous shift to ensure that the shift was suitably covered.

Ms. Gregory was pleased to hear the patient story and endorsed Ms. O'Donnell's comment that patient focused staffing is central to good care. She went on to note that she was impressed that incidences of Clostridium difficile were low, explaining that certain antibiotics used to treat pneumonia could increase the prevalence of Clostridium difficile.

Ms. Haughey responded that the incidence would be reviewed in relation to antibiotic use.

Mr. Balfe asked if the Council of Governors had been advised of the review of Mental Health Services for West Dorset. He also raised concerns over the volume of Board paperwork and whether more executive summaries could be used.

Mr. Shields responded that the Trust Executive were in the process of reviewing the terms of reference for the Mental Health Services Review, following which information will be provided to the Council of Governors.

Ms. Abraham advised that the volume of Board paperwork is being addressed within the Corporate Governance review currently underway.

Mr. Rawlinson suggested that, following approval for increased funding, for staffing a review should take place comparing the funding required to that provided by the Clinical Commissioning Group.

Ms. Haughey responded that this would be reviewed and funding discussions would take place with the Clinical Commissioning Group if required.

**DATE AND TIME OF NEXT MEETING**

The next Board Workshop will be held on Wednesday 20<sup>th</sup> August 2014  
at Merley House, Wimborne, Dorset BH21 3AA

The next Board Meeting will be held on Wednesday 10<sup>th</sup> September 2014  
at Sentinel House, 4-6 Nuffield Rd, Poole, Dorset BH17 0RB

**EXCLUSION OF THE PUBLIC**

It was resolved 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:

Ann Abraham, Chair