

**Meeting of the Oxford Health NHS Foundation Trust**

**Board of Directors**

Minutes of a meeting held on

Wednesday, 26 June 2013 at 0900 in the Trust HQ, Oxford

**Present:**

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| Martin Howell | Chair of Trust |
| Stuart Bell | Chief Executive |
| Ros Alstead | Director of Nursing and Clinical Standards |
| Mike Bellamy | Non-Executive Director |
| Alyson Coates | Non-Executive Director |
| Sue Dopson | Non-Executive Director |
| Anne Grocock | Non-Executive Director |
| Mike McEnaney | Director of Finance |
| Clive Meux | Medical Director |
| Yvonne Taylor | Chief Operating Officer |
| Lyn Williams | Non-Executive Director |
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| **In attendance:** | |
| Justinian Habner | Trust Secretary (Minutes) |
| Jayne Halford | Deputy Director of Human Resources – *part meeting* |

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| **BOD**  **86/13**  a | **Welcome and Apologies for Absence**  Cedric Scroggs, Director of Finance. |  |
| **BOD 87/13**  a  b | **Declarations of Interest**  The Trust Secretary presented the report which provided the current Register of Directors’ Interests.  The Board confirmed that interests listed in the Register of Directors’ Interests remained correct, subject to inclusion of the following:-   * Alyson Coates:   + Remove ‘Member of the Auditing Practices Board, The Financial Reporting Council’   + Remove ‘External Member of the Audit Committee Olympic Lottery Distributor’   + Amend ‘Governor *and Chair of Finance and Investment Committee*, Oxford Brookes University |  |
| **BOD 88/13**  a  b  c  d  e  f  g  h  i | **Minutes of the Meeting held on 29 May 2013**  The Minutes of the meeting were approved as a true and accurate record, subject to the following:-   * Amending typographical errors on pages 4, 5, 6, 8, & 9. * Remove Roger Reed from list of those present. * Amend Paul Dodd’s title to ‘Deputy Director of Finance’.   ***Matters Arising***  **BOD 69/13 b – Sandford Ward SIRI** – the Director of Nursing and Clinical Standards said the outcome of the SIRI investigation, when completed, would be included in the confidential Quality and Safety Report. The Board agreed that this action could be removed as the update would be provided in due course.  **BOD 69/13 d – *C.diff***– the Director of Nursing and Clinical Standards set out the agreement that had been reached with the CCG on how *C.Diff* incidents would be reviewed. Importantly, it was agreed that whilst the NHS England target would remain 8, only incidents that were attributable to the healthcare provided would be counted against the target. Alongside this, a fine structure had been agreed with the CCG which was in line with the structure for Oxford University Hospitals NHS Trust. The Board welcomed the agreement reached with the CCG.  Looking forward, the Board discussed whether a financial penalty regime to tackle *C.Diff* was appropriate and agreed that the Trust should seek to influence, through the FTN, the national thinking on this issue.  **BOD 69/13 g – M10 Target – Crisis Teams** – the Chief Executive explained that he had raised with Monitor the issue relating to how the Trust interpreted the crisis target through his Q4 cover letter and in the follow-up teleconference. Monitor had not raised any concerns with what the Trust was doing. The Director of Finance explained that the Trust was tracking performance against the revised definition which had been agreed with the Trust’s auditors.  **BOD 75/13 c – Friends and Family Test** – the Director of Nursing and Clinical Standards said it was not possible to directly link the Friends and Family Test with the Trust’s complaints processes. Nevertheless, she set out how the various strands of information were being triangulated to provide an overall position.  **BOD 75/13 d – Quality & Safety Reports** – the Director of Nursing and Clinical Standards said that future reports would include comparison of Trust performance against others where possible. In particular, the results of inpatient surveys would be included. The Chief Executive added that the Academic Health Science Network would provide a platform for benchmarking, particularly with Berkshire Healthcare NHS FT.  **BOD 80/13 b – R&D Report** – the Medical Director said all suggestions would be included in the next R&D Report which would be presented to Board in November 2013.  **BOD 77/13 d – Influenza Vaccinations** – the Board noted the discussion on improving the Trust’s flu vaccination rate and the Director of Finance confirmed that the Deputy Director of HR was now driving the forthcoming vaccination programme. |  |
| **BOD 89/13**  a  b  c  d  e  f  g | **Chief Executive’s Report**  The Chief Executive presented his written report which outlined recent national and local issues.  On the AHSN the Chief Executive explained that discussions were taking place with NHS England on the conditions being attached to the funding received for the Oxford AHSN. The chief executive recruitment process had commenced.  On the AHSC, the Chief Executive said that the full application needed to be submitted at the end of September 2013; accordingly, work was taking place to prepare this including a stakeholder event on 17 July 2013 to engage the wider community in the proposal. In terms of the work the Trust was undertaking, the Chief Executive said that a formal agreement / memorandum of understanding between the University of Oxford and the Trust would be prepared and that the Trust Secretary was reviewing the agreement in place between the OUH and the University of Oxford. A draft of the agreement would be presented to the Board in September 2013. The Board also agreed that it would be beneficial to have a similar agreement in place with Oxford Brookes University and the Chair agreed to raise this suggest with Professor Janet Beer, Vice-Chancellor.  The Chief Executive also highlighted the recent briefing event for potential bidders for the Trust’s electronic healthcare record. The Board noted that this was a major strategic project for the Trust in the year ahead and discussed the requirements of the Trust and what guidance was being provided to potential bidders. The Board noted that a balance should be struck between promoting innovation and ensuring that the base-level requirements were met. It was agreed that the Board should receive regular updates on this important project.  Anne Grocock noted the item concerning the publication of the Independent Investigation into the Healthcare and Treatment of Patient P (involving Northumberland, Tyne and Wear NHS FT) and asked whether that report’s recommendations relating to communication between services was relevant to the Trust. The Director of Nursing and Clinical Standards said that the Trust was already looking at how to improve communications across interfaces through the Safer Care work programme.  Mike Bellamy noted the recent media reports on the Oxfordshire CCG’s budgetary position and asked whether this would impact on the Trust. The Board went on to discuss the development of outcome based commissioning and the review being undertaken by Sir Bruce Keogh; the Board agreed that the Trust should look to respond to the Keogh report by September and, where possible, consider what joint initiatives could be proposed. In addition, the Board agreed that thought needed to be given to how the Trust would prepare for the upcoming contract renewal with the CCG. The Board agreed that this was a major issue for the Trust over the coming year and that further times / opportunities to discuss options should be set aside.  **The Board noted the report.** | **JCH**  **MGH**  **MMcE**  **SB / MGH** |
| **BOD**  **90/13**  a  b  c  d  e  f  g | **Quality and Safety Report**  The Director of Nursing and Clinical Standards presented the report which provided an overview of incidents and safety themes, as well as the Trust’s position against CQC outcomes. She explained that she would continue to work on the structure of this report to ensure it provided the information required by the Board.  The Director of Nursing and Clinical Standards highlighted to the Board the detail on incidents, including those relating to AWOL and restraint / seclusion.  The Director of Nursing and Clinical Standards reported that the CQC had recently inspected the Oxford Clinic but the final report was not yet published.  Anne Grocock welcomed the actions being put in place to address pressure ulcers and the Director of Nursing and Clinical Standards said that the main focus was on improving holistic assessments; this required further thought on the workload for District Nurses which was currently being scoped. Alyson Coates set out her experience in other sectors which may transfer over to this setting and help improve the holistic approach to addressing pressure ulcers. The Director of Nursing and Clinical Standards welcomed the suggestion and said she would discuss this further with Alyson Coates out-of-session.  Mike Bellamy said the report did not provide clear action plans to address incidents of self-harm and medication errors and asked the future reports address this. The Director of Nursing and Clinical Standards said that the Safer Care work was addressing these issues and that future reports would include detail on this important initiative.  Mike Bellamy noted the report on restraint recently published by MIND. He noted how the Trust had for some time now been focusing on restraint and seclusion practices and asked how the Trust would respond to the MIND report. The Chief Executive said that the Trust should welcome the MIND report as it was highlighting an important issue; he added that the report was being reviewed alongside the work already taking place in the Trust and that further updates would be provided to Board / Integrated Governance Committee in due course.  **The Board noted the report.** | **RA**  **RA**  **SB / RA** |
| **BOD**  **91/13**  a  b  c  d | **Quality and Performance Report**  The Director of Finance presented the report which set out the Trust’s performance against a range of indicators including KPIs from Monitor and those related to CQUIN. He noted that there had been a breach on the Monitor target relating to CPA – 7-day follow-up (M8) but explained that this had been an in-month breach and that the overall position by the end of the quarter was on-track to be recorded as being met.  On *C.Diff*, noting the recent agreement reached with the CCG, the Director of Finance said that this target and how incidents were reported against it would need to be reviewed. In particular, the report may need to show incidents that were subject to validation and also incidents that had been validated (and therefore counted against the CQUIN target).  On the CQUIN section, the Director of Finance explained that this would be updated now that the CQUIN had been agreed with the CCG.  **The Board noted the report.** | **MMcE** |
| **BOD**  **92/13**  a  b  c  d | **Chief Operating Officer’s Report**  The Chief Operating Officer presented the report which provided an update on a range of operational matters.  The Chief Operating Officer noted the section on DTOC and set out the actions being taken to address such delays in Oxfordshire. As previously discussed at Board, the causes for delays and the actions needed to address them were multi-faceted. The Board welcomed the update on the DTOC position and continued to support the action being taken to address delays.  The Chief Operating Officer informed the Board that, as part of the re-modelling work, the older adult mental health services would move to come under the management of the Community Services Division from 1 July 2013.  **The Board noted the report.** |  |
| **BOD**  **93/13**  a  b  c  d  e  f  g | **Workforce Reports**  *The Deputy Director of Human Resources joined the meeting at this point.*  ***Workforce Performance Report***  On behalf of the Director of Finance, the Deputy Director of Human Resources presented the report which set out the key workforce performance indicators. She drew attention to the new exit process which was providing more data on why people chose to leave the Trust. Further analysis would be included in future reports. The initial data showed that the top three reasons why people chose to leave the Trust were:-   * Promotion * Relocation * Workload   The last of the reasons warranted further investigation.  The Director of Finance noted the target for Bank & Agency and said that this needed to be reviewed because budgets did not allow for such. The Chair agreed and said targets must be in line with budgets.  The Director of Finance noted the sickness absence level and said it was too high and work was required to address this; the policy was currently being reviewed and the process to manage short-term sickness would be reviewed. The Director of Nursing and Clinical Standards suggested that the report include both long-term and short-term data. Anne Grocock agreed and asked if it would be possible to also provide data showing the reasons behind Bank and Agency use; she asked if it was mostly due to sickness absence.  Lyn Williams asked what safeguards were in place to ensure where shifts were unfilled that there were safe staffing levels for the wards / services. The Director of Nursing and Clinical Standards and Chief Operating Officer said that the service re-modelling was addressing this point and provided an overview of how managers could access additional resource to ensure staffing levels were safe.  Lyn Williams asked for an overview on the pilot taking place on Cotswold House. The Deputy Director of Human Resources said that this related to the shift pattern pilot and she reported that it had showed that this approach to shifts worked well on this unit. Conversely, the Chief Operating Officer reported that the pilot in community health services showed that the pattern was not appropriate; the pilots showed that the Trust should not have one single pattern of shifts and that they must be based on care group requirements.  Mike Bellamy asked if the concerns with NHSP performance were being addressed and the Deputy Director of Human Resources confirmed that options were being looked at.  **The Board noted the report.**  *The Deputy Director of Human Resources left the meeting at this point.* | **MMcE / JH**  **MMcE / JH** |
| **BOD 94/13**  a  b  c  d | **Infection Prevention Control Annual Report**  The Director of Nursing and Clinical Standards presented the report which provided an overview of infection prevention and control work for 2012/13 and set out a proposed work-plan for 2013/14. The Board welcomed the report.  Lyn Williams said his main concern was about the Trust’s influenza vaccination programme; assurances were needed that a different approach, from previous years, would be adopted to lift the vaccination rate amongst staff. The Chief Executive agreed and suggested that the ‘nudge’ approach should be considered as a way to encouraging staff to receive the vaccination.  Anne Grocock asked how estate related problems identified by the infection control work stream were addressed. The Chief Operating Officer said that the Capital Programme Board approved a work-programme to address these concerns and agreed that the infection prevention and control work-plan for 2013/14 should be amended on page 15 to reflect this.  **The Board received the annual report and approved the 2013/14 work-plan, subject to addressing the point at item BOD 94/13 c.** | **RA** |
| **BOD 95/13**  a  b  c  d | **Carers Strategy**  The Chief Operating Officer presented the report which set out the proposed Carers Strategy for the Trust. She noted that the document set out the key principles and what was now required were action plans from each Division to address the desired outcomes.  Mike Bellamy welcomed the proposed strategy and suggested that section 3 include greater recognition of the role of mental health carers, and that section 4 should acknowledge that many carers felt isolated.  Mike Bellamy noted section 8 and said it set out some extremely ambitious outcomes, some of which were outside of the scope of the Trust to influence alone. The Chief Operating Officer agreed and said that the Divisional action plans would need to address these points.  **The Board noted the report and supported the general direction of the Strategy. The Board asked that the action plans be developed and the Strategy should be amended to take account of the points above and that the Integrated Governance Committee be asked to approve the version with the action plans.** | **YT** |
| **BOD 96/13**  a  b  c  d | **Name for New Hospital in Aylesbury**  The Director of Nursing and Clinical Standards provided an oral update on the process to name the new mental health hospital in Aylesbury. She explained that ideas and suggested had been sought from stakeholders and members of the public and that 71 responses were received. Out of the responses the two most popular suggestions were:-   * Buckinghamshire Hospital / Health Centre * Manor House   The former was rejected because, alone, it was too similar to existing facilities / organisations and the second was rejected because the Executive had agreed that the new building should have a new name to reflect the new direction; it was noted that for many people the ‘Manor House’ name had negative connotations.  The Executive had reviewed all the other suggestions and had agreed that the proposed ‘Whiteleaf Centre’ was a good choice; it reflected the history of the county and was a name that did not have connotations with other buildings / concepts. Further it was agreed that the whole site would be referred to as the ‘Buckinghamshire Health and Wellbeing Campus’. The Director of Nursing and Clinical Standards said subject to Board support and satisfactory due diligence this name would be adopted.  Lyn Williams asked whether Buckinghamshire Healthcare NHS Trust would have a problem with the full name and the Director of Nursing and Clinical Standards said that it was unlikely that they would have concerns given the name of the building would be ‘Whiteleaf Centre’. The Chief Executive said that the Buckinghamshire Healthcare NHS Trust should be afforded the opportunity to comment.  **The Board supported adopting the name: ‘Whiteleaf Centre, Buckinghamshire Health & Wellbeing Campus’ for the new building and site in Aylesbury, subject to satisfactory due diligence.** | **RA** |
| **BOD 97/13**  a | **Finance Report**  The Director of Finance presented the report which set out the Trust’s financial position for the year-to-date and the forecast year-end position. He noted that the Trust was presently operating behind plan and action was being taken to address this. Current forecasts were for performance to improve by the end of the Quarter which would see the Trust have an FRR of 3 for Q1. |  |
| **BOD 98/13**  a  b  c | **Minutes from Committees**  ***Integrated Governance Committee – 8 May 2013***  The Chair presented the draft Minutes of the Committee for information.  ***Finance and Investment Committee – 13 May 2013***  Lyn Williams presented the draft Minutes of the Committee for information.  ***Charitable Funds Committee – 29 May 2013***  Anne Grocock presented the draft Minutes of the Committee for information. She drew particular attention to he tender process for the Charity’s administration which was underway. |  |
| **BOD 99/13**  a | **Any Other Business**  None. |  |
|  | The meeting was closed at 12.30  **Date of next meeting:**  **31 July 2013** |  |