

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

**Board of Directors**

Minutes of a meeting held on

Wednesday, 24 October 2014 at 09:00

in the Boardroom, Chancellor Court, Corporate Services, Oxford

**Present:**

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| Martin Howell | Chair of Trust  |
| Stuart Bell | Chief Executive |
| Jonathan Asbridge | Non-Executive Director |
| Mike Bellamy | Non-Executive Director |
| Alyson Coates | Non-Executive Director  |
| Sue Dopson | Non-Executive Director *– part meeting* |
| Anne Grocock | Non-Executive Director  |
| Mike McEnaney  | Director of Finance |
| Clive Meux | Medical Director |
| Cedric Scroggs | Non-Executive Director |
| Yvonne Taylor | Chief Operating Officer  |
| Lyn Williams | Non-Executive Director |
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| **In attendance:** |
| John Allison | Associate Non-Executive Director |
| Mike Foster  | Deputy Director of Nursing |
| Justinian Habner | Trust Secretary (Minutes)  |

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| **BOD****134/14**ab | **Welcome and Apologies for Absence**The Chair welcomed Governors and members of the public who had attended to observe the meeting. He also welcomed Sir John Alison who was attending his first Board meeting in the capacity as an Associate Non-Executive Director. The Chair reminded the Board that this role was a non-voting position on the Board and would serve as an induction for Sir John before he took on the formal Non-Executive Director role on 1 April 2015.Apologies received from Ros Alstead, Director of Nursing and Clinical Standards (Mike Foster, Deputy Director of Nursing was attending in her absence). |  |
| **BOD 135/14**a | **Declarations of Interest**The Board confirmed that interests listed in the Register of Directors’ Interests remained correct. |  |
| **BOD 136/14**abcdefghijk | **Minutes of the Meeting held on 24 2014**The Minutes of the meeting were approved as a true and accurate record, subject to the amendment of typographical errors.***Matters Arising*** **BOD 119/14 (c)** – **Staff Survey and Staff Friends and Family Test** – the Director of Finance said survey results and corresponding action plans were included in the Workforce Report.**BOD 119/14 (d)** – **Executive and Non-Executive Visit Report** – the Chair said that the updated paper on visits had yet to be circulated. He asked that this be sent to all Board members when the Director of Nursing and Clinical Standards returned from leave.**BOD 119/14 (e)** – **NHS Constitution Compliance Report** – the Trust Secretary said he would discuss with the Director of Nursing and Clinical Standards, when she returned from leave, who should take responsibility for this report in the future and, therefore, manage presentation to the Integrated Governance Committee.**BOD 124/14 (c)** – **SIRIs** – the Deputy Director of Nursing explained that the Risk team were taking forward the suggestion on referencing themes in SIRIs (which would then support existing action plans); this process was already in place for pressure ulcer incidents.**BOD 125/14 (b)** & **(c)** – **Inpatient Safe Staffing** – the Deputy Director of Nursing said that the report had been updated to take account of the comments made by Directors.**BOD 127/14 (b)** & **(c)** – **Equality Objectives** – the Board noted that updates on the actions relating to the report were required (including reference to LD in the objectives, ensuring the report focuses on all counties and provide clarity on the approach being taken with regards Objective 10).**BOD 129/14 (b)** – **Finance Report** – the Director of Finance said that, from November 2014 onwards, the Finance Reports presented in the meeting held in public would be amended to provided more detail on how the Trust was addressing the financial concerns.**BOD 131/14 (b)** – **Occupation Health / Staff Support Service** – the Director of Finance explained that the Trust’s Occupation Health function was being reviewed and the staff support service concept would be included as part of the review.The Chief Operating Officer provided an update on the progress made with the Oxfordshire Clinical Commissioning Group (OCCG) in relating to the District Nursing service. Agreement had now been reached on some stand-alone activities that the service should not undertake; these included phlebotomy and influenza vaccinations. The Trust had now provided suggested costings for these activities to be provided by the service in the interim pending OCCG’s decision on how to provide these services in the future. The Trust was waiting to hear whether the cost proposals would be accepted. Agreement on the definition of ‘house-bound’ had also been reached. The Board welcomed the progress being made but noted that there was more to do in relation to this service; the Board also noted that the OCCG may decide to undertake a tender exercise in relation to the stand-alone activities identified but the Trust would continue to provide these on an interim basis subject to agreements around costs.The Chief Operating Officer also provided an update on OCCG’s decision to fund the Oxfordshire Complex Needs Service at £500k which was less than the Department of Health funding but sufficient to enable the Trust to provide a viable service. The Board welcomed this news. | **RA****RA / JCH****RA****MMcE** |
| **BOD 137/14**abcde | **Chief Executive’s Report**The Chief Executive presented his written report which outlined recent national and local issues. He noted the NHS England’s publication on the day before the Board of the NHS Five Year Forward View which sets out a vision for the future of the NHS. The Chief Executive said that he welcomed this publication and added that its main elements seemed to be consistent with the Trust’s existing strategy.On the national mental health access targets, the Chief Executive said it was not clear how these would work and how activity would be funded; the Trust would need to work with CCGs on this. Mike Bellamy said that the Trust should start to record and report how its services appeared to be performing against the targets.The Chief Executive provided overviews of recent executive-to-executive meetings with other providers including South Central Ambulance and Southern Health. He explained that these had explored possibilities of working together on certain areas and the Board would be updated if these were developed further. The Chief Executive also noted that there had been discussions around the provision of learning disability services in Oxfordshire; he said that the Trust would not take on the provision of the current anachronistic service model however if a contemporary service model was proposed by commissioners then the Trust would look further at the opportunity. The Board discussed this and, in particular, noted the due diligence processes that would need to be undertaken as part of any decision to provide these services. The Board agreed to co-operate with commissioners and partners on the development of proposals around LD services in Oxfordshire.**The Board noted the report.** | **MMcE** |
| **BOD 138/14**abcd | **Chief Operating Officer’s Report**The Chief Operating Officer presented the report which provided an update on a range of operational matters. The Board noted the progress being made on the outcomes based contract for adult mental health services in Oxfordshire and discussed how the ‘outcomes’ would be developed and agreed. The Board agreed that the outcomes needed to be focused on what patients wanted and not what was right for the contract.The Board also noted the section on community hospitals performance and the briefing that had been provided to the Health Overview and Scrutiny Committee in September 2014. It was agreed that future Board-level discussions on the strategy for community hospitals would be required at appropriate junctures.**The Board noted the report.** |  |
| **BOD 139/14**abcdef | **Quality and Safety Report – Quarterly Clinical Effectiveness**The Medical Director presented the report which provided an update on a range of quality and safety matters, with a particular focus on clinical effectiveness. He explained to Board that, in the future, he would take responsibility for this quarterly report and, accordingly, the report format would change over time.In terms of the current report, the Medical Director said that the results reported showed a mixed position with a number of areas identified as requiring further improvement. He explained how action was being taken with directorates to ensure performance improved; the quarterly directorate performance reviews were being used as an opportunity to look into areas of concern (such as CPA results).Alyson Coates asked why two wards were not involved in the inpatient standards of care audit and the Medical Director said he was not aware of the reason and would look into it.Alyson Coates suggested that the action plans also be graded in terms of importance so that the Board could focus on areas of priority and the Medical Director agreed to implement this suggestion.The Board discussed in detail how to reduce the burden of unnecessary bureaucracy on staff associated with data collection and reporting. It was agreed that ‘bottom-up’ suggestions from staff should be sought and implemented and that the Board should also recognise that it may need to change how it requested information if staff showed that this was creating problems.**The Board noted the report.** | **CM****CM** |
| **BOD 140/14**abcdef | **Inpatient Safe Staffing**The Deputy Director of Nursing presented the report which set out actual nurse staffing levels on each ward against expected levels for the month of September 2014. The report also included the six month staffing establishment report. He provided an overview of the areas of risk identified in the report and also explained the action being taken to mitigate these. The Chief Operating Officer said that the six month establishment report did not show the day-to-day action which took place to address areas of concern and she added that she was not convinced the risk ratings for wards were accurate as they did not take account of mitigations and other factors. The Director of Finance agreed and suggested that the report should be amended in the future to explain how the risk areas were identified, that the rating was gross and also set out the action being taken to address areas of concern.Jonathan Asbridge said that the report should take account of whether any Board-level decisions had adversely impacted on staffing levels, and patient experience and safety. He suggested including a patient safety impact assessment in this and other similar reports.Lyn Williams asked whether there was an issue with the data presented as the vacancy figures did not readily correspond to the recruitment data. The Director of Finance agreed to investigate how this was reported.Mike Bellamy asked why the graphs were being presented to Board if, as reported by the Deputy Director of Nursing, no one thought they provided meaningful information. The Deputy Director of Nursing said that these graphs were required under the national guidance; the Board went on to discuss what was required by guidance to be published and what actually needed to be presented to Board. It was agreed that thought should be given to whether this report could be amended to provide only the most appropriate information to Board and that other means to publish data and information be explored where necessary.**The Board noted the report.** | **RA****RA****MMcE****RA** |
| **BOD 141/14**abc | **Safeguarding Children and Adults Annual Reports 2013/14**The Deputy Director of Nursing presented the annual reports setting out the arrangements in place to safeguard and promote the welfare of children and vulnerable adults.Anne Grocock said that the report implied that there were gaps in training and the Deputy Director of Nursing said he would look into these and would ensure Board was updated if there were concerns.**The Board noted the report.** | **RA** |
| **BOD 142/14**ab | **New Arrangements: Discussion on Strategic Items**The Medical Director presented the report which set out proposals on how strategic items would be considered by Board. **The Board approved the report.** |  |
| **BOD 143/14**abcd | **Trust OD Strategy** The Chief Executive presented the report which summarised the existing organisational and leadership development activities across the Trust and proposed a model as a framework for co-ordinating and aligning future development. In presenting the report the Chief Executive proposed that an annual seminar be held for the Board to review progress against the framework.Sue Dopson welcomed the framework and said the next step was to articulate the implementation and then evaluation of the framework. The Chief Executive agreed and said that this was the next step.The Board went on to discuss the framework and considered what its role was in ensuring alignment of leadership and identifying and linking leaders across the Trust. The Board discussed how to engage leaders in the wider discussions and strategic developments and queried whether the Clinical Advisory Board could assist in this function. The Board agreed that the proposed seminar should take place in early 2015 to facilitate a discussion around aligning activities.**The Board approved the report and the Organisational and Leadership Development Strategy Framework.** | **SB** |
| **BOD 144/14**abc | **Finance Report**The Director of Finance presented the report which set out the Trust’s financial position month 6 and a fore-cast year-end position. He outlined the main challenges which were behind the overall adverse position against plan. Currently, the Trust had a COSR of 2 but had plans to ensure the rating was back to 3 by year-end. The Director of Finance also explained how a new forecast year-end deficit figure had been arrived at and the plans being put in place to ensure that this was met.Alyson Coates said that as the £4.2m deficit forecast was new and different from what had been previously published, she suggested making this clearer in the report to be published.**The Board noted the report.**  | **MMcE** |
| **BOD 145/14**ab | **Performance Report**The Director of Finance presented the report which set out the Trust’s performance against a range of indicators including key performance indicators from Monitor and those related to Commissioning for Quality and Innovation payments. **The Board noted the report.** |  |
| **BOD 146/14**abcdef | **Workforce Performance Report**The Director of Finance presented the report which set out performance against a range of workforce indicators. In terms of staff recruitment, he explained that a task-force was being convened to resolve the problems of staffing level, especially in the Older Peoples directorate. He also outlined how a range of initiatives were being pursued to address turnover and increase recruitment to vacant posts (including values-based recruitment and amending HR processes to ensure more timely outcomes).Alyson Coates asked whether, given the challenges faced by the Trust, the Board could receive detail on pay costs and staff numbers against plan (both FTE and Bank & Agency). The Director of Finance said that this detail would be included but suggested reflecting it in the finance report.Alyson Coates also noted that the report implied on the front cover that there were unsafe staffing levels; the safe staffing report did not indicate that there was this problem so the working of the Workforce Report should be amended before publication.*Sue Dopson left the meeting at this point.*Anne Grocock said she was concerned that the report indicated that staff were finding jobs very stressful and, consequentially, leaving. The Director of Finance said that the baseline position was difficult particularly taking account of the wider factors including public sector pay and living costs in the areas covered by the Trust. Accordingly, more needed to be done to mitigate these difficulties. The Chief Executive also asked that further analysis take place on who was leaving and why.Lyn Williams asked for an explanation on the agency staff data and the Director of Finance explained that the demand for agency was higher than any previous occasions and the new agency framework was not yet fully implemented. As the framework came online he expected the issues with agency staff to be resolved.**The Board noted the report.** | **MMcE****MMcE** |
| **BOD 147/14**abcd | **Business Plan 2014/15 – Q2 Report**The Director of Finance presented the report which set out performance against the Trust’s business plan at Q2.The Chair said that the report showed quite a number of areas were delayed yet did not explain the consequences of such. The Director of Finance agreed and said what was reported needed to be reviewed alongside considering what areas were no longer priorities and, therefore, should not be pursued at this point in time. The Board discussed the plan and noted that, perhaps, some of the original intentions were not realistic and did not take account of the likely impact of external factors. It was agreed that the Board needed to focus its attention on critical areas such as CIP delivery.Cedric Scroggs said that given the re-forecast year-end position, careful thought should be given to how the plan was constructed for 2015/16 with financial recovery at the centre of the plan.**The Board noted the report.** | **MMcE** |
| **BOD 148/14**abc | **Board Assurance Framework (BAF) – Q2 Report**The Trust Secretary presented the report which set out the position of the BAF at Q2. The Board discussed how risks were recorded on a long-term basis and queried when a risk was no longer a risk but had become an issue. Accordingly, the Board agreed that the risk associated with CIP delivery should be reworded.**The Board noted the report and asked that the Integrated Governance Committee consider the three areas set out in the report as requiring a decision.** | **JCH****JCH / MGH** |
| **BOD 149/14**abc | **In-year Submission to Monitor – Q2 2014/15 Report**The Trust Secretary presented the report which set out the reporting requirements to Monitor and the proposed Q2 submission. He noted that other reports presented to Board, including the finance report and performance report, had provided the data to support the submission proposed.In terms of the COSR rating, the Trust Secretary explained that the Monitor Q2 cover report had been written before the Finance Report. Given that the latter report was suggesting a COSR of 2 at Q2 thought would need to be given on how this was reported in the return to Monitor; the Trust Secretary suggested that a COSR of 2 should be reported (meaning the first required statement was ‘not confirmed’) and action being taken to address the position be recorded. The Director of Finance said he would seek confirmation from Monitor on what to report and how and he and the Trust Secretary would update the Board accordingly. The Board agreed that emergency powers may be used should a new decision on the submission be required pending the outcome of the discussion with Monitor. **The Board approved the report (subject to the points set out above).** | **MMcE / JCH** |
| **BOD 150/14**a | **Whistle-blowing Policy****The Board received and approved the report (and in so doing the revised policy).** |  |
| **BOD 151/14**a | **Corporate Registers: Trust Seal****The Board received and noted the report.** |  |
| **BOD 152/14**ab | **Trust Constitution – Model Rules of Election**The Trust Secretary presented the report which proposed the Board approve changes to the Trust Constitution and, specifically, the incorporation of the new Model Rules of Election in place of the existing rules.**The Board approved the report and noted that the proposed amendments would be presented to the Council of Governors for final approval.** | **JCH** |
| **BOD 153/14**abcd | **Minutes from Committees*****Finance and Investment Committee – 8 September 2014***Lyn Williams presented the draft Minutes of the meeting and noted the main items considered at the meeting.***Integrated Governance Committee – 10 September 2014***The Chair presented the draft Minutes of the meeting and noted the main items considered at the meeting.***Audit Committee – 18 September 2014***Alyson Coates presented the draft Minutes of the meeting and noted the main items considered at the meeting.***Charitable Funds Committee – 1 October 2014***Anne Grocock provided an oral update on the main items considered at the meeting including, new charity web-pages, approval for funding the Oxfordshire Lions Message in a Bottle Scheme, charity change of name and considering funding for artwork at Whiteleaf. |  |
| **BOD 154/14**abcd | **Governance Framework – Quality Committee Terms of Reference**The Trust Secretary presented the report which proposed the new Quality Committee Terms of Reference for Board approval and sought comments on the proposed Quality sub-committee terms of reference. In presenting the report he reminded the Board of the previous discussions at Board seminars on the proposed changes.The Board requested the following amendments to the Quality Committee Terms of Reference:-* Include the provision for Non-Executive Director members to nominate deputies.
* Ensure escalation reports and not minutes from the sub-committees are presented to the Quality Committee.

On the Sub-committee Terms of Reference, the Board noted the proposed membership and agreed that, as with the current arrangements, any Director would be welcome to attend any Committee / Sub-committee meeting at any time in a non-voting capacity.**Subject to the above, the Board approved the report and in so doing the abolition of the Integrated Governance Committee. The new Quality Committee would commence meeting from 1 January 2015 and the next Integrated Governance Committee would discuss the transition arrangements.** | **JCH** |
| **BOD 155/14**a | **Oxford Health Charity – Committee Terms of Reference****The Board received and approved the report (and in so doing approved the minor amendments to the Terms of Reference and the Committee’s name to reflect the Charity’s new name).** |  |
| **BOD 156/14**a | **Finance & Investment Committee Annual Report 2013/14****The Board received and approved the Committee’s annual report (and in so doing approved the minor amendments to the Terms of Reference).** |  |
| **BOD 157/14**abc | **Any Other Business*****Consultant Appointment***The Medical Director explained that an Advisory Appointment Committee, Chaired by Cedric Scroggs, Non-Executive Director, and attended by Mark Hancock, Deputy Medical Director, convened on 20 October 2014 and offered the post of Consultant Psychiatrist in General Adult Psychiatry (Banbury) (full time) to Dr Jakov Zlodre and the post of Consultant Psychiatrist in General Adult Psychiatry (Aylesbury) (0.8 WTE) to Dr Joseph Miles, subject to Board agreement and relevant pre-employment checks.**The Board approved these appointments.*****Questions from Governors, Members and Others Attending***The Chair invited questions and comments from those attending and one Governor outlined his upcoming meeting with an MP; he would update the Chief Executive in due course. |  |
|  | The meeting was closed at 12.50**Date of next meeting:** **26 November 2014** |  |