

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

**Board of Directors**

Minutes of a meeting held on

Wednesday, 28 May 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 |
| 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 |
| Cedric Scroggs | Non-Executive Director |
| Yvonne Taylor | Chief Operating Officer  |
| Lyn Williams  | Non-Executive Director  |
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| **In attendance:** |
| Justinian Habner | Trust Secretary (Minutes)  |

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| **BOD****65/14**ab | **Welcome and Apologies for Absence**The Chair welcomed members of the public who had attended to observe the meeting.Nil apologies. |  |
| **BOD 66/14**a | **Declarations of Interest**The Board confirmed that interests listed in the Register of Directors’ Interests remained correct. |  |
| **BOD 67/14**abcd | **Minutes of the Meeting held on 30 April 2014**The Minutes of the meeting were approved as a true and accurate record, subject to the amendment of typographical errors on pages 3, 5, 6, 7, 8 & 9.***Matters Arising*** **BOD 49/14 (b)** – **Service Re-modelling** – the Chief Operating Officer said that an updated service structure chart had now been circulated to Directors out of session. The Chair welcomed the charts but asked if an overview of what each Service Directorate covered could be developed in due course.**BOD 49/14 (c)** – **Service Change Consultations** – the Chief Operating Officer said an update on the Oxfordshire older peoples service consultation would be provided to Board in the June 2014 Chief Operating Officer’s Report.**BOD 53/14 (f)** – **Information to Board** – the Chair welcomed the inclusion of Executive Summary’s in some reports to the Board but noted more work was required to ensure appropriate summary’s were produced and relevant information provided. He encouraged Executive Directors to revisit the Trust Secretary’s earlier advice on Executive Summary’s. He added that the Summary’s needed to, where appropriate, set out what the Executive’s view on an issue was and what was proposed to be done to address it. | **YT****YT****All** |
| **BOD 68/14**abcdefghijklmn | **Year-End Reports**The year-end reports were presented to the Board for approval. The Chair of the Audit Committee, Alyson Coates, confirmed that the Committee had reviewed each document and had resolved to recommend that Board approve each. ***Financial Statements & Accounts 2013/14***The Director of Finance presented the report which set out the 2013/14 Financial Statements & Accounts. He explained that the current version had been reviewed in detail by the Audit Committee and had been agreed with the Trust auditors. The Board was informed that the audit had now been completed and the Audit Committee had reviewed the auditor’s report. The Board also noted the proposed Letter of Representation text which had been drafted by the auditors and reviewed by the Audit Committee.**The Board approved the Financial Statements & Accounts 2013/14, including the FTC returns, and approved the Letter of Representation to be sent to the Trust Auditors.** ***Quality Report 2013/14 & Quality Account 2014/15***The Director of Nursing and Clinical Standards presented the report which set out the quality account and report which had been developed in line with the national guidance. In presenting the report, she noted that the Audit Committee had reviewed these and also noted the detailed review that had been undertaken by the Council of Governors Quality Sub-committee. She also explained the auditors had reviewed the account and report in detail.The Board noted the statements from stakeholders and the Director of Nursing and Clinical Standards explained that Oxfordshire CCG had suggested that the pressures experienced by the Oxfordshire District Nursing service should be referenced more in the document. She said that she planned to review the document and include more references if appropriate.The Director of Nursing and Clinical Standards also said that Oxfordshire CCG had said that the document was too focussed on mental health inpatient wards. She said that those who had worked on the document had taken a different view and felt there was greater balance (than previous years) to the range of services provided. Alyson Coates concurred and said that the auditors had said that they thought community health services did have greater prominence in the document.The Board discussed the length of the document and noted that it remained long yet it had been written in a user friendly way; the patient stories were especially welcomed. The Board also noted that this document would form part of the Annual Report and attempts had been made to reduce the length of the latter and minimise duplication of information to ensure the two fitted together. As requested, the Annual Report had been written to meet statutory / regulatory requirements so the longer Quality Account & Report would provide more detail and a great patient focus to it.Mike Bellamy asked for thought to be given on how the safe medicines management component in the reduction in harm would be measured and reported on during the year ahead.Mike Bellamy asked whether it would be possible for the document to track particular patient stories through a range a pathways to show how the re-modelling was having a positive impact on patient experiences. The Chief Executive said this was a good suggestion and added that he would like to see each pathway updating Board on an annual basis on its performance and experience.**The Board approved the Quality Report 2013/14 & Quality Account 2014/15, subject to addressing the points outlined earlier in the meeting.*****Trust Annual Report 2013/14***The Trust Secretary presented the report which set out the text for the Trust’s Annual Report 2013/14. He explained that the report had been reviewed by both the Audit Committee and auditors, and that it had been written in line with the statutory and regulatory requirements. In presenting the report, the Trust Secretary tabled an updated Foreword as well as updated to sections that had been made to the draft at the suggestion of the auditors. He also said that the development of the Littlemore Cafe would be included as an additional item under the Forensic and Specialised Services Division achievements.The Board identified a small number of typographical changes to be made.**Subject to the amendment of the typographical changes, the Board approved the Trust Annual Report 2013/14.****In making the approvals for the year-end reports, the Board thanked all those involved for their hard work in completing the year-end process; including the Audit Committee, auditors, finance team and clinical governance team.** | **RA****RA****JCH** |
| **BOD 69/14**abcdef | **Chief Executive’s Report**The Chief Executive presented his written report which outlined recent national and local issues. The Board discussed the proposed framework on well-led NHS organisations alongside the external governance review requirements, taking account of the experience gained by the Chief Executive through chairing a recent CQC review as well as the Trust Secretary’s feedback on the outcomes of the three external governance review pilots. Building on the discussion, Mike Bellamy asked for an update on how the Trust’s Organisational Development Strategy was being articulated and implemented. The Chief Executive explained that supporting and developing leaders across the Trust alongside the focus on enhancing team working were central to the strategy. The Board agreed that finding ways to identify and support leaders was important and acknowledged that the entire Executive team had responsibility for developing the Organisational Development Strategy. The Chief Executive agreed that having the Strategy more clearly articulated and written down would help ensure engagement in and ownership of the Strategy; he undertook to oversee this development.The Chief Executive updated the Board on the discussions taking place with Oxfordshire CCG on the proposed mental health and community health contracts. He explained that heads of agreement had been signed and that agreement had been reached on managing two issues that had emerged during the negotiations. On the Oxfordshire District Nursing Service, it was agreed that, given the increasing activity experienced by this service, a joint review would take place in order to remove unnecessary activity. This would be completed by October 2014 and would help bring the activity of this service in line with the contract. On the Complex Needs Service, given the change in funding arrangements, the Trust had agreed to propose a service model to Oxfordshire CCG that could be funded in line with the commissioner’s intentions. The model would also look at how the Oxfordshire service could link with the Buckinghamshire service to make best use of the resources being made available to the Trust.**The Board noted the report.** | **SB** |
| **BOD 70/14**abcdefg | **Chief Operating Officer’s Report**The Chief Operating Officer presented the report which provided an update on a range of operational matters and set out the proposed revised Oxfordshire Patient Choice, Equity and Fair Access Policy which all partners had been asked to consider and approve. She explained that the policy had been reviewed following the comments made by the Board in March 2014 and those of other partners.***Choice Policy*** The Chief Operating Officer reminded the Board that the revised policy was designed to reduce delays in the transfer and discharge of patients across Oxfordshire. She drew attention to the change in language, particularly in the letters, and the Board welcomed this and agreed that these acknowledged the impact on families and carers of the implementation of the policy.Anne Grocock said that there seemed to be some confusion within the policy about the ‘Senior Nurse’ / ‘Named Nurse’ role and the Chief Operating Officer agreed to review this.**The Board approved the Oxfordshire Patient Choice, Equity and Fair Access Policy subject to the point on ‘Senior Nurse’ / ‘Named Nurse’ being clarified.**The Board noted the update on the Trust’s and Thames Valley Police ‘Street Triage Project’. The success of the pilot was noted and the Board agreed that thought needed to be given to how to sustain the project after the pilot; the Chief Operating Officer said that she would raise this with the Joint Management Group.The Board noted the update on Child and Adolescent Mental Health Services (CAMHS) and discussed how the increase in referrals to the service had come about and how the Trust, and partners, could respond to manage this. It was agreed that evidence needed to be provided to commissioners on the growing demand for CAMHS alongside showing the importance of investing in the health of young people to address emerging problems early. The Board also considered how the new School Health Nursing service in Oxfordshire could also help in intervening early. The Board agreed that further updates on the increase in CAMHS referrals and the School Health Nursing service should be provided in the future.**The Board noted the report.** | **YT****YT****YT** |
| **BOD 71/14**abcdefg | **Quality and Safety Report**The Director of Nursing and Clinical Standards presented the report which provided an update on a range of quality and safety matters. She drew attention to the update on the project on Physical Interventions and explained that potential new training packages were now being tested. The Board would be informed when a decision was made on the package the Trust would use.Alyson Coates noted the section on training levels and said she would prefer to see a greater focus on the gap between the target and the actual performance, with detail on how the gap would be closed. The Chief Executive said he was concerned about setting 100 per cent targets and said they were not realistic; he said the focus needed to be on addressing problem areas that had high levels of risk. The Board discussed how this information was presented and agreed that greater clarity was required and recognised that the information that the Executive may need to manage staff training may be different to the information needed by Board.Anne Grocock said that the categorisation of incidents in the report was not clear and asked that descriptions be included in future.Anne Grocock noted the reduction in the number of restraints in the Highfield Unit Oxford and asked if it was due to the impact of the new building and associated improved environment on patient care and whether there were lessons to be learnt for other areas. The Director of Nursing and Clinical Standards said that this was being investigated.Lyn Williams asked why the number of seclusions had increased and the Director of Nursing and Clinical Standards said that this appeared to be due to individual patient issues; there was no underlying trend to be drawn.Lyn Williams noted the number of actions from SIRIs that were out of date / not completed and asked if the Executive were addressing these. The Director of Nursing and Clinical Standards confirmed that this was being picked up in the Service Directorate performance reviews.**The Board noted the report.**  | **RA** |
| **BOD 72/14**abc | **Workforce Performance Report**The Director of Finance presented the report which set out the key workforce performance indicators. The Chief Executive noted the information relating to ‘recruitment fairs’ and asked whether the Trust had a clear view on what the desirable outcome would be in attending such fairs. The Director of Finance agreed to consider this with the Recruitment team and report back.**The Board noted the report.** | **MMcE** |
| **BOD 73/14**a | **Strategy Section**The Chair noted that the strategy section on the Trust’s agenda when it met in public had not had any items recently. The Chief Executive concurred but noted the recent focus on the Trust’s clinical innovations were strategic; nevertheless, he agreed that more thought was needed on how to ensure the Board devoted sufficient time to strategic discussions. |  |
| **BOD 74/14**ab | **Finance Report**The Director of Finance presented the report which set out the Trust’s financial position at year-end. The shortfall in delivery of CIPs was noted.**The Board noted the report.**  |  |
| **BOD 75/14**abcde | **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 Director of Nursing and Clinical Standards noted the emergency re-admissions indicator and said that she would like to understand why the number of re-admissions were higher than the target in the month reported; undertaking a review was required.The Board noted the crisis contingency plan indicator and the suggestion that this was not measured in the previous year. The Director of Finance said he would look into this.Mike Bellamy asked what amount of income was at risk through CQIN’s; the Chief Operating Officer and Director of Finance explained that CQIN plans were still be developed and being agreed with commissioners.**The Board noted the report.** | **RA / MMcE / CM****MMcE** |
| **BOD 76/14**a | **Emergency Planning and Business Continuity Annual Report****The Board received and noted the annual report.** |  |
| **BOD 77/14**abcde | **Minutes from Committees*****Audit Committee – 22 April 2014***Alyson Coates presented the draft Minutes of the meeting; she noted that an oral update had been provided at the last meeting.***Finance and Investment Committee – 12 May 2014***Lyn Williams presented the draft Minutes of the meeting. He drew attention to the Committee’s consideration of the national reference costs which showed that the Trust was 12 per cent more efficient than the average. The Board discussed this and noted that the difficulties in achieving CIP targets should be seen against the backdrop of the level of efficiency already achieved in the Trust. Alyson Coates noted the delay in land sales in Aylesbury and asked what the impact would be on the capital programme. Lyn Williams said that the Capital Programme Board was now reviewing this; the Chief Executive added that the capital programme would need to be kept under close scrutiny over the coming years.***Integrated Governance Committee – 14 May2014***The Chair provided an oral update on the most recent Committee meeting.***Audit Committee – 22 May2014***Alyson Coates provided an oral update on the most recent Committee meeting. |  |
| **BOD 78/14**ab | **Any Other Business*****Visits***The Chair explained that he had held a meeting with Jill Bailey and discussed how Non-Executive Director visits to Trust sites could be best co-ordinated; further information would be provided to directors in due course.***Feedback / Questions***The Chair invited those present who had observed the meeting for any feedback or questions. There were no comments or questions.  |  |
|  | The meeting was closed at 1145**Date of next meeting:** **25 June 2014** |  |