

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

**Board of Directors**

Minutes of a meeting held on

Wednesday, 25 March 2015 at 09:00

in the Boardroom, Chancellor Court, Corporate Services, Oxford

**Present:**

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| Martin Howell | Chair of Trust |
| Jonathan Asbridge | Non-Executive Director |
| 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:** | |
| John Allison | Associate Non-Executive Director |
| Justinian Habner | Trust Secretary (Minutes) |
| Catriona Canning | Clinical Project Manager *– part meeting* |

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| **BOD**  **41/15**  a  b | **Welcome and Apologies for Absence**  The Chair welcomed Governors and members of the public who had attended to observe the meeting.  Apologies received from Stuart Bell, Chief Executive. |  |
| **BOD 42/15**  a  b  c | **Patient Experience – Patient Stories from the Adult Directorate**  The Director of Nursing and Clinical Standards introduced Catriona Canning who presented two patient stories providing experiences of the community and inpatient mental health services in Buckinghamshire.  The Board welcomed the stories and discussed how patients were discharged from mental health inpatient wards and the availability of dedicated specialist support packages for certain patients post discharge.  The Board also discussed how these stories were routinely collated and supported the sharing of these amongst the directorate to support learning.  *Catriona Canning left the meeting at this point.* |  |
| **BOD 43/15**  a | **Declarations of Interest**  The Board confirmed that interests listed in the Register of Directors’ Interests remained correct. |  |
| **BOD 44/15**  a  b  c  d  e  f  g  h  i  j  k  l | **Minutes of the Meeting held on 25 February 2015**  The Minutes of the meeting were approved as a true and accurate record, subject to the amendment of typographical errors.  ***Matters Arising***  **BOD 24/15 (b)** – **Finance Report** – the Director of Finance said he had now included further detail in the report presented to the meeting held in public including showing the trend against the recovery plan.  **BOD 25/15 (e)** – **Freedom to Speak Up** – the Trust Secretary reported that the Well-led Quality Sub-committee had considered this report; work, taking place out-of-session, was being led by the HR directorate to rank the Trust against each of the key principles and identify the gaps.  **BOD 26/15 (d)** – **Mental Health Services in Schools** – Mike Bellamy also suggested that thought be given to what services the Trust could offer to colleges and universities (in addition to schools). Jonathan Asbridge agreed and said the Trust should consider approaching the college nurses association and the Director of Nursing and Clinical Standards agreed to do this. The Medical Director, Chief Operating Officer and Director of Nursing and Clinical Standards went on to explain to the Board what was already offered to these institutions and agreed that it was important that the pathways into Trust services were made clear to professionals working in education.  **BOD 28/15 (b)** – **Inpatient Safe Staffing Report** – the Director of Nursing and Clinical Standards said that the national requirements were only for nursing staff levels to be reported on. Nevertheless, the Trust was free to report on other staffing levels if it would be of benefit and this option was kept under review.  **BOD 28/15 (d)** – **Productive Work** – the Director of Nursing and Clinical Standards said an update on the productive work would be presented to Board in June 2015.  **BOD 30/15 (a)** – **Executive and Non-Executive Visits** – the Chair said he would like to discuss visits and how they were going at the Board seminar in April.  **BOD 32/15 (c)** – **Limited Assurance Internal Audit Report** – the Chair noted that an updated response to the report had not been presented to the Board and Alyson Coates, as chair of the Audit Committee, added that the auditors would want to see how the Board was engaging with this report. The Director of Finance went on to explain that, following the release of the Internal Audit report, the Trust had reinstated the CIP ‘lead meetings’ to help deliver to the final plans for FY15. He added that, in his view, action had been taken to maximise the value of the current year’s CIP projects. The FY16 CIP plans would be determined by the response to the report on CIPs that had been produced by Deloitte. The Executive was now reflecting on the Deloitte report and its recommendations and reviewing what action could be taken; he expected the response to the Deloitte report to be finalised in the coming weeks.  The Chair said that the Board would require a clear action plan against the Deloitte report and regular updates on progress.  Mike Bellamy asked whether Non-Executive oversight of the CIP was sufficient; Alyson Coates said she would support further Non-Executive involvement because the Internal Audit report had made clear that the Board needed to more effectively hold the Executive to account for the CIP. The Director of Finance agreed to consider this suggestion as part of considering the actions to be taken against the Deloitte report.  Furthermore, the Board agreed that time should be set aside at the April Board seminar to discuss the Deloitte report and the CIP.  **BOD 34/15 (c)** – **Staff Survey** – the Director of Finance said that the Board would receive a report on the 2014 staff survey in April. The Chair also welcomed the Director of Finance’s proposal to include, as part of this report, how staff reported stress levels could be tackled. | **RA**  **JCH / RA**  **MMcE**  **JCH / MMcE**  **MMcE** |
| **BOD 45/15**  a  b | **Report on Council of Governors Meeting held on 4 March 2014**  The Chair provided an oral update on the most recent Council meeting. In particular he noted that the Council had commented on the Trust’s draft Operational Plan for 2015/16 and had re-appointed both Mike Bellamy and Anne Grocock as Non-Executive Directors until 31 January 2018. The Council had also approved a two year extension of the external audit contract currently held by Deloitte (meaning the contract would run until 25 October 2017).  **The Board noted the update.** |  |
| **BOD 46/15**  a  b  c  d | **Chief Executive’s Report**  On behalf of the Chief Executive, the Medical Director presented the report which outlined recent national and local issues.  Jonathan Asbridge noted the statutory guidance relating to looked-after children and asked who commissioned these services from the Trust and whether or not the Trust was satisfied with the commissioning arrangements. The Chief Operating Officer explained that there was no stand-alone service of looked-after children and both Oxfordshire County Council and Oxfordshire CCG had commissioning roles. The Trust currently employed one single practitioner but the Trust had sought permission from commissioners to transfer that post to the paediatric department at Oxford University Hospitals NHS Trust which would be a safer service model. In terms of the commissioning arrangements, the Chief Operating Officer said that this would be included as part of the current contract negotiations underway and the Director of Nursing and Clinical Standards said that looked-after children would be a priority area in the Quality Account.  The Board noted the item on the publication of the Oxfordshire Safeguarding Children’s Board (OSCB) report and recorded its regret that the widespread exploitation of vulnerable children was not recognised sooner. The Board noted there were lessons for all agencies and agreed that the Quality Committee should be kept informed of the Trust’s progress against its actions.  **The Board noted the report.** | **RA** |
| **BOD 47/15**  a  b  c  d  e  f  g | **Chief Operating Officer’s Report**  The Chief Operating Officer presented the report which provided an update on a range of operational matters.  Mike Bellamy asked whether future reports could routinely show the number of staff and caseload figures when providing an overview of services.  The Board welcomed the item on the Whiteleaf Centre benefits realisation and the Director of Nursing and Clinical Standards added that a final project wrap-up report would also be presented to Board. The Board noted that the benefits relations showed that the project had been well managed and that congratulations to all involved should be recorded.  Jonathan Asbridge asked whether the benefits of the relocation of the Oxford City Community Hospital could be shown and the Chief Operating Officer agreed to look at this.  Anne Grocock noted the item on Memory Clinics and asked whether it was possible that commissioners would not fund this service model. The Chief Operating Officer explained that the Trust, at commissioners’ request, had provided a paper on the proposed service model to meet the increase in demand but she was not confident that the funding required would be made available. The Board would be kept informed of progress.  The Chief Operating Officer noted the tabled paper which provided an overview of the review of the Oxfordshire Patient Choice, Equity and Fair Access Policy. Once partners had agreed the proposed amendments to the policy, relevant boards and governing bodies would be asked to approve these.  **The Board noted the reports.** | **YT**  **RA**  **YT** |
| **BOD 48/15**  a  b  c  d  e | **Quality and Safety Report – Patient Experience**  The Director of Nursing and Clinical Standards presented the report which provided an overview of key quality and safety metrics with a particular focus on patient experience.  The Chair said it was often difficult to see how the Trust’s performance compared with other NHS trusts and asked if benchmarking data could be included. The Director of Nursing and Clinical Standards said that this could be included where possible and noted that the Friends and Family Test (FFT) national data was now available so could be included next time.  Jonathan Asbridge noted the FFT data by directorate and asked whether it was possible for further analysis to take place; he was surprised by some of the results, particularly in the Children’s and Young People’s directorate. The Director of Nursing and Clinical Standards said it would not be possible to identify patients through the results, and therefore find out more detail about their rating, but she would think about what further analysis and testing could take place.  Anne Grocock asked how the results were fed back to staff. The Director of Nursing and Clinical Standards said that this needed to be thought about and she proposed that the Executive team would consider this further. Mike Bellamy asked whether the Board could see action plans developed following the Executive team review and the Director of Nursing and Clinical Standards said this should be possible and added that review could also take place through the directorate quarterly performance reviews.  **The Board noted the report.** | **RA** |
| **BOD 49/15**  a  b  c | **Quality Account Priorities 2015/16**  The Director of Nursing and Clinical Standards presented the report which set out the proposed draft priorities, objectives and measures for 2015/16 for comment.  The Board discussed the report and the following comments were made:-   * Include a clear objective for floor to board engagement under Quality Priority 1. * Include targets where they are missing. * Consider how the priorities and objectives will be measured, using the CLAHRC where appropriate. * Ensure the Quality Account and what it measures is not outside of the context of the wider Trust. * Quantify the costs associated with the activities proposed. * Look to reduce detail into lead objectives so that the information was more accessible. * Amend the target relating to A&E to reflect what had been agreed with partners.   The Director of Nursing and Clinical Standards thanked the Board for the comments and agreed to amend where appropriate.  **The Board noted the report.** | **RA** |
| **BOD 50/15**  a  b  c  d  e | **Inpatient Safe Staffing (Nursing)**  The Director of Nursing and Clinical Standards presented the report which set out actual nurse staffing levels on each ward against expected levels for the month of February 2015.  Lyn Williams asked whether care contact time requirements published by NHS England, and referenced in the report, would require additional work. The Director of Nursing and Clinical Standards said reporting on this national requirement would require some additional work however the Trust was well placed to do this given the amount of work already undertaken to develop a comprehensive safe staffing report. She expected the reporting on care contact time to commence in June 2015.  Jonathan Asbridge said it was important that supernumerary staff, like matrons, were not routinely used to provide cover because they had important functions in their own right. The Director of Nursing and Clinical Standards agreed.  Mike Bellamy noted the report stated that the number of vacancies had increased due to an increase in staffing levels and asked whether the Bank & Agency staff use would decrease if those vacancies were filled by permanent staff. The Director of Nursing and Clinical Standards said she would look into this as she felt progress was being made to fill those vacancies. The Chair picked up on Mike Bellamy’s point and said he would appreciate further information, out-of-session, on how the budget for Bank & Agency staff worked.  **The Board noted the report.** | **RA / MMcE** |
| **BOD 51/15**  a | **Executive and Non-Executive Visits Update**  **The Board agreed to discuss visits further at the April Seminar.** |  |
| **BOD 52/15**  a  b  c  d | **Finance Report**  The Director of Finance presented the report which set out the Trust’s financial position at month 11 and a forecast year-end position. He said that the drivers behind the adverse position were the same as those reported in previous months. The Director of Finance confirmed that OCCG had informed the Trust that it would provide £500k (against the request for £1.0m) in support for the levels of activity experience din Oxfordshire. He also said that the cash level was behind plan due to the delay in the Manor House and Tindal Centre land sales. The current year-end forecast was for a £3.5m deficit.  On the recovery plan, Alyson Coates asked what had not been achieved against the £2.0m target and the Director of Finance said that the Trust had struggled to achieve the short-term reductions in Agency staff spend and Out of Area Treatment placements.  Alyson Coates said that the £11.0m asset impairment seemed high and the Director of Finance explained that as the Trust did not operate in a commercial market the book value of hospitals was different; this impairment reflected the write-down in book value but not in real value. Jonathan Asbridge asked if this impairment was unexpected and the Director of Finance said such impairments were never forecasted as they were too difficult to ascertain.  **The Board noted the report.** |  |
| **BOD 53/15**  a  b | **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 54/15**  a  b  c  d  e | **Improving Access to Mental Health Services**  The Chief Operating Officer presented the report which provided an assessment of the Trust’s current performance against the new access targets for mental health. She noted that the national guidance on how performance would be exactly measured was still to be published. She drew particular attention to the issues relating to the IAPT service which OCCG had indicated it planned to put out to tender. The Trust had written to OCCG to request that a decision be made on the tender process soon because the delay and consequential uncertainty in the service’s future was having an impact on recruitment and staff morale, which fed through to waiting times. The Board agreed that when the tender specification was published it would need to be reviewed very carefully to ensure that it was achievable in the anticipated budget.  The Board went on to discuss the impact on waiting times of investment decisions by commissioners over the years. Whilst re-balancing the position could be achieved in part through contract negotiations, the Board agreed that a meeting with commissioner governing bodies may be helpful. The Chair agreed and added that involving the acute hospital providers would also be beneficial.  Jonathan Asbridge asked why OCCG wished to tender the IAPT service. The Chief Operating Officer said that this appeared to be driven by the commissioner’s desire to bring counselling services into the overall contract. She reminded the Board that the Trust’s IAPT service model in partnership with Oxfordshire MIND was considered to be an exemplary service.  The Director of Nursing and Clinical Standards suggested that future reports should show what support was made available to people who may need to wait for services.  **The Board noted the report.** | **YT** |
| **BOD 55/15**  a  b  c  d  e  f | **Workforce Performance Report**  The Director of Finance presented the report which set out performance against a range of workforce indicators. He said that the sickness absence related to stress remained of significant concern and, whilst the vacancy rate had been addressed, turnover remained high with many staff leaving just after a short period of service. The focus needed to be on addressing these areas.  In terms of staff sickness absence, Lyn Williams said he was concerned that staff may be deterred from receiving the influenza vaccination in the coming winter given that the most recent vaccination was reported as not being effective; a comprehensive communication plan would need to be developed to encourage and support staff to receive the vaccination. The Board agreed.  Anne Grocock said the staff survey results indicated that bullying and harassment of staff by managers was reported as being high and she wondered if this resulted in the high turnover. It was clear that the results of the survey and the general HR data needed careful examination. The Board agreed and said that detailed analysis was required.  The Board then went on to discuss the workforce strategy session as part of the private Board meeting in May 2015 and agreed that this needed to be well planned with a focus on agreeing outcomes to be achieved.  The Medical Director asked whether the HR department had looked at the timescales associated with recruitment as a way to reduce Agency use. The Director of Finance said this was being looked at and noted that the Oxford University Hospitals NHS Trust had recently increased notice period from 1 month to 2 months for many staff. Building on that, Mike Bellamy said it would be helpful if the report could show what Agency cover was being used for (i.e. sickness absence or vacancies).  **The Board noted the report.** | **MMcE / CM**  **MMcE** |
| **BOD 56/15**  a  b  c | **Delivering the OHFT Strategy**  The Medical Director presented the report which provided an overview of the Board strategy session held in February 2015.  Reflecting on the session, Mike Bellamy said he felt more time should have been devoted to the partnership discussion and the role of community hospitals in the wider health system (as these were crucial strategic issues) and that he would like future reports to show more clearly how the Executive team would take forward the points arising out of the discussions. The Chair agreed and on the community hospitals point added that a discussion on the Warneford Hospital site was also needed.  **The Board noted the report.** |  |
| **BOD 57/15**  a  b  c  d  e  f | **Minutes from Committees**  ***Charity Committee – 3 February 2015***  Anne Grocock presented the draft Minutes of the meeting and noted the main items considered. In particular she highlighted the Committee’s approval of art related schemes for the Whiteleaf Centre.  Anne Grocock also noted that the Committee had agreed that should the Council of Governors approve the retention of Deloitte at the Trust’s External Auditor then Deloitte should be invited to continue to provide the examination of the Charity.  **As the Council had approved the extension of the External Audit contract until 25 October 2017, the Board, as corporate trustee of the Charity, approved the appointment of Deloitte to provide the examination of the Charity for the same contract term.**  ***Quality Committee – 13 February 2015***  The Chair presented the draft Minutes of the meeting and noted the main items considered. He explained that the Quality sub-groups were continuing to evolve and good progress had been made in setting these up.  ***Finance and Investment Committee – 10 March 2015***  Lyn Williams provided an oral update on the main items considered at the meeting; the draft minutes would be presented to the next Board meeting. He said that the Committee had ratified the sale of Charter House in Thame, Oxfordshire and had received an update on the proposed Tindal Centre / Manor House surplus land sale.  The Committee had also received an overview of Trust’s latest reference cost which was now 89 (meaning the Trust was 11 per cent more efficient than the average). |  |
| **BOD 58/15**  a  b  c  d | **Any Other Business**  ***Committee Membership***  **The Board approved the following Committee appointment:-**   * **Finance & Investment Committee:-**   + **Appoint John Alison as a full member from 1 April 2015.**   ***Questions from Governors, Members and Others Attending***  The Chair invited questions and comments from those attending.  A staff member provided an account of how patient feedback was gathered and used by teams to learn and improve setting out the need to ensure this routinely happened, and noted the staff survey results and said that staff reported stress levels could be higher.  A staff Governor informed the Board of the Memory Clinic accreditation process that was underway. |  |
|  | The meeting was closed at 12.30  **Date of next meeting:**  **29 April 2015** |  |