

DERBYSHIRE HEALTHCARE NHS FOUNDATION TRUST

MINUTES OF A MEETING OF THE BOARD OF DIRECTORS

**Held in Conference Rooms A & B
Research and Development Centre, Kingsway, Derby DE22 3LZ**

Wednesday, 27 July 2016

MEETING HELD IN PUBLIC	
Commenced: 1pm	Closed: 4:40pm

PRESENT:	Richard Gregory Caroline Maley Jim Dixon Phil Harris Maura Teager Ifti Majid Claire Wright Carolyn Gilby Mark Powell Samantha Harrison	Interim Chairman Senior Independent Director Deputy Chair and Non-Executive Director Non-Executive Director Non-Executive Director Acting Chief Executive Executive Director of Finance Acting Director of Operations Director of Strategic Development Director of Corporate Affairs & Trust Secretary
IN ATTENDANCE:	Hayley Darn Anna Shaw Sue Turner Bev Green Mr and Mrs S Helen MacMahon Scott Lunn Alison Reynolds Sue Earnshaw Beth Howman	Nurse Consultant – Nursing & Patient Experience Team Deputy Director of Communications & Involvement Board Secretary and Minute Taker Releasing Time to Care Lead (Service Improvement) Service Receivers Service Line Manager – CAMHS Clinical IAPT Lead - CAMHS Area Service Manager Complex Health Needs & Paediatric Therapies Area Service Manager Consultant Paediatrician
For item DHCFT 2016/108 For item DHCFT 2016/102 For item DHCFT 2016/102 For item DHCFT 2016/102 For item DHCFT 2016/102		
APOLOGIES:	Jayne Storey Carolyn Green Dr John Sykes	Director of Workforce OD & Culture Director of Nursing & Patient Experience Executive Medical Director
VISITORS:	John Morrissey Donna Cameron Carole Riley Chris Fitzclark Kieron Gibson Dave Waldram	Lead Governor Corporate Services Officer Public Governor, Derby City East Representative from North Derbyshire Voluntary Action Representative from North Derbyshire Voluntary Action Member of the public
Until 3pm Until 3pm		

DHCFT 2016/107	<u>INTERIM CHAIRMAN'S WELCOME, OPENING REMARKS AND APOLOGIES</u> The Interim Chairman, Richard Gregory, opened the meeting and welcomed everyone who was present. Apologies were noted as above. Welcome was extended to Hayley Darn, Nurse Consultant from the Nursing and Patient Experience Team, who was attending on behalf of Carolyn Green, Director of Nursing and Patient Experience.
DHCFT	<u>SERVICE RECEIVER STORY</u>

<p>2016/108</p>	<p>Bev Green, Releasing Time to Care Lead, introduced Mr and Mrs S who kindly agreed to talk to the Board about their recent experience of care received from the Trust.</p> <p>Mr and Mrs S described the difficulties they experienced when Mr S was diagnosed with early vascular dementia and the devastating effect this had on them. Mrs S went on to describe how hard it had been caring for her husband, given his significant memory loss.</p> <p>Life was a struggle for the couple until they were put in touch with the right people who could offer support which eventually enabled Mr S to attend open sessions at the Dovedale Day Hospital. During these visits staff undertook therapy and taught him exercises which kept his brain active. He was also encouraged to look at photographs, and learnt how to keep a book about his life which he can refer to and this has been a tremendous help to him. These activities helped rebuild his confidence so much so that he was able to get back to doing things he enjoys such as reading again. The open sessions at the Dovedale Hospital also allowed Mr and Mrs S to learn about dementia and they also received support from experts who have taught them how to cope so they can continue to live an independent life together.</p> <p>The couple also attended question and answer sessions at Oaklands Village in Swadlincote and due to the activities and therapy he received from the Dovedale Day Hospital Mr S felt able to contribute to discussions. Mr S has also been invited to the Trust's Living Well sessions to talk to recently diagnosed patients about his own experience and the activities that have helped him and these have been very well received. Mr and Mrs S were very positive about the support they have received from the Trust's mental health team and felt they were lucky to live in an area where support has been available to them.</p> <p>Richard Gregory thanked Mr and Mrs S for telling a compelling and inspirational story. Listening to this story had shown there is a clear need for more facilities to help people suffering with dementia, their carers and their family. He felt Mr and Mrs S's story will help influence decisions made by the caring and dedicated mental health teams working with families in the community. He hoped that in future the Trust can work more effectively and help people to access the help they need and he looked forward to holding discussions with the Board at subsequent meetings to establish how this service has developed since their story was told.</p> <p>ACTION: Hayley Darn will discuss how service receiver stories can be carried forward in future Board meetings with Carolyn Green.</p> <p>RESOLVED: The Board of Directors expressed thanks to Mr and Mrs S for sharing their experience and appreciated the opportunity to hear at first hand the service the Trust had provided.</p>
<p>DHCFT 2016/109</p>	<p><u>MINUTES OF THE MEETING DATED 30 JUNE 2016</u></p> <p>The minutes of the meeting held on 30 June were accepted and agreed.</p>
<p>DHCFT 2016/110</p>	<p><u>MATTERS ARISING AND ACTIONS MATRIX</u></p> <p>The Board agreed to close all completed actions. Updates were provided by members of the Board and were noted directly on the actions matrix.</p>
<p>DHCFT 2016/111</p>	<p><u>CHAIRMAN'S VERBAL REPORT</u></p> <p>Richard Gregory updated the Board on progress made with the appointment of two new Non-Executive Directors, Julia Tabreham and Margaret Gildea. The Trust's Council of Governors had formally approved their appointments and he looked forward to them taking up their positions soon.</p>

	<p>Richard Gregory informed the Board that a meeting of the Remuneration and Appointments Committee had been held earlier that morning and had approved the recommendation from Ifti Majid to appoint on an interim basis a replacement for Jayne Storey, Director of Workforce, OD & Culture, who would be stepping down from her role at the end of August. The Committee also agreed to appoint an interim director to replace Carolyn Gilby, Acting Director of Operations when she retires in September.</p> <p>The Board had also met in confidential session earlier in the morning and discussed feedback received so far from the recent CQC inspection. Richard Gregory informed those present at the meeting that formal feedback had not yet been received from the CQC as an exchange of data was still taking place.</p> <p>Richard Gregory and Ifti Majid reported to the Council of Governors and staff last week on the potential collaboration between the Trust and Derbyshire Community Health Services NHS Foundation Trust (DCHS), a fellow trust provider in Derbyshire. This is in line with the ongoing Sustainability and Transformation Planning (STP) within Derbyshire to deliver a collaboration of services. There are a variety of options to define the level of collaboration and the Trust is at the very early stages of considering these. Both Boards have agreed to work in partnership to develop a 'strategic options case' which will consider the pros and cons of each option. It is anticipated that this work will then be presented to both Boards towards the end of the October for consideration.. Governors will be involved throughout this process and he committed to protect the interests of service users throughout this collaboration process. Staff have also been made aware of how the Trust is starting to explore the potential for further collaboration with DCHS.</p> <p>RESOLVED: The Board of Directors noted the Interim Chairman's verbal update.</p>
<p>DHCFT 2016/112</p>	<p><u>ACTING CHIEF EXECUTIVE'S REPORT</u></p> <p>Ifti Majid presented his report which provided the Board with feedback on changes within the national health and social care sector as well as providing an update on developments occurring within the local Derbyshire health and social care community. The report also updated the Board on feedback from external stakeholders such as commissioners and the Trust's staff. The report was also used to support strategic discussion on the delivery of the Trust strategy.</p> <p>Ifti Majid was pleased to report that the Sustainability and Transformation Plan (STP) was submitted to NHS England on time. The submission was very well received and he was part of the Derbyshire submission team group that went to London to put the plan forward.</p> <p>Ifti Majid referred to the consultation that is underway by Sheffield City Region as part of their devolution bid. The Trust had been urged by the Health and Wellbeing Board to respond to this consultation and share concerns about the need for joined up provision of services. It is vital that the Trust understands more about the actual and potential plans and Ifti Majid urged the Board and anyone living in the Chesterfield area to make a measured response to the consultation along the lines of retaining our mental health priorities. He would also raise this matter with the Council of Governors in September. The Board recognised the need to protect health and social care in Derbyshire and expects to be involved in any decisions that affect our service users.</p> <p>Ifti Majid also referred to the Trust's BME Network that requires the support of the organisation to become more established to support equality of development, promotion and wellbeing for staff from a BME background with the Trust. He proposed that a deep dive takes place at a future Board meeting to discuss the Trust's position against the national Workforce Race Equality Standard and was delighted to report that a member from this group will be invited to attend meetings of the People and Culture Committee.</p>

	<p>Discussions also centred around the Listen, Learn and Lead matrix contained in Ifti Majid's report which sets out the latest round of directors and team visits. Caroline Maley was concerned that some actions were still outstanding and Ifti Majid assured her that the next version received at the September meeting will indicate how actions have been satisfactorily resolved or progressed.</p> <p>Richard Gregory pointed out that the wider engagement programme being developed by Sue Walters supported the Listen, Learn and Lead initiative and he would like her to present the programme to the Board and Council of Governors as he was very impressed by this work.</p> <p>Maura Teager referred to the Nuffield Trust's report on reshaping the workforce to deliver the care patients need and asked how this report would be shared. Ifti Majid informed the Board that this report would be rolled out throughout the organisation once it had received further analysis to establish where the Trust fits into the benchmarking. Maura Teager also asked how engaged the universities were with this sector as they will help drive the initiative. Ifti Majid was of the opinion that universities recognised the importance of bursaries for students and this route would help enable our workforce work stream.</p> <p>ACTION: Engagement Programme to be received at the September Board meeting and by the Council of Governors.</p> <p>RESOLVED: The Board of Directors noted the contents of the Acting Chief Executive's report.</p>
<p>DHCFT 2016/113</p>	<p><u>INTEGRATED PERFORMANCE AND ACTIVITY REPORT</u></p> <p>This report provided the Trust Board with an integrated overview of performance as at the end of June 2016 with regard to workforce, finance and operational delivery and quality performance.</p> <p>The report showed how the high level of agency staffing has had an effect on the Trust's financial performance and work was taking place through workforce planning to improve staffing in inpatient areas. In addition to this, the Medical Director had updated approaches to consultant appointments and Royal College of Psychiatrist requirements in order to increase the speed at which doctors can be recruited.</p> <p>It was noted that the Radbourne Unit and Hartington Unit are equally challenged with staffing issues. Carolyn Gilby informed the Board that an ongoing rolling recruitment programme is being carried out but that this was in the context of a national shortage of registered mental health nurses. The Trust is looking to streamline recruitment process and this is being progressed through the People and Culture Committee.</p> <p>The Board discussed the merits of training placements and how to attract nurses to posts, and Ifti Majid proposed to progress this through the Executive Leadership Team. Dedicated resource teams are also looking at rosters and are focussing on resources for inpatient areas.</p> <p>Carolyn Gilby assured the Board that although an emergency process was in place at the Radbourne Unit, the unit was safely staffed and has stabilised because it is receiving support and focus, and the Board would be alerted if this situation deteriorates. The Board discussed the pressures that staff were under within the Radbourne Unit and Hartington Unit and proposed to communicate to staff that the Board are aware of and understands the recent pressures they have been experiencing.</p> <p>Claire Wright highlighted key issues from the finance section of the report. In the first three months the Trust has been ahead of plan and is managing costs within budget. She explained that by the end of the financial year she expects the Trust to meet its plan,</p>

	<p>and will meet the control total agreed with NHS Improvement (NHSI). She also explained that the Trust agency expenditure was exceeding the ceiling set by regulators. Plans to close the Cost Improvement Programme (CIP) gap continue to prove challenging and steps are being taken to explore closing this gap of £2m through both CIP and through cost avoidance.</p> <p>Grievances/dignity at work/disciplinary aspects of the workforce section was also discussed and Ifti Majid suggested we compare the Trust's performance with other organisations to establish whether the Trust was an outlier. It was agreed that data regarding grievances/dignity at work and disciplinarys should be made more visible to the Board and it was recognised that the People and Culture Committee will ensure the process for investigation into cases was being followed so the timeline for completion could be assessed.</p> <p>The Board was concerned that sickness levels are currently running above 5% and asked for assurance that work was taking place to resolve this. It was noted that action to address sickness levels is being managed through the People and Culture Committee and evidence of progress will be reported to the Board through the Committee's minutes and assurance summaries.</p> <p>The Board also discussed the impact of 12 hour ED (Emergency Department) breaches which had increased recently as well as failure to follow the agreed Care and Treatment Review (CTR) process for people with learning disabilities. Carolyn Gilby informed the Board that the Trust has worked hard to ensure people with learning difficulties are not discriminated against and are able to access mental health services. Derby is seen as an outlier around general 12 hour ED breaches because the wards are full, and although out of area beds and PICU (Psychiatric Intensive Care Unit) beds can be utilised this can take time to organise. The Board was concerned about this matter from a patient experience perspective and was pleased to hear that Carolyn Gilby is working with clinical staff and ED services at Derby Royal Hospital to establish a process that can work better for patients.</p> <p>ACTION: Carolyn Gilby to check whether the Trust is an outlier with regard to grievances/dignity at work/disciplinarys</p> <p>RESOLVED: The Board of Directors scrutinised the content of the report and obtained assurance on the current performance across the areas presented.</p>
<p>DHCFT 2016/114</p>	<p><u>POSITION STATEMENT ON QUALITY</u></p> <p>Hayley Darn presented this report on behalf of Carolyn Green which provided the Board of Directors with an update on the Trust's continuing work to improve the quality of services it provides in line with the Trust's Strategy, Quality Strategy and Framework and strategic objectives.</p> <p>Hayley Darn drew attention to the positive feedback received on the Trust's work on safer staffing and markers of good practice and the thanks received from Southern Derbyshire Clinical Commissioning Group for the work of the Safeguarding team for facilitating the Markers of Good Practice quality site visit. They were impressed and assured with the evidence that the Trust's Safeguarding Children Service provided to demonstrate that the Trust is compliant with the required safeguarding children arrangements. Commissioners were also very satisfied that members of the team were able to answer questions to points that required additional information. It was noted that the Safeguarding Committee would address and plan any actions in line with feedback received from the independent multi-agency assurance group that reviewed the Trust's evidence produced for markers of Good Practice quality/part of Section 11 Audit under the Children Act to explore what this would mean to our guidelines.</p> <p>The report also set out the effectiveness through our work on smoking cessation and</p>

	<p>Hayley Darn was pleased to point out that since the introduction of smoking cessation initiatives there has been a reduction overall in those who identify as a smoker. In addition to this the Trust's work on smoking cessation will be presented at a national learning event. Work will continue to ensure support is embedded across the organisation. It was recognised that there are some areas where smoking cessation has proved challenging and support is being given to staff who are caring for people who are resistant to the smoking cessation policy. It was proposed that the Mental Health Act Committee would look at cases where patients have resisted accepting the no smoking policy and how the Mental Health Act can be used in these cases.</p> <p>Discussion took place on initial findings from quality visits and the work taking place on recording the results of quality visits. The Board agreed that this work would also include follow up action from service receiver stories heard at Board meetings.</p> <p>ACTION: Safeguarding Committee to address and plan any actions in line with feedback received from the independent multi-agency assurance group that reviewed the Trust's evidence produced for markers of Good Practice quality/part of Section 11 Audit under the Children's Act to explore what this would mean to our guidelines</p> <p>ACTION: The Mental Health Act Committee to look at how the Mental Health Act can be used to manage patients who are resistant to the non-smoking policy.</p> <p>ACTION: Record retention of the results of quality visits to also capture follow up action from service receiver stories.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Received the Quality Position Statement 2) Gained assurance on its content
<p>DHCFT 2016/115</p>	<p><u>COMPLIANCE RETURN</u></p> <p>Sam Harrison presented her report which summarised for Trust Board the key elements of the Quarter 1 compliance return for approval.</p> <p>The Board noted that the financial return was due for submission on 22 July (moved from 15 July) and had not required sign off by the Trust Board. The financial return had been reviewed by the chair of the Audit and Risk Committee and the chair of the Finance and Performance Committee. It was recognised that the governance return does require Trust Board sign off and the information contained in the Quarter 1 governance compliance return as shown in the report was noted.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Discussed the governance statement and agreed that the interim Chairman and acting Chief Executive, on behalf of the Board of Directors, are able to sign the governance statement to confirm: <ol style="list-style-type: none"> a) For finance, that: <ul style="list-style-type: none"> • The Board anticipates that the Trust will continue to maintain a financial sustainability risk rating of at least 3 over the next 12 months. • The Board anticipates that the Trust's capital expenditure for the remainder of the financial year will not materially differ from the amended forecast in this financial return. b) For governance, that the Board is satisfied that plans in place are sufficient to ensure: ongoing compliance with all existing targets (after the application of thresholds) as set out in Appendix A of the Risk

	<p>Assessment Framework; and a commitment to comply with all known targets going forwards.</p> <p>Otherwise the Board confirms that there are no matters arising in the quarter requiring an exception report to NHS Improvement (per the Risk Assessment Framework Table 3) which have not already been reported.</p> <p>c) Consolidated subsidiaries: ‘Number of subsidiaries included in the finances of this return. This template should not include the results of your NHS charitable funds.’</p> <p>There are zero subsidiaries included in the finances of this return and only the finances of Derbyshire Healthcare NHS Foundation Trust are included.</p> <p>2) Approved the Quarter 1 Governance return to be appropriately signed and returned to Monitor by noon 29 July 2016.</p>
<p>DHCFT 2016/116</p>	<p><u>BOARD COMMITTEE ESCALATIONS</u></p> <p>Assurance summaries were received from committee chairs of the Mental Health Act Committee, Quality Committee and People and Culture Committee which identified key risks, assurance and decisions made.</p> <p>The Board referred to the Annual Complaints and Compliments Report received by the Quality Committee and asked for this report to be received in future by the Board once it has been received by the Quality Committee.</p> <p>Each summary was scrutinised and escalations were noted. The ratified minutes of the Quality Committee held in June were received for information and no issues were raised.</p> <p>ACTION: Annual Complaints and Compliments Report to be received by the Board once it has been received by the Quality Committee</p> <p>RESOLVED: The Board of Directors received the Board Committee escalations and ratified minutes of meetings held in June.</p>
<p>DHCFT 2016/117</p>	<p><u>ANNUAL MEMBERS’ MEETING ARRANGEMENTS</u></p> <p>Anna Shaw presented her paper which updated the Board of Directors on preparation for the forthcoming Annual Members’ Meeting.</p> <p>The Board noted that arrangements for the event are being informed by feedback received from last year’s AMM. Governors have volunteered to be involved in the preparations and promotion for the event has already commenced. Similar to last year, people are being asked to put forward any questions they would like to receive answers to during the meeting. Speakers will include Ifti Majid, Claire Wright, Carolyn Green and John Morrissey (Lead Governor) and Jonny Benjamin, an award winning mental health and suicide prevention campaigner known for the ‘Find Mike’ campaign, has been invited to attend as guest speaker. A number of people who have used or supported individuals who have used our services will also share their experiences of the Trust.</p> <p>RESOLVED: The Board of Directors noted and supported the arrangements being made for the Annual Members Meeting</p>
<p>DHCFT 2016/118</p>	<p><u>DEEP DIVE – CHILDREN’S SERVICES</u></p> <p>The report produced by Helen MacMahon, Scott Lunn, Alison Reynolds, Sue Earnshaw and Beth Howman detailed the performance of Children and CAMHS (Child and Adolescent Mental Health Services). The report highlighted areas of achievement within</p>

these services over recent time including a successful tender, and obtaining additional investment from commissioners to develop additional services. However, the service also encounters a range of challenges including the increasing demand and expectations for services which combined with difficulties in recruiting clinical staff has resulted in lengthy waiting lists in some service areas. The plans that are in place to address the waiting list difficulties were noted as was the awareness that the benefit of these changes will take time to fully impact the patient experience for children and young people in Derbyshire.

Discussions centred around waiting times and how this was being managed. Waiting times were expected to improve now that funding from commissioners had been received to take the service through to next year. The team had also amalgamated services and was using skills in different ways to move this forward. A lot of work was taking place to increase cover and a redesign of pathways by utilising ADHD nurses had been carried out using skills of nurses at the front end of the process in preparation for diagnosis.

The Board recognised that recruitment of clinical staff was a challenge and noted how the team is working with commissioners to obtain early release of funding and engaging with universities to recruit nurses and psychologists at graduate band 5 level. This is essential to sustain the future of our workforce and the Board supported recruitment to these posts.

The team drew attention to their role as gatekeepers for the pathways and how there is an overwhelming need for reform with services in the education sector as so many children and young people have very complex needs. A lot of time is spent responding to the local education authority and the influx of these requests has changed the scope of the service. A lot of work is carried out treating cases of ADHD and autism. The CAMHS team are working with schools in prevention and early help and we are part of that agenda to help and advise on some of these pathways.

The report highlighted the impact of increased integration of the service in terms of performance. The Board heard how the service was working with children and schools to identify levels of self-harm and was working with CAMHS to train staff in these areas and trying to attract staff to work in these pathways. This is starting to develop well and is a big change in the way of working and the way children are referred which will enable the family to be approached by the right services.

Maura Teager queried whether the complaints, concerns and compliments data as presented was under reported and how this is captured. The Board noted that complaints are mostly about waiting times. Complaints are dealt with by the team and may not necessarily be reported. It is hoped that by the next quarter these concerns will be recorded. The Board heard how the team likes to meet services users in the clinics as they are aware this is a vulnerable group of young people who might not know how to complain.

Phil Harris asked about the transfer from CAMHS to adult services and how this was managed. Scott Lunn responded that the transfer policy has now been improved so that CAMHS hold on to children within the service until it is felt it is the right time for each individual to transfer to adult services. Richard Gregory incidentally pointed out that at the last meeting of the Council of Governors held on 21 July it had been agreed that commissioners would be invited to the next meeting to discuss extending the CAMHS service to an appropriate age limit.

The Board felt the deep dive into children's services had been a valuable session and resolved to support the service to help resolve with the challenges it faces.

RESOLVED: The Board of Directors:

- 1) Acknowledged the current performance of the services**
- 2) Noted the actions in place to ensure sustained performance**

DHCFT 2016/119	<p><u>EQUALITY AND DIVERSITY WORKFORCE APPROACH FOR 2016-17</u></p> <p>It was agreed to defer this item to September.</p>
DHCFT 2016/120	<p><u>BOARD ASSURANCE FRAMEWORK</u></p> <p>The Board Assurance Framework (BAF) is a high level report which enables the Board of Directors to demonstrate how it has identified and met its assurance needs, focused on the delivery of its objectives, and subsequent principal risks. This report details the second issue of the BAF for 2016/17.</p> <p>The Board recognised that this was the second formal presentation of the Board Assurance Framework for 2016/17 which was presented to the Audit & Risk Committee on 19 July. It was noted that the Audit and Risk Committee recommended and agreed that risks 2a) System change and 4b) Transformation would be considered for merging in the next Issue of the BAF and the Board anticipated this would be in place when the next version of the BAF is considered by the Board in November.</p> <p>RESOLVED: The Board of Directors approved this second issue of the BAF for 2016/17</p>
DHCFT 2016/121	<p><u>GOVERNANCE IMPROVEMENT ACTION PLAN</u></p> <p>Mark Powell presented his paper which provided the Board with an update on progress of all tasks within the GIAP, including the identification of tasks that are off track, including those that the Board has responsibility for oversight.</p> <p>The Board recognised there has been significant progress made on HR and people related actions and these were discussed at the People and Culture Committee on 15 July, although there is still significant work required to implement of some of these plans across the organisation as they are major areas of work.</p> <p>The Board approved the revised key performance indicators (KPIs) contained in the report as they reflected decisions recently made during the Board Development Session on 13 July. It was noted that updated KPIs would be presented in subsequent reports for approval by the Board.</p> <p>Mark Powell drew attention to FF1 the fit and proper person task (<i>the Trust must ensure that a fit and proper person review is undertaken for all directors in light of the findings of the employment tribunal</i>). It was acknowledged that this action had been closed in the light of informal CQC feedback. However, Mark Powell asked from a governance perspective whether it was correct to categorise this action as complete or whether there was a risk that the CQC could disagree with this course of action as part of their recent inspection.</p> <p>The Board was assured all internal processes associated with the GIAP action had been completed and a conversation would be had with the CQC at the next NHSI/CQC meeting to understand their level of external assurance</p> <p>Caroline Maley was concerned that some of the actions on the GIAP are shown as 'off track' although the Board assurance column was 'on track' and HR3 and HR4 were used as examples to illustrate this. Mark Powell explained that the progress 'RAG' rating column indicates the status of the action and delivery within the agreed timescale. The reason the end column is shown as green and on track is due to the People and Culture Committee's judgement from evidence of progress reviewed at the meeting. During the next few weeks different methods will be established to indicate the time frames, KPIs and internal and external assurance evidence and there will be less emphasis on key</p>

	<p>tasks.</p> <p>ACTION: Richard Gregory and Ifti Majid will discuss the completion of FF1 with the CQC and NHSI.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Noted the progress made against a number of specific HR and People related actions 2) Approved the revised KPI's 3) Scrutinised the closure of recommendation FF1 4) Reviewed the content of this paper, full GIAP and sought assurance where required 5) Reviewed and discussed the recommendations rated as 'some issues' and sought assurance on the mitigation provided from the Responsible Director, Individual Directors or Committee Chairs 6) Agreed at the end of the Pubic Board meeting whether any further changes are required to the GIAP following presentation of papers, outcomes of item specific discussions and/or other assurances provided throughout the meeting
<p>DHCFT 2016/122</p>	<p><u>CORPORATE GOVERNANCE FRAMEWORK</u></p> <p>Sam Harrison presented the revised Corporate Governance Framework to the Public Trust Board and confirmed the completion of related requirements within the Governance Improvement Action Plan.</p> <p>The Audit and Risk Committee, as the Committee with the role of overseeing the GIAP actions relating to the Corporate Governance Framework, considered a draft update at the Audit and Risk Committee on 24 May and recommended the Framework for approval to the Trust Board following review of a further draft at the Committee meeting on 19 July 2016.</p> <p>The Board noted the recommendation received from the Audit & Risk Committee and formally approved the Corporate Governance Framework.</p> <p>RESOLVED: The Board of Directors:</p> <ol style="list-style-type: none"> 1) Received and ratified the Corporate Governance Framework for implementation throughout the Trust. 2) Agreed that the GIAP actions outlined are now complete: CorpG1 (1), ClinG3 (2) and CorpG4 (1).
<p>DHCFT 2016/123</p>	<p><u>ANNUAL AUDIT LETTER</u></p> <p>Claire Wright reported that the Annual Audit Letter to Directors summarised the key findings arising from the work that Grant Thornton, external auditors, carried out for the Trust for the year ended 31 March, 2016. This is a procedural matter and supported the Trust's annual accounts and had been received by the Audit and Risk Committee at its meeting on 19 July. The Board received the Annual Audit Letter and commended the engagement that had taken place between Grant Thornton and the Finance, Quality and Communications teams in producing the 2015/16 Annual Report and Accounts.</p> <p>RESOLVED: The Board of Directors received the Annual Audit Letter.</p>
<p>DHCFT 2016/124</p>	<p><u>ANY OTHER BUSINESS</u></p> <p>Ifti Majid reminded the Board that Jayne Storey, Director of Workforce OD & Culture would be leaving the Trust at the end of August and thanked her for the dedication and support she had given to the organisation.</p>

	<p>As this was the last Board meeting that Non-Executive Director Phil Harris would be attending, Richard Gregory expressed his appreciation of the support he had provided to the Trust and wished him well in his retirement.</p>
DHCFT 2016/125	<p><u>BOARD FORWARD PLAN</u></p> <p>The forward plan was noted and would be updated in line with today's discussions.</p> <p>RESOLVED: The Board of Directors noted the forward plan for 2016/17</p>
DHCFT 2016/126	<p><u>IDENTIFICATION OF ANY ISSUES ARISING FROM THE MEETING FOR INCLUSION OR UPDATING IN THE BOARD ASSURANCE FRAMEWORK OR GIAP</u></p> <p>It was agreed at the end of the Public Board meeting that there were no further changes required to the GIAP or the Board Assurance Framework following presentation of papers, outcomes of item specific discussions and/or other assurances provided throughout the meeting.</p>
DHCFT 2016/127	<p><u>BOARD PERFORMANCE AND CONTENT OF MEETING</u></p> <p>The Board felt that good discussions were held during the meeting. Concern was raised that some papers had to be tabled and it was agreed that the submission of supporting papers would be discussed at the Executive Leadership Team meeting.</p> <p>It was reiterated that any questions applicable to the agenda and at the Chair's discretion should be received by the Board Secretary up to 48 hours prior to the meeting for a response to be provided by the Board at each meeting.</p>
<p>The next meeting of the Board held in Public Session will take place at 1pm on Wednesday, 7 September 2016.</p> <p style="text-align: center;">The location is Conference Rooms A and B Research and Development Centre, Kingsway, Derby DE22 3LZ</p>	