

**DERBYSHIRE MENTAL HEALTH SERVICES NHS TRUST**

**MINUTES OF A MEETING OF THE BOARD OF DIRECTORS**

**Held in The Boardroom, Bramble House, Kingsway**

**On Wednesday 7<sup>th</sup> January 2009**

<b>MEETING HELD IN PUBLIC</b>			
Opened:	2.05 pm	Adjourned:	3.06 pm

<b><u>PRESENT:</u></b>	Alan Baines	Chairman
	Kathryn Blackshaw	Executive Director of Business Strategy
	Martin Fairs	Non-Executive Director
	Paul Lumsdon	Executive Director of Nursing and Governance
	Ifti Majid	Executive Director of Service Delivery and IM&T
	Veronica Marsden	Non-Executive Director
	Mike Shewan	Chief Executive
	Brian Steven	Interim Director of Finance
	Dr John Sykes	Executive Medical Director
	Lesley Thompson	Non-Executive Director
	Graham Gillham	Director of Corporate and Legal Affairs
	Tika Khan	Acting Director of Finance
	Alison Baker	Executive Business Assistant (Minute Taker)

**IN ATTENDANCE:** Ray Curry, Dave Waldram and Andrew Hare

**APOLOGIES:** None

*The Chairman wished the Board and members of the public a happy New Year and opened the first meeting of 2009.*

*Kathryn Blackshaw, Executive Director of Business Strategy was welcomed to the Board together with Tika Khan, Acting Director of Finance. The Board thanked Brian Steven for his contribution as Interim Director of Finance and congratulated him on his new position with Leeds Teaching Hospitals NHS Trust. Thanks were also extended to Martin Fairs, Non-Executive Director, for his tremendous support during his time with the Trust through his role as Chair of Audit Committee.*

**DMHT 09/01** **MINUTES OF MEETING OF THE TRUST BOARD HELD IN PUBLIC ON WEDNESDAY 3<sup>rd</sup> DECEMBER 2008**

The minutes of the meeting held on 3<sup>rd</sup> December 2008 were accepted and approved with one correction:

*DMHT 08/100 (08/98) Audit Committee Feedback*  
To be amended to "In response to the Chairman, **Martin Fairs** advised .....

DMHT  
09/02

**MATTERS ARISING FROM MINUTES OF THE MEETING OF THE TRUST BOARD  
HELD IN PUBLIC ON 3<sup>rd</sup> DECEMBER 2008**

*08/90 Strategic Scan*

Mike Shewan advised the Board that he and Kathryn Blackshaw had undertaken initial discussions with the East Midlands Procurement Hub around the issue of gathering competitor intelligence and enhancing tendering skills. A further update would be provided to the next Board meeting.

DMHT  
09/03

**THE OPERATING FRAMEWORK FOR THE NHS IN ENGLAND 2009/10**

Kathryn Blackshaw presented her report on the Operating Framework for the NHS in England 2009/10. The framework (a full copy of which was available on the Department of Health website) was published on 8<sup>th</sup> December 2008 and was the second NHS Operating Framework in the three year planning cycle established by the 2007 Comprehensive Spending Review. The requirements of the Operating Framework and its implementation would be performance managed both by the Trust's commissioners and NHS East Midlands.

The 2009/10 Operating Framework set no new national targets. The priorities set for 2008/2009 were based on what the Department of Health considered matter most to patients, public and staff, and so remained the same priorities for the coming year: reductions in waiting times, continuing to tackle healthcare acquired infections and maintaining financial stability.

Kathryn Blackshaw highlighted the key priority areas for the Trust:

- Existing Commitments - To deliver 7500 new cases served by early intervention teams per year. The figure seemed high but it was noted that it related to the national requirement, rather than the individual target for the Trust.
- Investing in Quality – Financial Framework for 2009/2010
  - PCT allocations growth would average 5.5% for each of 2009/10 and 2010/2011.
  - Substantial efficiency savings needed in 2010/2011.
  - Total expected 2009/2010 surplus for the NHS £1.35b.
  - Full adoption of International Financial Reporting Standards (IFRS).

The key dates to note:

- Initial SHA Plans submitted for 2009/2010 – 2010/2011 for finance, workforce, Vital signs and informatics **30 January 2009**.
- Contracts agreed **28 February 2009** and signed off by **31 March 2009**.
- Final SHA plans submitted **20 March 2009**.
- Joint plans on eliminating mixed sex accommodation **31 March 2009**.
- NHS providers register with Care Quality Commission (CQC) **1 April 2009**.
- Quality framework for community services to be piloted **June 2009**.
- PCTs to have developed plans for the future provision of community services **October 2009**.
- Providers delivering services on behalf of the NHS to publish “quality accounts” **June 2010**.

The Chairman asked how the requirements of the Operating Framework would be instilled into the Trust's Business Plan and asked for comments from the Board members.

Brian Steven highlighted the discussions that had taken place prior to the Board meeting around the financial challenges for 2009/2010. It was likely that efficiencies would need to be improved by between 4% to 4.5%. Ifti Majid commented that the Operating Framework had not raised any issues that had not already been included within the Trust planning cycle and Paul Lumsdon added that the emphasis on quality was welcome and the framework, although challenging, could be built upon.

Kathryn Blackshaw said that a review would be requested with commissioners around how the contract management arrangements worked and terms of reference would reflect the work required within the Operating Framework. The PCTs had been developing a five year strategic plan and it was important to ensure the Trust's plan was properly aligned.

In response to Brian Steven's question on the likelihood of a reduction in spend by PCTs, Kathryn Blackshaw advised that a reduction had been expected. The pressures over the winter months in the non-elective agenda had been absorbed by a high attendance rate in accident and emergency admissions. There was however a commitment to increase the investment in mental health services and it was important to encourage the PCTs that their investment should be into Derbyshire Mental Health Services NHS Trust.

Mike Shewan stressed the short timescale and the need for contracts to be signed off by the end of March.

**RESOLVED:**

- **To note the requirements of the Operating Framework 2009/2010.**
- **To consider and monitor the opportunities and challenges facing the Trust, presented through the publication of the Operating Framework 2009/2010.**

**DMHT  
09/04**

**INFECTON PREVENTION AND CONTROL REPORT, INCLUDING UPDATE ON  
HYGIENE CODE**

Paul Lumsdon presented the quarterly report on the progress with the implementation of the infection control performance framework in accordance with the Hygiene Code (Health Act 2006, amended 2008).

No cases of Meticillin-Resistant Staphylococcus aureus (MRSA) Bacteraemia (blood stream infection) or Clostridium Difficile (C'diff-diarrhoea) had been identified during the quarter. There were three confirmed cases of MRSA (not bacteraemia/blood stream infection) within the quarter and two outbreaks of probable viral diarrhoea and vomiting: one outbreak within Learning Disability Services and one outbreak within Older People's Inpatient Services.

The report outlined developments with regard to changes to Waste Management Policies and Procedures, Pest Control activity reports and Environmental Health inspections of kitchens.

Matrons had continued to undertake Matrons' Rounds in conjunction with Hotel Services and Estates and the report identified key environmental improvement initiatives that were underway.

Good progress had been made in clinical skills training in infection prevention and control with 72.9% of 'clinical' and 'non-clinical with patient contact' staff within licence for training for prevention of infection control.

During April to December 2008 a further five areas had received unannounced audits completed by the Matron for Infection Control, building on the thirteen audits during quarters one and two.

The Chairman asked for an update on progress with mandatory training of medics. Paul Lumsdon replied that John Sykes had been proactively addressing the importance of mandatory training with the medics and local inductions were in place. Good progress was being made and the year end report was expected to be favourable.

Veronica Marsden asked what the position was with the development of an isolation facility to minimise the risk of cross contamination. Paul Lumsdon responded that costs had been looked into around enhancing individual capacity and an escalation policy would be incorporated into the end of year report.

**RESOLVED:**

- **To note the contents of the report and support the actions required.**
- **To receive the year end report at the end of quarter four.**
- **To focus on the mandatory training of medics.**

**DMHT  
09/05**

**UPDATE ON THE 2008/2009 INFORMATION GOVERNANCE IMPROVEMENT PLAN**

Ifti Majid reported that the Trust had a programme of continuous development in place to demonstrate a year on year improvement in compliance with published Information Governance Toolkit standards. The report to the Board set out the management arrangements and plans for the improvement of the Trust's compliance against the 2008-2009 Version 6 Information Governance Toolkit.

In 2007-2008 the Trust had achieved an overall compliance rating of 62%, which represented an 'amber' status, against the 'red-amber-green traffic light' scoring system. For 2008-2009 the Trust's improvement plan had been developed to deliver an overall compliance rating of approximately 76%, which represented a 'green' status. The 2008-2009 Information Governance improvement priorities to be achieved by 31 March 2009 were being implemented and non-recurrent funding had been made available to support the delivery of the plans. The Information Governance management arrangements for 2008-2009 had been reviewed and all required structures, roles and responsibilities established.

Martin Fairs commented that the improvement over the last two years had been significant and had been monitored through the Audit Committee. The self assessment exercise was subject to an internal audit.

The Chairman asked for an explanation around risk 106 (red risk) in light of the review of Derbyshire Health Informatics Service. Ifti Majid replied that the risk was being addressed through the Disaster Recovery programme for IT systems and manual systems in the event of system loss.

**RESOLVED:**

- **To note the contents of the report.**
- **To approve the targets set.**
- **To approve the management arrangements and planned improvements to Information Governance compliance for 2008-2009.**
- **To receive a further report to the April Trust Board.**

DMHT  
09/06

## **MULTI-PROFESSIONAL STRATEGY ACTION PLAN**

Paul Lumsdon reported that the Multi-Professional Strategy 2009-2012 had been approved by the Trust Governance Committee. The Strategy would be subject to a launch event with National Speakers and local senior staff in February 2009 and would be communicated to all professional staff and associated staff at all levels of the organisation. A work plan had been formulated by the Multi-Professional Group to oversee the implementation of the Strategy and progress would be monitored through the Governance Committee.

Lesley Thompson asked how the action plan would be integrated into the Trust IBP (Integrated Business Plan). Paul Lumsdon responded that the Action Plan was specific, but the Multi-Professional Strategy would encompass the IBP.

Veronica Marsden commented that the document was professionally supportive and a good basis for the quality of outcome measures being addressed through 'High Quality Care for All'.

Mike Shewan stressed the importance of engaging clinicians across the Trust and was pleased to see the Action Plan.

### **RESOLVED:**

- **To note the contents of the Report.**
- **To consider and approve the Strategy.**
- **To take forward the development of Trust business and direction within the multi-professional arena.**

DMHT  
09/07

## **INTEGRATED PERFORMANCE REPORT INCORPORATING FINANCIAL PERFORMANCE – NOVEMBER 2008 (MONTH 8)**

Paul Lumsdon confirmed the key achievements since the last report to the Board. The Crisis and Assertive Outreach teams continued to exceed the Local Delivery Plan targets, the Trust continued to meet or surpass the regulatory performance targets, and the rate of 97% had been achieved in the Emergency Care business unit for 'return to work' interviews.

Key risks identified were in relation to the low completion rate of individual performance reviews (IPRs) and the high level of year-to-date income and expenditure surplus compared with the required outturn surplus. In addition, the Early Interventions team had fallen just below the Local Delivery Plan target for new caseloads.

There appeared to be discrepancies in the IPR data and an email was being circulated to all staff to ensure that the completion form was returned and entered on the system for more accurate recording. The trajectory was behind and active steps would need to be taken to improve the year end position.

Brian Steven reported that the financial margins were looking favourable. Risks existed but were expected and meetings were taking place to look at the wise investment of available funds.

### **RESOLVED:**

- **To note the contents of the monthly monitoring performance report.**

DMHT  
09/08

**OFSTED EVALUATION REPORT IN RELATION TO THE SAFEGUARDING OF CHILDREN**

Paul Lumsdon presented the Ofsted, Healthcare Commission, HM Inspectorate of Constabulary Review of Services for Children and Young People, which had been undertaken following the tragic death of Baby P in Haringey. All health providers and Local Health Authorities would be subject to an audit process and evaluation against standards set within the Haringey report. There was specific reference to reporting and accountability arrangements for the engagement in and follow up of serious case reviews by the NHS. The organisation was awaiting the revised Audit tool from the Healthcare Commissioner before proceeding with the evaluation process (provisionally January 2009).

Veronica Marsden asked how the Trust would be able to demonstrate the improvement of the care pathway and Paul Lumsdon responded that there was an in depth "traffic lighted" assessment which covered assurance, the Trust's position and the action required. The assessment process was being monitored through the Governance Committee.

**RESOLVED:**

- **To note the contents of the briefing provided and record the risk analysis.**
- **To note the monitoring process through the Governance Committee and receive updates on the evaluation process.**

DMHT  
09/09

**BOARD REPORTING TIMETABLE**

Graham Gillham advised that the Board Reporting Timetable was intended to provide the yearly cycle of key items to the Board. The headings had been amended to mirror the recent changes to the Board agenda. The timetable would be a "live" document and would be brought to the Board on a quarterly basis for review.

The Board were asked to forward any comments on the timetable to Graham Gillham and Paul Lumsdon asked for lead initials to be included under the "Item" column.

**RESOLVED:**

- **To adopt the Board Reporting Timetable on the basis of future agenda planning.**
- **To receive the Timetable on a quarterly basis for review.**

DMHT  
09/10

**RATIFIED MINUTES FROM RISK MANAGEMENT COMMITTEE HELD ON 11<sup>TH</sup> NOVEMBER 2008, TOGETHER WITH ACTIONS MATRIX**

The minutes and actions matrix from the Risk Management Committee, held on 11<sup>th</sup> November were received for information.

Lesley Thompson (Risk Management Committee Chair) asked what would be included in future reports to the Board from a Risk Management perspective. Paul Lumsdon replied that a meeting would be taking place to review the governance structure, which would be brought to the Board in May. The Integrated Performance Report would highlight areas of risk.

Paul Lumsdon reported that the Risk Management Committee Chair had asked for a report with regard to the top 5 red risks in the Trust and he confirmed that a report was to be taken to the next Risk Management Committee to look at those more closely.

Mike Shewan stressed the need for a review of the Board Committee structures in view of the initial feedback from Whitehead Mann and a formal decision would be made after the main feedback session on 21<sup>st</sup> January 2009.

DMHT  
09/11

**RATIFIED MINUTES FROM GOVERNANCE COMMITTEE HELD ON 13<sup>TH</sup> NOVEMBER 2008, TOGETHER WITH ACTIONS MATRIX**

The minutes and actions matrix from the Governance Committee meeting, held on 13<sup>th</sup> November were received for information.

Veronica Marsden stated that the Multi-Professional Strategy had already been covered earlier in the meeting and there were no other issues to raise.

**Date and time of the next meeting**

**Wednesday, 4<sup>th</sup> February 2009 commencing at 2:00pm in the Boardroom  
Bramble House, Kingsway Hospital**