

Minutes of a Meeting of the AWP NHS Trust Board of Directors

Held on 27th August 2014 at 11.30am in Conference Room, Jenner House, Chippenham

These Minutes are presented for **Approval**

Members Present

Anthony Gallagher – Chair, Non-Executive Director	Iain Tulley – Chief Executive
Peaches Golding – Non-Executive Director	Alan Metherall – Acting Executive Director of Nursing
Ruth Brunt – Non-Executive Director	Lee O’Bryan - Non-Executive Director
Barry Dennington – Non-Executive Director	Hayley Richards – Executive Medical Director
	Tony McNiff - Non-Executive Director

Associate Members in attendance

Graham Coxell – Associate Non-Executive Director

Staff In attendance

Alison Devereux-Pearce – Governance Support Officer (minutes)	Rachel Clark –Director of Organisational Development
Simon Gerard – Senior Communications Officer	Liam Stallard – Legal Services Co-ordinator
Hannah Dennis - Corporate Governance, Risk and Legal Manager	Pippa Ross-Smith – Deputy Director of Finance

Members of the Public in the Public Gallery

Mr S. King – Member of Public and Patient
Mr D. Ody – Member of Public
Mrs B. Robbins – Member of Public and Carer

BD/14/131 - Apologies

1. Apologies were **received** from

Emma Roberts - Director of Corporate Affairs and Company Secretary
Susan Thompson – Non-Executive Director
Sue Hall – Executive Director of Resources
Kristin Dominy – Executive Director of Operations

BD/14/131.1 Declaration Of Members’ Interests

1. In accordance with AWP Standing Orders (s7.1) members present were asked to declare any conflicts of interest with items on the Board meeting agenda.

No interests were declared.

BD/14/132 - Questions From Members Of The Public

1. None were received.

BD/14/133 – Minutes Of The Previous Meeting

1. The minutes were **agreed** as an accurate record.

BD/14/134 – Matters Arising

1. The Board considered the Board Schedule of Matters Arising and resolved to note progress and remove those items marked as complete.

1.1 **CEO Report - Medical Revalidation**; This was approved by the Board in July 2014 and reviewed by the Audit & Risk Committee who were satisfied with the process. Action Closed.

1.2 **Risk Register** : The next board meeting will ensure specific actions over adjusted scoring either for escalation or removal, as reviewed by the Executive Team, will be instigated.

1.3 **Membership Strategy Handbook**; action closed.

BD/14/135 – Chair And Chief Executive’s Actions

1. There were none to report.

BD/14/136 - Chair’s Report

1. The Board received a update from the Chair for the period since the last Board meeting.
2. The Chair reported a constructive meeting with Anthony Farnsworth of NHS England. As well as a discussion of the outcome of the Bristol tender process, Anthony Farnsworth is encouraged by the Trusts consideration of how it can take a more active role in system leadership.
3. The Chair made a Quality Improvement Visit to the Drug and Alcohol Team in BANES. He commented on the teams enthusiasm and positivity whilst providing a service under pressure from cutbacks and managing challenges with step down processes from the service.
4. The Chair and Chief Executive met recently with Rhona McDonald, Interim Bristol System Leader, who is managing the current process.. Lee O’Byran is also supporting the transition by providing bi-weekly support to the team, recognising that successful transition is dependent on maintaining a delicate balance to ensure delivery.
5. Barry Dennington, the Trust’s new Non-Executive Director, was welcomed by the Chair who confirmed his induction programme is currently underway.
6. The Trust-wide Involvement Group met recently in its new role as an evolving Council of Governors for the Trust. The Group will have an equal representation of users and carers and in the coming months will begin to operate within the same guidelines as a Foundation Trust Council of Governors.

7. The Board resolved to **NOTE** this report.

BD/14/137 - Chief Executive's Report (verbal update)

1. The Chief Executive presented his regular report verbally on matters of national and local interest, raising key points in his summary for the Board.
2. Rhona McDonald, Interim Bristol System Leader, has been speaking with Bristol commissioners to ensure appropriate pace for staff transitions etc.
3. Anthony Farnsworth will be bringing together providers and commissioners for the Bristol area in a planning session. He has been asked, as part of his role as area team leader, to co-ordinate the System Leadership Group. The CEO attended the inaugural meeting and was impressed with this well-attended and positive session.
4. There has been a discussion with the Specialist Services triumvirate about Forensic Service staffing levels. The Modern Matron and staff have reported that short term changes can cause significant problems due to sickness levels impacting on available staff for escorting patients. The Team has been asked to publish and display in ward offices the staffing levels that staff working in each ward can expect on any one shift and have been instructed to escalate to Alan Metherall, Acting Director of Nursing, if they feel safety is compromised. This will be reviewed at the next Executive 'walk about' to increase confidence of safer staffing.
5. He commented upon the Swindon Intensive Team and its historical issues and concerns and noted a dip in performance. Feedback has been that the new management structure is working well and the team has expressed that they have indicated feeling more 'safe' over last few weeks.
6. Sammad Hashmi, the Interim Clinical Director for Swindon, has stepped down and Simon Manchip has taken up the role on an interim basis whilst a recruitment process is ongoing. The CEO thanked Dr Hashmi for his contribution in establishing the delivery unit for Swindon.
7. CQC inspection; Hayley Richards, Executive Medical Director, advised that the work streams have not stopped and that actions are in response to verbal feedback to report against progress. Work will address issues raised in the forthcoming CQC report. Scrutiny of the report is being undertaken with senior staff across the Trust and advice from external agencies is being taken on the best approach and most targeted response. Assurance was given that the Trust will act upon and address issues identified. Once published, the report will be available to the general public from Thursday 18th September 2014 once the factual accuracy has been determined.
8. The Board resolved to **note** this report.

BD/14/138 Trust-wide Risk Register

1. The Board received the Trust-wide risk register for review and challenge. The risk register had been reviewed by Executive Directors at the meeting of the Executive Team on 20 August 2014 where a detailed evaluation understanding the changes in risk profiles was undertaken.
2. It was agreed that identified risks no longer presenting an issue for the Trust need to be closed off and for the register updated accordingly. New risks were identified, including a

Minutes Prepared for the Part 1 Trust Board dated 27th August 2014

Sponsored by the Chair

Agenda Item:

Serial:

Page 3 of 6

Trust Board Minutes – 27th August 2014

risk regarding quality governance requirements (CQC), and some issues were combined to reflect the current risk to the Trust. A risk regarding the provision of staff in Wiltshire was also escalated to the Trust-wide risk register. This risk was discussed by the Audit & Risk Committee and escalated from the Delivery Executive risk register.

3. Iain Tulley commended the work that has been done in improving the currency of the risk register. It now better reflects the actual position within the Trust. Ruth Brunt observed that criticism of the approach at previous board meetings had been addressed and the register is realistic, more dynamic and centres more appropriately on key risks, clear mitigations and management.
4. Lee O'Bryan asked that the discipline of executive 'Deep dive' continues to ensure the deeper understanding of risks and the actions taken to mitigate. This was confirmed. The Chair stressed that the A&R committee reviews the risk register and ensures the robustness of the process.
5. The Board resolved to **note** the report.

BD/14/139 Quality and Performance Report

1. The Board received a report on the Trust's M4 performance against each **quality domain** and the M4 **Monitor Compliance** risk scores.
2. This report focuses on quality and performance data for July 2014. Performance against IQ indicators is largely on track with exceptions noted in DTOC, Memory Service waits in Bristol and Swindon and supervision in relation to Bank staff. The Safer Staffing submission for July indicates two wards had staffing levels overall that were less than 80% of their plan. The latter is being followed up by the Director of Nursing.
3. Two new areas have been added to the report as areas of greatest focus: Wiltshire staffing and the transition of Bristol services into the re-tendered model. Challenge for the Memory Services in Bristol and Swindon was discussed, with the Board noting that Bristol issues will be resolved when services are transferred over to the new provider. Swindon has a robust approach and a sustainable process in place along with a new Interim Clinical Director working with GPs to introduce a new pilot scheme. This is expected to result in significant change to the locality's Older Peoples service which is rated and noted on the locality Risk Register.
4. Lee O'Bryan commented that this was a helpful report but that he required more clarity over Appendix G which states the range of what's acceptable rather than a specific number. The Acting Executive Director of Nursing advised that The Trust publishes performance according to recognised NHS England parameters.
5. The Board resolved to **NOTE** this report.

BD/14/140 Finance Report

1. The Board received its regular report on the **financial position** in month (Month 4).
2. **Income and Expenditure** - There are cost pressures which have been identified for the year to date and offset by additional savings. This is monitored via monthly meetings with Operations management led by the Programme Management Office.

Minutes Prepared for the Part 1 Trust Board dated 27th August 2014

Sponsored by the Chair

Agenda Item:

Serial:

Page 4 of 6

Trust Board Minutes – 27th August 2014

3. **Cash flow** – Creditor and debtor days have been identified as an issue for Month 4. The Better Payment Practice Code target is 95% by volume and value. As at Month 4 AWP volume is 87% and value is 92%. Mitigation has been identified and should ensure the delivery of a balanced year end position but recognises there are risks attached to this.
4. It has been recognised that out of area, occupancy levels and other bed pressures are impacting upon Delayed Transfers of Care. This is being addressed through the work on flow and capacity which will be reported at the September board.
5. A recommendation from the Finance and Planning Committee was discussed by the Board and it was agreed that the 2014/15 capital plan is reprioritised to allow for a contingency to be held to support the CQC required work. This is to be held pending identification of any other funding streams. Lee O'Bryan observed that no request for using Trust contingency funds has been made but this issue has been discussed at the Committee which requested to review the use of contingency funding. The Chair commented that any CIP would be coming to the Committee for delivery and any other plans would additionally go through the Project Management Office.
6. The Board resolved to **NOTE** this report and **approve** the Finance and Planning Committee recommendation that the 2014/15 capital plan is reprioritised to allow for a contingency to be held to support the CQC required work, pending identification of any other funding streams.

BD/14/1141 Committee Chairs' Reports

Audit & Risk Committee

1. The Board received an update on the business of the Audit and Risk Committee meeting on 30th June 2014 from the Committee Chair, Tony McNiff.
2. The Committee considered the Clinical Executive Risk Register
3. The Bristol transition and its transparency of the process was discussed. Tony McNiff advised the Board that he could take comfort in the bi-weekly telephone call from Lee O'Bryan, Chair of the Finance & Planning Committee, in which risks to the organisation should be discussed and captured. In addition, Rhona McDonald, the Bristol Lead, will be coming to Board next month to present and verbally update the meeting.
4. The minutes provided today are in draft form and will be amended to reflect a correction over external audits.

Quality and Standards Committee

1. The Board received an update on the business of the Quality and Standards Committee meeting in August from Non-Executive Director, Ruth Brunt, who took the role of Chair of the meeting this month.
2. The key focus of the Committee is in relation to the findings of the CQC. The Committee will, as well as overseeing the development of and implementation of the action plans to address compliance, ensure clinical directors provide evidence of positive assurance that

Minutes Prepared for the Part 1 Trust Board dated 27th August 2014

Sponsored by the Chair

Agenda Item:

Serial:

Page 5 of 6

Trust Board Minutes – 27th August 2014

actions have been taken and matters closed. The Director of Operations will ensure grip in relation to this and reporting to the Committee by Clinical Directors.

3. A CQC compliance report provided sufficient assurance over completed and progressing actions as the result of initial feedback from the CQC, noting no significant risks to achieving these within the agreed timescale.
4. The Clinical Director of Secure Services discussed concerns over the costs of anti-ligature work at Fromeside and the possible repositioning of funds.
5. The Clinical Audit report gave assurance with the process for identifying audit priorities and how the Committee gains satisfaction in that processes being robust which was encouraging to note.
6. Incident 'Near Misses' had increased in number but the Committee is comfortable that processes are in place to identify potential issues and themes arising.

Finance and Planning Committee

1. The Board received a verbal update on the business of the August meeting of the Finance and Planning Committee from the Committee Chair, Lee O'Bryan.
2. The meeting was challenging but constructive and discussed papers on Any Qualified Provider and its commercial approach which will be valuable learning for commercial strategies. Commercial tendering plans will be aligned to the IBP commercial aspirations and incomes.
3. The Board resolved to **NOTE** these reports.

BD/14/142 Minutes of Board Committees

1. The Board received and **NOTED** the following Board Committee minutes:
 - Quality and Standards Committee – 15 July 2014
 - Finance & Planning Committee – 25 July 2014
 - Audit & Risk Committee – 2 June 2014 (Draft minutes were noted and the final approved version will be resubmitted for the next meeting)
 - Trustwide Engagement Group – 16 June 2014

BD/14/143 TDA Oversight Report

1. The Board received the TDA Oversight return submission for July 2014 for its approval.
2. It was **agreed** by the Board that that any future amendments to the sources of assurance will be highlighted and presented to the Board to note and approve.
3. The Board resolved to **APPROVE** this submission.

BD/14/144 Any other Business

1. None was noted.

(The business of the Board closed at 12.30pm)

Minutes Prepared for the Part 1 Trust Board dated 27th August 2014

Sponsored by the Chair

Agenda Item:

Serial:

Page 6 of 6