

Trust Board of Directors Part 1

DRAFT Minutes of the Trust Board of Directors meeting held in public on Wednesday 11 July 2018 at 14:00 at the Unison Centre, 130 Euston Road, London NW1 2AY

Present:	Marie Gabriel	Trust Chair
	Millie Banerjee	Non-Executive Director
	Ken Batty	Non-Executive Director
	Paul Calaminus	Chief Operating Officer and Deputy Chief Executive London
	Steven Course	Chief Financial Officer and Deputy Chief Executive Bedfordshire and Luton
	Mary Elford	Vice-Chair and Non-Executive Director
	Navina Evans	Chief Executive Officer
	Mason Fitzgerald	Executive Director of Planning and Performance
	Paul Gilluley	Chief Medical Officer
	Paul Hendrick	Non-Executive Director
	Jenny Kay	Non-Executive Director
	Lorraine Sunduza	Chief Nurse
	Robert Taylor	Non-Executive Director
	Tanya Carter	Director of HR (non-voting)
	Richard Fradgley	Director of Integrated Care (non-voting)
	Amar Shah	Chief Quality Officer (non-voting)
In attendance:	Agnes Adentan	Associate Director for Safeguarding Children
	Dr Nigel Ashurst	Assistant Medical Director, Kent and Medway NHS Social Care Partnership Trust
	Paul Binfield	Head of People Participation (item 3)
	Shirley Biro	Public Governor, Newham
	Janette Clark	Associate Director of Safeguarding Adults and Domestic Abuse
	Adrian Curwen	PRIDE researcher (item 3)
	Steve Gladwin	Associate Director of Communications
	Helen Greatorex	Chief Executive, Kent and Medway NHS Social Care Partnership Trust
	Richard Harwin	Health, Safety, Security and Emergency Planning Manager
	Elizabeth Holford	Corporate Minutes Taker(minutes)
	Cathy Lilley	Assistant Director of Corporate Governance
	Clare McKenna	Director of Nursing
	Marie Miller	Business Manager
	Edwin Ndlovu	Borough Director, Tower Hamlets
	Caroline Ogunsola	Staff Governor
	Rubina Shaikh	Public Governor, Bedford
	Sachin Thuraisingham	
	Konstantinos Tsamakis	Senior Trainee in Psychiatry, ELFT
	Hazel Watson	Public Governor, Newham
Apologies:	Kingsley Peter	Non-Executive Director
	Mohit Venkataram	Executive Director of Commercial Development &

The minutes are produced in the order of the agenda

1 Welcome and apologies for absence

- 1.1 Marie Gabriel welcomed all to the meeting, and apologies were noted as above.

On behalf of the Board, Marie warmly congratulated Lorraine Sunduza and Tanya Carter on their respective recent appointments as Chief Nurse and Director of HR.

Marie further congratulated all staff on achievement of 'Outstanding' in the recent CQC inspection; of special note, Forensic Services had been subject to a comprehensive review, and whose rating had increased from 'Good' to 'Outstanding'. She expressed her pride in ELFT and its staff, noting that the journey continues and there is no room for complacency.

2 Declarations of Interests

- 2.1 The Board's Register of Interests was noted.

3 Patient Story: PRIDE Research

- 3.1 Marie Gabriel welcomed Adrian Curwen, a service user researcher on the PRIDE project. The aim of PRIDE is to collect data on the relationship between people participation and recovery: *is there evidence that getting involved as a service user helps individual recovery?*

Supported by Paul Binfield, Adrian shared his experience of designing and implementing research as a service user. He emphasised the innovative and empowering nature of the research, highlighting that:

- Service users led the research, supported by Queen Mary University. A paper will be published in an academic journal
- PRIDE interviewed 15 service users who had been involved in the Trust's people participation activities for over one year to identify the benefits involvement had brought (there is some potential bias here, as service users who had 'dropped out' of participation are not represented in the data).
- Adrian received training in research and then trained other service users, for example, in how to phrase questions
- Having service users interviewing other service users breaks down barriers; people share views more readily than perhaps they would with a non-service user researcher.
- Interviews were wide ranging. Coding and thematic analysis of what people said was undertaken.

Adrian spoke about the value of being involved in research, as well as the themes that emerged from the research interviews including:

- People take part in people participation activities in order to 'give something back'
- Some people are motivated by curiosity and a wish to find out more about the Trust they have been treated in
- There are many benefits from participation, including social benefits, minimising stigma, providing structure to the week, a feeling of productivity, being valued and making a positive contribution, all of which have a positive impact on recovery.

Adrian shared that he personally had been enabled to move from being scared to speak to one person to speaking to a whole roomful. This illustrates how participation generates coping mechanisms and skills. He particularly highlighted the importance of the support from Paul Binfield and the People Participation Team.

Adrian shared some powerful quotes from the research:

- “people participation means I no longer feel I am in a hole filled with cement”.
- “ELFT has nailed PPI, nationally it is damned good and can teach others”.

The Board noted the following in their discussion

- That there were not many activities that are more helpful to service users than others as individuals are very different and there is no specific pattern
- The incredible benefits from having service users on interview panels and it is reassuring to know that this works two ways with benefits to both parties
- The range of actions in progress to further improve service user involvement; including, Linking teams with others who deliver people participation effectively, further extending the diversity of service users involved, reflecting the make-up of communities and providing training for involvement and extending this to other organisations such as CCGs.

Marie Gabriel thanked Adrian and Paul for their important work and generosity in sharing what has been learned.

4 Minutes of the Previous Meeting held in Public on 9 May 2018

- 4.1 The minutes of the meeting held on 9 May 2018 were **APPROVED** as an accurate record.

5 Action Log and Matters Arising from the Minutes

5.1 Action log

- Action Ref. 174: Date to be corrected to 5 May 2018. Action closed
- Action Ref. 210: Determine the scope of the report on safer staffing in the community and set a date for presenting it to the Board.
Action: Lorraine Sunduza
- Action Ref. 217: Agreed a dedicated staff member to work with families will be appointed. Report writing will be less clinical, with a focus on explaining to families what actually happened and future preventions.

5.2 Matters Arising

- Para. 8.2: Check availability of ethnicity data for unexpected deaths
Action: Paul Calaminus
- Para. 9.2: Agreed to present data on suicides using numbers rather than percentages to provide clarity.
- Para. 19.1: Research Strategy which is being updated to reflect the overall Trust Strategy to be presented at September Board meeting.
Action: Paul Gilluley
- Para. 20: Provide fuller minutes in response to questions from Governors.
Action: Cathy Lilley

6 Chair's Report

Marie Gabriel summarised highlights from her report. In discussion, the Board noted the following:

6.1 Council of Governors

The Council's strategic discussion on the staff survey had been incorporated into the report on the meeting agenda.

Under Any Other Business the Council has focused on how to improve the experience of individual care and the Trust had agreed to adopt the 'hello my name is ...' approach.

Council Governor Appointments (Deputy Chair and Assistant Deputy Chair): Elections have been held but the appointments are subject to formal ratification by the Council of Governors at its meeting on 18 July. Confirmation of the names will be advised thereafter.

6.3 Themes from NED Visits

- Consideration to be given as to how to best maximise the intelligence gained from these visits.

Action: Mary Elford, Lorraine Sunduza

- On Nurse Leadership, Lorraine Sunduza provided examples of action taken by ELFT to strengthen nurse leadership: prescribing, nurse consultants, advanced nurse practitioners, and a further update will be provided at a future meeting.

Action: Lorraine Sunduza

6.4 NED visit to Forensic Services: It was clear why Forensic services have moved from being rated 'Good' to 'Outstanding'. Access to activities has increased, there was greater service user involvement; reception areas are very friendly and the recovery college effective. Areas to be further addressed include gaps in staffing, CRES pressures and cancellation of escorted leave. There was a good service user suggestion that a service users led neighbourhood café could be opened, which would also help break down stigma.

6.5 Five-Year NHS Funding Settlement

Ian Dalton (Chief Executive of NHS Improvement) had advised of a shift in expectations on the NHS in response to increase in funding. ELFT is well-placed to respond, contingent on mutual support with wider partners.

It was noted that plans for the allocation of additional funding for mental health services would be advised via the December 2018 plan refresh process.

6.6 Bedfordshire & Luton

Mary Elford provided an update on the activities Bedfordshire and Luton:

- Work is in progress to develop locally specific objectives and action plans in response to the Trust's strategy. This is being taken forward by the Bedfordshire & Luton Strategic Delivery Group
- Workforce modelling is a key strand, aimed at strengthened recruitment and retention. Plans will address findings from the staff survey
- There is a need to communicate ELFT's plans effectively with stakeholders
- When appointed, the new Associate Non-Executive Director for Bedfordshire & Luton will be invited to the next Board meeting.

Action: Cathy Lilley

6.7 The Board **RECEIVED** and **NOTED** the report.

7 Chief Executive's Report

Navina Evans highlighted key developments since the last meeting as set out in her report.

7.1 Retention of 'Outstanding' rating from CQC

The Board noted that:

- The CQC had inspected selected core services (Forensics, and Learning Disability services in Bedfordshire, Tower Hamlets and Hackney) and had conducted a 'Well-Led' review. Their report was published at the end of June 2018
- There were no 'must do' recommendations
- There were a number of 'should do' recommendations, all of which have been allocated 'leads' for action planning
- Action includes continued work on integrated strategies, workforce planning, statutory and mandatory training, resolving contracting issues and on Peer Support Workers
- The Quality Assurance Committee (QAC) will approve and monitor implementation of action plans
- Although the rating of 'Outstanding' is good news and a tribute to the hard work and dedication of staff, it is acknowledged that there is still work to do to improve and reduce variations in quality.

7.2 Chair's Honour: CBE

Members of the Board unanimously expressed their pride in Marie Gabriel in being honoured in the Queen's birthday list commenting that the award is highly deserved, reflecting her tireless work on behalf of the population served by ELFT.

Navina Evans added to the congratulations noting that the Honour acknowledges Marie's exceptional personal achievements, her role as a model for women from a BAME background and in giving marginal and vulnerable people a voice.

Marie thanked the Board for their congratulations and for their support highlighting that no-one can achieve success on their own.

7.3 Barnet Speech and Language Therapy Services

Navina Evans expressed thanks to staff and colleagues for four years of very good collaborative working in Barnet. A difficult decision has been made to 'let go' of the Speech and Language Therapy service, reflecting the Trust's new strategy.

7.4 City of London Homeless Intervention Hub

ELFT is part of a collaborative initiative to provide rehab and emergency support to homeless people, working in conjunction with the police, local authority, St Mungo's and Westminster Drug project. It will be possible to serve an 'Intervention notice' to encourage people to access help. Clarity will be sought on whether this notice is compulsory.

Action: Paul Calaminus

7.5 Other developments noted by the Board included:

- The renaming of Trust Headquarters as Robert Dolan House

- A Freedom to Speak Up self-review tool to assess governance and assurance
- Transfer from Homerton Hospital into ELFT of clinical staff members of the Hackney Integrated Learning Disability Team.

7.6 The Board **RECEIVED** and **NOTED** the report.

8 National Staff Survey 2017 Results

8.1 Marie Gabriel introduced the report, noting the varying nature of the results overall.

The Board noted that whilst there were positive findings, urgent action was being taken in the key areas of bullying and harassment and discrimination. A first step has been to talk to staff to enable concerns to be addressed in the Trust strategy through the staff wellbeing plan

Board members discussed possible explanations for high reported rates of bullying and harassment, noting that previous actions had not resulted with the intended impact and a new approach is needed. In discussion, the Board noted that:

- Although staff may have varying interpretations of bullying and manager support, there is a clear need to recognise their experience and act in response.
- Targets and constrained NHS resources may contribute to staff feelings about their job
- Decline in reported incidents may reflect a decline in staff engagement and if so, could impact patient safety; however staff engagement is the Trust's biggest asset.
- Speaking Up initiatives are beginning to help
- There may be a link between bullying and harassment and discrimination so this should be considered
- Council of Governors have received a report on the findings and will inform strategy.

The Board agreed that a regular update and monitoring report to include discrimination would be presented to the Board's Appointments & Remuneration Committee.

8.2 The Board **RECEIVED** and **NOTED** the report and **AGREED** that:

- A communication to staff outlining the action being taken in response to the results would be organised with continual communication on progress
- Regular update and monitoring reports would be presented to the Appointments & Remuneration Committee.

Action: Tanya Carter/Mason Fitzgerald

9 Safeguarding Annual Report 2017-18

9.1 Lorraine Sunduza presented the report.

The Board noted:

- Changed leadership arrangements are in place in line with Trust expansion and to align with partnership arrangements
- Key concerns include capacity (expertise in safeguarding); implementing 'Think Family'; action to reinforce policy on making safeguarding personal; and domestic violence

- NHS organisations and local authorities have similar concerns and need consistent information
- The need to seek assurance with regard to safeguarding of Looked After Children who are placed outside the local area. Consideration will be given to the benefits of stating a formal Trust position

Action: Lorraine Sunduza

- The programme in place to develop enhanced knowledge and skills through recruiting to leadership posts in learning disability services

The Board also noted that with regards to suspected or actual organisational abuse, the lead lies with local authorities who report outcomes in Local Safeguarding Reports.

Marie Gabriel expressed thanks for the comprehensive report.

9.2 The Board **RECEIVED** and **NOTED** the report.

10 Annual Serious Incidents Report 2017-18

10.1 Paul Gilluley introduced the report.

The Board noted that:

- Overall incidents had declined in 2017-18 compared to the previous year but had risen in Bedfordshire and Tower Hamlets, with new types of incidents occurring
- Inconsistent processes, (risk assessment, referral and discharge processes), emerge as a root cause following the triangulation of data
- Action includes a Trust-wide 'learning lessons' system and in-depth analysis of root causes in Bedfordshire and Tower Hamlets
- The Board was assured that the in-depth review of patient safety processes being undertaken would address some of the concerns highlighted and those raised in the recent Gosport Report findings. The review included a focus on systematic RCAs, involvement of families, and the identification of themes, learning and monitoring of actions.

Responding to discussions, Navina Evans confirmed that a review of patient safety management in the context of the new Trust strategy would be presented at a future meeting.

Action: Paul Gilluley

10.2 The Board **RECEIVED** and **NOTED** the report.

11 Quality Report

11.1 Amar Shah introduced the report which presented findings from analysis of themes from Non-Executive Director visits to services.

In discussion, the Board noted that:

- IT is a major theme. IT improvement is now 'business as usual', supported by a digital programme board which acts on local directorate priorities
- The thematic report is unique and much to be welcomed
- The interplay between improvement ideas and the Trust's work on values to maximise benefits will be covered in the integrated performance report
- Full geographic coverage has been achieved for QI. The priority is to further

- improve co-production and adjust to fit the new Trust strategy
- Disaggregation is needed to distinguish community health services from community mental health services.

11.2 The Board **RECEIVED** and **NOTED** the report.

12 Strategic Activity

12.1 Mason Fitzgerald presented the report.

In response to the Gosport findings, the Board noted the emphasis in ELFT's new strategy on staff speaking up and family involvement.

The Board further noted, in relation to monitoring the Trust strategy:

- Measures would be developed specific to community health and learning disability services (e.g. enablement/recovery)
- That there would be benefits in itemising what is specific in ELFT's strategy, what is shared in common with partners' strategies and links with population health networks
- An update report would be provided on a six monthly basis taking account of the above points.

Action: Mason Fitzgerald

12.2 The Board **RECEIVED** and **NOTED** the report.

13 Integrated Performance and Compliance Report, including Board Assurance Framework

13.1 Mason Fitzgerald introduced the report.

The Board welcomed the new format, noting that it was work in progress and presentational aspects would be addressed.

In discussion, the Board further noted that:

- Service user participation would form a focus for 2018/19
- Performance in 7-day follow up had improved to 90% in May 2018
- Targets for population health are required in Bedfordshire contracts
- Bullying and harassment to be included in future reports.

Referring to the report, the Board also agreed that:

- Millie Banerjee reiterated the need for narrative (see 10.1) and requested the language used in the reports to be accessible and consistent to enable Board members to gauge appropriate level of concern

Action: Mason Fitzgerald

- The value of graphs would be increased if priority targets were agreed and reporting aligned to these
- Future reports would include length of stay and out of area placements, bullying and harassment actions update, and mitigating actions

Action: Mason Fitzgerald

- Consideration to be given to a Board development session to review the consistent use of terminology so that trends can be assessed and controls designed

Action: Mason Fitzgerald/Amar Shah

- Measures should be mapped to Committees.

Action: Cathy Lilley

13.2 Finance Reporting

Steven Course provided a verbal update on finance at end of month 2, advising that the FBIC had received and discussed an in-depth report at its July 2018 meeting:

- There is an adverse variance in surplus of £409k and a £6m CRES gap
- Income was under by £160k primarily due to shortfall in sales of bed spare capacity
- The cash position is strong at £72k.
- NHS I has revised the Control Total downwards, to £5.4m, taking provider sustainability funding into account.
- £2m unidentified CRES remains.

- 13.3 In discussion, the Board agreed to reinstate a more detailed finance report, enabling further Board level scrutiny following consideration by FBIC, such as on bank and agency spend, progress with CRES plans, etc.

Action: Steven Course

The Board **RECEIVED** and **NOTED** the report.

14 Annual Information Governance Update

- 14.1 Mason Fitzgerald presented the report and highlighted the replacement of the Information Governance Toolkit with a Data Security and Protection Toolkit for which the Quality Assurance Committee will have overall responsibility.

The Board would be provided with further information on factors affecting preparedness to meet GDPRs and ELFT's comparative position as required. Further clarification regarding the Trust's position in relation to the benchmarking information to be sought from Internal Audit.

Action: Mason Fitzgerald

- 14.2 The Board **RECEIVED** and **NOTED** the report.

15 Emergency Planning Annual Report 2017-18

- 15.1 Paul Calaminus introduced the report.

The Board noted that:

- Work is in progress to make business continuity plans more robust
- Director on call response has only exceeded 10 minutes on three occasions in the past year.

On behalf of the Board Marie Gabriel asked that the minutes noted their thanks to Richard Harwin, Health, Safety, Security & Emergency Planning Manager, and the team for ensuring that the Trust has robust plans and performs consistently well.

- 15.2 The Board **RECEIVED** and **NOTED** the report.

16 Safer Staffing Six-Monthly Report

- 16.1 Lorraine Sunduza introduced the report.

The Board requested that that future reports include:

- Comparative information on safer staffing in community services
- Explanations on data and methodology, for example derivation and meaning of care hour figures
- Data for the Coborn Unit in line with actual staff booking processes which reflect patient need
- Narrative which complements the data to enable effective assurance.

Action: Lorraine Sunduza

16.2 The Board **RECEIVED** and **NOTED** the report.

17 Audit Committee Annual Report

17.1 Paul Hendrick presented the report.

The Board noted that future surveys for appraising Committee experience and effectiveness would include the requirement for mandatory comments on the ratings given.

17.2 The Board **RECEIVED** and **NOTED** the report.

18 Annual Review of the Terms of References of the Board Reporting Committees:

- a. **Appointments and Remuneration Committee**
- b. **Audit Committee**
- c. **Finance, Business and Investment Committee**
- d. **Quality Assurance Committee**
- e. **People Participation Committee**
- f. **Mental Health Act Committee**

18.1 Marie Gabriel sought approval for terms of the terms of reference

18.2 The Board **APPROVED** the terms of reference for each reporting Committee subject to amendments for the People Participation Committee to bring into line with the structure other Committee's terms of reference.

Action: Marie Gabriel/Cathy Lilley

19 Reporting Committees Chair Reports:

- a. **Audit Committee: 22 May 2018 (verbal) and approved minutes 23 April 2018**
- b. **Mental Health Act Committee: 8 June 2018 and approved minutes 15 February 2018**
- c. **People Participation Committee: 21 June 2018 and approved minutes 15 March 2018**
- d. **Quality Assurance Committee: 25 June 2018 and approved minutes 19 April 2018**

19.1 The Board noted the minutes and verbal reports for Reporting Committees.

The Board noted that they needed to be mindful of the national Mental Health Act review and how that will affect the business of the Mental Health Act Committee.

The Board considered the desirability of an agreed Trust response and confirmed that the senior executive team and the Chair were responding to present our Trust

view but also confirmed that individuals were able to participate to give their personal view.

20 Any Other Urgent Business

20.1 There was none.

21 Questions from the Public

21.1 There were none.

22 Dates of Future Trust Board Meetings

- Wednesday 12 September 2018
- Wednesday 14 November 2018
- Wednesday 9 January 2019
- Wednesday 13 March 2019

The meeting closed at 16:30.

draft