

Board of Directors - Meeting Report

A public briefing from the meeting of the Board of Directors held on 26 November 2009.

26th Nov 2009

Lincolnshire Partnership NHS Foundation Trust

Volume 1, Issue 7

Roles and Responsibilities of the Chairman and Chief Executive

The Board received a report that sets out the respective roles of the Chairman and Chief Executive.

A report of this type is recommended by the Code of Governance produced by Monitor.

Members of the Board considered it helpful to have roles and responsibilities set out as clearly as this, and have asked the Trust Secretary to produce a similar report setting out the roles and responsibilities of the respective Boards and the Executive and Non-Executive Directors.

The paper will be available on the Trust's public website

Integrated Governance Q2 Report

The Board carefully considered the report, including the feedback from the governors that would be forwarded to the Care Quality Commission, as part of the Trust's mid-year return. As previously reported the medicines management standard had not been met in the quarter but it is now being met.

Trust Board approves the next planning stage for the £15 million Rehabilitation Scheme

The Board received a number of papers confirming the Outline Business Case and giving approval for the project team to progress towards the Full Business Case for the development of the Rehabilitation Scheme on the Long Leys site.

The Board received a report on the tendering process, used to identify the Principle Supply Chain Partner for the Scheme. Having considered the report the Board approved the recommendation to appoint Costain.

The Board noted the project arrangements and confirmed the Board level membership of the Project Board.

Quality and Risk

Quarterly Quality Report

The Board received the a report on the various quality and risk initiatives throughout the Trust. The Board noted the detailed work being undertaken by the Clinical Quality and Risk Committee of the Board. In particular the Mental Health In-patient survey was discussed. The Board were pleased to hear about the areas in which the Trust is performing above average and confirmed that the action plan to enhance other areas would be monitored by the Board.

Healthcare Acquired Infection Report

The Board received the report which recorded an outbreak of diarrhoea and vomiting that had occurred in an older adult ward that had resulted in 9 patients and 6 staff experiencing symptoms. The Board noted that the infection control policies had been followed and

the outbreak had been contained.

Risk Register

The Board reviewed the monthly risk register. It was noted that the implementation of the Maracis clinical information system remained a significant risk. Staff throughout the organisation were working hard to implement the system and where necessary additional training is being provided.

The Board noted that a multiagency report into the circumstances surrounding alleged abuse in a family who had lived in Sheffield and in Lincolnshire was due for publication in early 2010. This report may contain some recommendations for the Trust.

The Board also commissioned an investigation into an accidental death that has occurred.

Chief Executive's Report

The Chief Executive reported on the progress being made with the latest round of Chief Executive's roadshows and the launch of the new mission, vision and values. He reported that a number of useful messages were coming through and some repeated themes being identified. He also advised the Board about the introduction of the "What if we" e-mail address to enable staff to submit further ideas.

The Chief Executive advised the Board that the NHS East Midlands had appointed Mr Worrall, the former CE of Newark and Sherwood Hospitals as the new CE for the Quality, Innovation, Productivity and Prevention (QIPPP) initiative.

He also advised the Board of the contents of a recent NHS Lincolnshire board paper on developing greater integration of services between providers. The board agreed to keep in close contact with NHS Lincolnshire regarding any future plans.

The Chief Executive brought to the Board's attention a new risk in relation to the number of Approved Mental Health Practitioners. It had not been possible to train as many as was anticipated. Work was underway to identify a resolution to the shortage.

Relationship Management Strategy

The Trust currently has a number of strategies, plans and practices in place to engage and communicate with a variety of service users, carers, members, staff, stakeholders, business partners, other agencies, the media and the public.

The Board received a report on the development of a relationship management strategy that would seek to draw together all of the existing practices and build on and improve relationships between the Trust and all parties. It was noted that significant work was now underway to develop the plans that would ensure the delivery of this strategy.

Monitor's Response to the Trust's "Downside Scenario" Plan

The Board received a letter from Monitor confirming that, in their opinion, the Trust had given sufficient consideration to the downside scenario. The Board would now be implementing the plans.

Board of Directors

The next meeting will be held on 17 December 2009.

Business Matters

The Board of Directors received updates on a number of potential new growth areas for IAPT services. A third area of Derbyshire as well as Bassetlaw were currently being tendered. The

Trust has responded to the invitation to tender to be the provider of these services.

The Chief Executive advised the Board on the positive comments that

had been received in relation to the quality of service offered to MOD patients. The MOD had asked that we make a second bed available to this service. The Board agreed to do so.

Reports and Updates

Reports from Committees

The Board received a report on the work undertaken by the Mental Health Act Managers Committee

Performance Report

The Board received the performance report and noted the overall good performance across services. The psychological therapies waiting times remain of concern, with work underway with NHS Lincolnshire to manage the levels of demand.

Equality and Diversity Report

The Board were pleased to hear about the good

progress that has been made and the clear plan demonstrating the way forward.

Finance and cost improvement plan reports.

The Trust's current financial position is a surplus of £800,000. This is expected to be the same at the end of the financial year. This is £300,000 less than the original plan as a result of higher than planned staffing costs, community care costs and less than planned income for the dementia services.

The cost improvement plan is currently £167,000 behind target, this is being kept under review.

Flu Preparedness

The Trust is continuing to monitor the situation. Staff vaccinations are underway.

Dynamic Psychotherapy Services

The Director of Operations presented a report that the Board had requested to benchmark the waiting times for our service with that of other trusts. The report identified that making comparisons was extremely difficult as services were delivered in different ways in each trust. What was evident was that the Trust has made good progress in reducing waiting times for this service.

Glossary

Approved Mental Health Practitioners— The term AMHP is used to describe a mental health practitioner who has undertaken additional training to make assessments that enable the application of sections of the Mental Health Act to individual service users.

Care Quality Commission (CQC) – The Regulator who replaced the Healthcare Commission, the Commission for Social Care Inspection and the Mental Health Act Commission on 1 April 2009.

Declaration - A self assessment declaration made to Monitor to indicate a cause for concern within the Trust.

Delayed Transfer of Care (DToC) - When a service user is ready to leave one of the Trust's in-patient facilities and no suitable service provision is available for them to move on to, this creates a DToC.

Exception Report - A report received by the Board in addition to the standard reports and usually written to bring the Board's attention to matters of specific concern

Financial Risk Rating (FRR) – A score calculated by Monitor to reflect a foundation trust's financial situation. This takes account of a range of financial measures. 5 is the highest possible score

IAPT – Improving Access to Psychological Therapies

Mental Health Act (MHA) Managers Committee – A committee of the Board of Directors, responsible for the application of the Mental Health Act within the Trust

Monitor – The independent regulator of foundation trusts

NHSLA—National Health Service Litigation Authority - An organisation that provides insurance for NHS organisation. It inspects organisations to assess the level of risk, and adjusts premiums accordingly.