



Minutes of Board of Directors Meeting – held in Public

At 1:00pm on Wednesday 29th May 2019
At Boardroom, Redesmere

Present	<p>Mike Maier Sheena Cumiskey Tim Welch Avril Devaney</p> <p>Dr Anushta Sivananthan</p> <p>Dr Faouzi Alam</p> <p>David Harris Rebecca Burke-Sharples Andrea Campbell Edward Jenner Jim O'Connor</p>	<p>Chairman Chief Executive Director of Finance Director of Nursing, Therapies and Patient Partnership Joint Medical Director, Quality, Compliance and Assurance Joint Medical Director, Effectiveness, Medical Education and Medical Workforce & Caldicott Guardian Director of People and Organisational Development Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director</p>
In attendance	<p>Louise Brereton Rachel McLoughlin Peter Ashley-Mudie Keith Miller Justin Pidcock Cathy Walsh</p> <p>Philip Makin Paul Hughes</p>	<p>Head of Corporate Affairs Consultant Psychiatrist Governor Governor Associate Director of Operations (for item 19/20/29) Associate Director: Patient Experience (for item 19/20/28) Equality and Diversity Officer (for item 19/20/28) Domestic Assistant (for item 19/20/38)</p>
Apologies	<p>Andy Styring Lucy Crumplin</p>	<p>Director of Operations Non-Executive Director</p>

Ref	Title of item	Action
	Meeting governance	
19/20/13	<p>Welcome, apologies and quoracy</p> <p>The Chair welcomed all to the meeting. The meeting was confirmed as quorate. Apologies were noted from Lucy Crumplin and Andy Styring.</p>	
19/20/14	<p>Declarations of interest</p> <p>None was declared.</p>	
19/20/15	<p>Minutes of the previous meeting held 27 March 2019</p> <p>The minutes of the meeting held 27 March 2019 were reviewed. A typographical amendment was required. Subject to this amendment, the minutes of the meeting held 27 March 2019 were approved as a correct record.</p>	

Ref	Title of item	Action
19/20/16	<p>Matters arising and action points</p> <p>The action points were reviewed. Action 18/19/155 remains open but will be closed shortly. All other actions were closed or in progress.</p>	
19/20/17	<p>2019/20 Cycle of Business</p> <p>The business cycle for 2019/20 was reviewed and noted.</p>	
19/20/18	<p>Chair's announcements</p> <p>The Chairman announced the following:</p> <p>Ancora House Ancora House were announced as winners in the inpatient care category at this year's National Children and Young People's Mental Health Awards, where they were praised for including young people and their families/carers in all stages of development, from initial design through to continued improvement of services.</p> <p>Pharmacy Team Our Pharmacy service has been shortlisted in five separate categories at the Health Service Journal (HSJ) Patient Safety Awards for its pioneering new initiative enhancing safe and effective communication with community pharmacies.</p> <p>International Nurses day As part of International Nurses', the Trust hosted a 'Bring your future nurse to work day' where budding young nurses came along to meet some of those who work in the profession and learnt all about how rewarding a career in healthcare can be.</p> <p>Wirral Birch Centre opening The Trust welcomed chief nursing officer for England Ruth May to an opening ceremony for our Wirral Birch Centre. She also honoured Avril Devaney, Director of Nursing, Therapies and Patient Partnerships with a special nursing award.</p> <p>Candid conference The first annual conference of CANDDID (Centre of Autism, Neuro-developmental Disorders and Intellectual Disability) took place last week in Chester. Over 175 delegates attended with speeches from colleagues, partners and other professionals.</p>	
19/20/19	<p>Chief Executive's announcements</p> <p>Tim Welch briefed the Board and those observing on the proceedings in the closed meeting. An overview was given on the items discussed.</p> <p>Sheena Cumiskey updated on the following:</p> <p>Emergency planning The Trust has achieved the emergency planning standards core standards full compliance. Thanks were extended to Tim Jenkins and his team.</p>	

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	<p>Recent awards The Trust was highly commended in the HSJ award for effective communications and the spread of best practice via the Big Book of Best Practice. This was highly commended from a field of 14 nominees.</p> <p>Poppy factory and Wirral IPS project The Trust is involved in a three year project lead by the Poppy Factory supporting veterans into employment, while supporting them with managing physical and mental health conditions.</p> <p>NICHE report The NICHE report, an independent investigation into the care and treatment of a mental health service user (MN) in Cheshire was published last month, thereby concluding the investigation process.</p>	
Reporting from Committees and Matters of Governance		
19/20/20	<p>Audit Committee:</p> <ul style="list-style-type: none"> • a. Chair’s report of the Audit Committee held 7 May 2019 • b. 2019/20 Terms of Reference • c. 2018/19 Annual Report <p>Edward Jenner provided an overview of the business conducted at the Audit Committee meeting held 7 May 2019. The terms of reference and the annual report 2018/19 were reviewed.</p> <p>The Board of Directors noted the Chair’s report of 7 May and the annual report 2018/19. The terms of reference were approved.</p>	
19/20/21	<p>Quality Committee:</p> <ul style="list-style-type: none"> • Chair’s Report of the Quality Committee held 8 May 2019 • 2019/20 Terms of Reference • 2018/19 Committee effectiveness review <p>Dr Jim O’Connor briefed on proceedings at the last Quality Committee meeting held 8 May 2019. Levels of compliance with the process with regards to the use of mental health law has been escalated and is now on the risk register as a risk in-scope.</p> <p>The Board of Directors noted the Chair’s Report of 7 May and the Committee effectiveness review 2018/19. The terms of reference were approved.</p>	
19/20/22	<p>Statutory Registers:</p> <ul style="list-style-type: none"> a. Directors interests and gifts and hospitality b. Governors interests <p>The 2018/19 Directors’ registers of interests and gifts and hospitality were reviewed and noted.</p> <p>The 2018/19 Council of Governors’ register of interests were reviewed and noted.</p>	

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19/20/23	<p>Chair and Chief Executive: Division of Responsibilities</p> <p>The responsibilities of the Chief Executive and the Chair were reviewed in line with Code of Governance and Corporate Governance Manual requirements. There were no amendments proposed from the 2018 version.</p> <p>The Board of Directors noted the Division of Responsibilities for the Chair and the Chief Executive.</p>	
19/20/24	<p>Board Assurance Framework and Strategic Risk Register</p> <p>Dr Anushta Sivananthan presented the board assurance framework and the strategic risk register and highlighted the following points:</p> <ul style="list-style-type: none"> • There are currently 9 strategic risks, 2 rated red and 7 rated amber. • There 2 risks in scope – 1 rated red and 1 rated amber <p>Dr Sivananthan commented on the risk in-scope on mixed sex accommodation and it was noted that compliance is monitored through care group governance, in line with the CQC action plan.</p> <p>A risk is also in-scope regarding mental health law process breaches. The Clinical Standards and Practice sub-committee are considering actions to tackle this issue and will oversee the risk treatment now in development.</p> <p>Risk 10 regarding levels of acute bed usage has achieved an OPEL 1 score (escalation system) for a sustained period therefore the risk has been de-escalated and a lower risk score of 12 has been modelled.</p> <p>Risk 12 regarding data quality weaknesses has been escalated to a risk score of 16 reflecting the qualification of the Quality Account audit findings for the EIP indicator. The risk treatment plan is under development but will include the recommendations from the external auditor.</p> <p>A discussion followed. Non-Executive Directors commented on the good evidence of the dynamism of the risk register evidenced by the movement of risks in the reporting period.</p> <p>The Board of Directors approved the amendments to the board assurance framework and strategic risks register.</p>	
19/20/25	<p>Safer Staffing (January – April 2019)</p> <p>Avril Devaney introduced the reports and highlighted the following issues:</p> <ul style="list-style-type: none"> • Two reports are presented at this time due to information completeness issues earlier this year. • Bollin ward is experiencing some staffing challenges due to increased vacancies and sickness. The staffing levels were safe as additional staff have assisted. However, this is not reflected in this report as it does not include 	

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	<p>AHP staffing and others who provide care for periods within a shift. The situation is under review by the project board overseeing the central and east Cheshire redesign work.</p> <p>The Board of Directors noted the report.</p>	
19/20/26	<p>Guardian of Safe Working</p> <p>Dr Faouzi Alam presented the Q4 2018/19 Guardian of Safe Working report. This was presented to the Board at this time for completeness and to enable the Board to return to quarterly reporting. There were no areas of concern to highlight.</p> <p>The Board of Directors noted the report</p>	
19/20/27	<p>Learning from Experience report</p> <p>Avril Devaney presented the report and reminded Board members that they will be able to access the full Learning from Experience report considered by the Quality Committee to provide context as requested.</p> <p>Avril Devaney highlighted the following points:</p> <ul style="list-style-type: none"> • There was a positive increase in the numbers of reported incidents in the period, with around 500 more incidents reported. • Work is progressing with community services to ensure low and no harm incidents are reported. This is having some positive effects on overall reporting numbers. • There was an increase in staff assaults, with particular increases on certain wards, including Greenways. This relates to one patient with challenging behaviour. • 302 case records were reviewed as part of the 'Learning from Deaths' requirements, amounting to 80% of the overall cases in the trimester period. • Ward huddles are being used positively in services to focus on safety and in particular to mitigate risk of falls. • This trimester reported an increase in complaints with communication issues being a particular theme. This will continue to be monitored. • A piece of work will be taken forward to review the national CQC report on the first year of 'Learning from Deaths'. A self-assessment and gap analysis will be undertaken and an improvement plan developed. <p>Rebecca Burke-Sharples queried whether the increased number of incidents reported by the Neighbour Care Group was due to the increased impetus on incident reporting. Avril Devaney confirmed this was the case.</p> <p>Andrea Campbell queried the definition of 'unwarranted restrictive practice' and the practices included therein. It was confirmed that this included restraint, seclusion and rapid tranquilisation but that these issues were defined on an</p>	

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	<p>individual basis. The Board were informed that the BILD and positive behaviour support principles currently being successfully utilised in learning disability services are being reviewed to see if they could be replicated in acute mental health care.</p> <p>Dr Anushta Sivananthan extended her thanks to staff for their proactive approach to reporting incidents and understanding the need to ensure that this includes the incidents of low or no harm.</p> <p>The Board of Directors noted the report</p>	
19/20/28	<p>Operational Plan Dashboard: update on 2019/20 process</p> <p>Tim Welch advised Board members that following discussions at the February 2019 Board Seminar where consideration was given to areas of performance the Board wishes to focus on, work continues to develop a dashboard to respond to these requirements. It is intended that this work will be concluded to enable the dashboard to be in place to report from the July 2019 Board meeting.</p> <p>Tim Welch confirmed there were no operational performance matters to escalate to the Board at present.</p> <p>The Board of Directors noted the report</p> <p>(Cathy Walsh, Philip Makin and Paul Hughes joined the meeting)</p>	
19/20/29	<p>Workforce Disability Equality Standard report</p> <p>The Chair welcomed Cathy Walsh, Philip Makin and Paul Hughes to the meeting.</p> <p>The workforce disability standard report was presented. There is a need for the organisation to be more explicit about the offer to potential staff who have disabilities so they are aware of the support available to them to help them in their roles.</p> <p>Cathy Walsh introduced Paul Hughes, a Domestic Assistant at CWP who provided an overview of his experiences as a member of staff with disabilities.</p> <p>Following this, a number of issues were raised. These included:</p> <ul style="list-style-type: none"> • The development of a staff passport to enable staff with disabilities to progress opportunities and the development of staff networks to enable support and discussions between staff with disabilities. • The need for even better line management support for staff with disabilities and to ensure support levels are agreed during the induction period of new staff and at regular intervals in future. • CWP's desire to be an organisation of choice for disabled people seeking employment and the need to connect more with existing staff to understand their 	

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	<p>experiences.</p> <p>Philip Makin advised that from 2019, there are obligations from the Trust in line with the disability equality standards and that the initiatives discussed all contribute towards the Trust meeting these requirements.</p> <p>Providing context to the current position, Philip Makin advised that 20% of the CWP workforce state that they have a disability in the staff survey, however only 4% is recorded on ESR. This requires further exploration and would report back to the Board as part of future reporting on equality and diversity matters later in the year.</p> <p>Avril Devaney extended thanks to Cathy and her team for the progress made in this area and within the equality and diversity networks. It was noted how positive the staff report was.</p> <p>The Board of Directors noted the report.</p> <p>(Justin Pidcock joined the meeting, Cathy Walsh, Philip Makin and Paul Hughes left the meeting)</p>	
19/20/30	<p>Central and East Cheshire redesign progress report</p> <p>The Chair welcomed Justin Pidcock to the meeting. Justin provided Board members with a reminder of the key elements of the central and east Cheshire redesign project, following the approval of option2 plus at the consultation stage.</p> <p>An overview of the work completed to date was provided. This included:</p> <ul style="list-style-type: none"> • Planning approvals have been submitted and approved for extensions to CARS ward, Macclesfield Hospital site and Limewalk House, Macclesfield. • Building user groups for both schemes including service user representation have been established. • Tenders have been obtained for construction works, with post tender negotiation and appointment of contractor to enable mobilisation. This is due to commence works in late May 2019. • 18 rehabilitation service beds have been relocated to Maple ward, Bowmere. • A comprehensive engagement programme is in place. <p>Reporting on the work currently ongoing, Justin Pidcock informed the Board that this included:</p> <ul style="list-style-type: none"> • Delivery of an OD programme to prepare staff for the new model of care including a review of IT equipment to better enable agile working, particularly in this geographical area. • ECT capacity and demand modelling to inform the new staffing model. • A specialised induction programme for CRHT staff including OD and cultural development alongside clinical informed by a training gap analysis. 	

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	<ul style="list-style-type: none"> <li data-bbox="416 114 1211 181">• A transition plan is in place to transfer the Millbrook building to the Christie Hospital. <p data-bbox="368 217 1211 414">Commenting on the staffing impacts of the changes, Justin Pidcock advised that the management of change process is still ongoing. 30 staff were displaced by the redesign, however there has only been one compulsory redundancy and two voluntary redundancies. These processes will complete over the next few months.</p> <p data-bbox="368 450 1211 584">Justin Pidcock advised that the seclusion suite originally planned in the redeveloped site has now been withdrawn from the plans as recent data shows there is no requirement for a specific area now.</p> <p data-bbox="368 620 1211 920">Reporting on programme costs, Justin Pidcock advised that there has been a slight increase in gross project costs. There has also been some slippage in the timeline due to tenders coming in over the pre-tender estimated costs. These issues do not pose any significant risk to the overall programme delivery, however the increased tender costs will be reported back to the Operational Committee through the capital plan update which requires resubmission due to recent NHS Improvement requirements.</p> <p data-bbox="368 956 1211 1193">Dr Anushta Sivananthan advised that there has been significant clinical oversight and underpinning work to implement the new model of care which is monitored by the Programme Board. It has taken a significant amount of work to progress the whole programme. The removal of the seclusion suite from the planned works identifies how the Trust is moving forward and placing emphasis on positive behavioural support approaches.</p> <p data-bbox="368 1229 1211 1364">Dr Jim O'Connor queried the ongoing staff support offer during the change. David Harris advised that there has been a huge emphasis on the human element of the change, including dedicated OD support working on this project alone.</p> <p data-bbox="368 1400 1211 1632">Sheena Cumiskey extended thanks to all the teams involved in the project. She raised some emerging issues with the development of crisis beds which are slightly behind schedule due to commissioning issues. CWP has offered support to the CCG on this issue. Board members agreed with the approach suggested by Sheena Cumiskey that this should be escalated to the CCG senior management for resolution.</p> <p data-bbox="368 1668 1211 1968">A discussion followed regarding post project learning from a quality improvement perspective, to inform future redesigns. David Harris commented that the OD team are using case studies to help develop a more consistent approach to management of change. Dr Sivananthan commented that there is no Trust standard operating process for relocating services so this gap has informed the need begin developing one. This would include both the technical and the human elements of a change at this scale.</p> <p data-bbox="368 2004 1211 2098">Dr Jim O'Connor queried whether the crisis beds issues required escalation to the strategic the risk register. Dr Sivananthan confirmed that the issue was included on the</p>	

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	<p>Project Board risk register.</p> <p>The Board of Directors noted the report.</p> <p>(Justin Pidcock left the meeting)</p>	
19/20/31	<p>CWP Forward View: Care Group priorities 2019/20</p> <p>Tim Welch presented the report setting out the final overview of Care Group priorities for 2019/20, following the work undertaken at the February Board seminar with Care Group colleagues. The process has involved a period of refinement to identify the most significant projects to progress in line with the resources available. These are monitored via the Programme Support Office process. Some priorities discussed by Care Groups are being taken forward as 'business as usual' reflecting the developing autonomy and maturity of the Care Groups.</p> <p>The Board of Directors noted the report.</p>	
19/20/32	<p>Quality Improvement Report</p> <p>Dr Anushta Sivananthan introduced the Quality Improvement Report and highlighted the following key achievements:</p> <ul style="list-style-type: none"> • Neston Community Care team improvements to the patient discharge experience through effective partnership working and 'safety huddles'. • Bowmere's 'Sign up to Safety' kitchen table week raising awareness of staff psychological safety and patient safety. • The introduction of case management across the East Community Learning Disability team which has eradicated their waiting list. <p>Sheena Cumiskey queried how the success of the patient safety huddles was being rolled out. Dr Sivananthan advised that this would be disseminated via the Patient Safety Improvement forum.</p> <p>Board members were advised that there will be a presentation to the Quality Committee in May 2019 setting out the plan to roll out psychological supervisions for staff in inpatient services in line with the principles of trauma informed care. An options appraisal will also be developed linked to the Quality Account priorities allowing visibility to be maintained within the governance structure.</p> <p>The Board of Directors noted the report.</p>	
Closing Business		
19/20/33	<p>Any other business</p> <p>There were no further items of business.</p> <p>The Chair invited those observing the meeting to comment on the afternoon's proceedings.</p>	

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19/20/34	<p>Matters for referral to any other groups</p> <p>There were no matters to refer or escalate to other groups.</p>	
19/20/35	<p>Matters impacting on policy and/ or practice</p> <p>There were no matters identified impacting on policy and/or practice.</p>	
19/20/36	<p>Review risk impact of items discussed</p> <p>There were no further items to add to the risk register.</p> <p>The Chair reflected the Non-Executive Directors' earlier comments regarding the evident dynamism within the risk register.</p> <p>As the crisis beds issue is reflected at Project Board risk register level, this was felt to be covered at this time.</p>	
19/20/37	<p>Key messages for communication</p> <p>The Chair advised that the following items be communicated to the organisation:</p> <ul style="list-style-type: none"> • Good progress being made with the Trust's strategic priority for Central and East Cheshire redesign. • Progress with the workforce disability equality standard and the reflections from 'Paul's story'. 	
19/20/38	<p>Review of meeting performance</p> <p>All agreed the meeting had been effective. Board members were encouraged to complete the online meeting survey to enable continuous improvement at Board level.</p>	
CLOSE		
Date, time and venue of the next meeting:		
Wednesday 26 June 2019, 9.30am Sycamore House (seminar session)		