



Minutes of Board of Directors Meeting – held in Public

**At 1:30pm on Wednesday 27 November 2019
At Boardroom, Redesmere**

Present	<p>Mike Maier Dr Faouzi Alam</p> <p>Dr Paul Bowen Anne Boyd Andrea Campbell Dr Jim O'Connor Sheena Cumiskey Suzanne Edwards Gary Flockhart</p> <p>David Harris Edward Jenner Rebecca Burke-Sharples Dr Anushta Sivananthan</p> <p>Tim Welch</p>	<p>Chairman Joint Medical Director, Effectiveness, Medical Education and Medical Workforce & Caldicott Guardian Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Chief Executive Acting Director of Operations Director of Nursing, Therapies and Patient Partnership Director of People and OD Non-Executive Director Non-Executive Director Joint Medical Director, Quality, Compliance and Assurance Director of Business and Value</p>
In attendance	<p>Louise Brereton Adrian Moss Sarah Aldis</p> <p>Andy Styring</p> <p>Helen Bett Kim Aspinall Pater Ashley Mudie Brian Burke Pauline Bradshaw Rob Robertson</p>	<p>Head of Corporate Affairs Clinical Services Manager (for item, 19.20.106) Associate Director, Wirral Community and Health Trust (for item. 19.20.106) Interim Strategic Director</p> <p>Shadow Associate Member of the public Governor Lead Inspector: CQC Senior Clinical Quality Lead, NHSI Governor</p>
Apologies	None	

Ref	Title of item	Action
	Meeting governance	
19/20/90	<p>Welcome, apologies and quoracy</p> <p>The Chair welcomed all to the meeting. A welcome was extended to all joining the meeting to observe. The meeting was confirmed as quorate. There were no apologies.</p>	
19/20/91	Declarations of interest	

Ref	Title of item	Action
	None declared.	
19/20/92	<p>Minutes of the previous meeting held 25 September 2019.</p> <p>The minutes of the meeting held 25 September 2019 were reviewed and approved as a correct record.</p>	
19/20/93	<p>Matters arising and action points</p> <p>Action 19.20.83: It was confirmed that amendments were being made to the ICP terms of reference as discussed. Action closed.</p>	
19/20/94	<p>2019/20 Cycle of business</p> <p>The business cycle for 2019/20 was noted.</p>	
19/20/95	<p>Chair's announcements</p> <p>Mike Maier announced the following:</p> <p>HSJ Awards Trust colleagues recently attended the Health Service Journal Awards, where the Trust was shortlisted for Mental Health Provider of the Year.</p> <p>Central and East Cheshire redesign The Trust has recently announced the names of the new mental health wards in Macclesfield. The new ward for adults and older people will be called Mulberry Ward, with the new ward for people with dementia called Silk Ward.</p> <p>New mental health resource centre for Cheshire A new wellbeing resource centre is set to open on St Anne Street in Chester city centre early in the New Year. Designed in collaboration with people with lived experience of mental ill-health, 'Number 71' will provide early intervention support and treatment for people experiencing a mental health crisis and will be open seven days a week, 365 days a year. The centre is a result of NHS West CCG and CWP working together with mental health interest groups following a successful award from the national Beyond Places of Safety grant scheme.</p> <p>MyMind CWP's dedicated Child and Adolescent Mental Health website – has been refreshed and relaunched.</p> <p>Veteran Aware CWP has recently been accredited as a Veteran Aware NHS organisation, by the Veterans Covenant Healthcare Alliance. The Trust has been recognised by the VCHA for its hard work in demonstrating commitment to the Armed Forces Covenant and striving to deliver the best possible care to our veterans.</p> <p>Social Value Charter The Trust is pleased to have signed the Cheshire and Merseyside Social Value Charter.</p> <p>The Board of Directors noted the above updates.</p>	

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19/20/96	<p>Chief Executive's announcements</p> <p>Sheena Cumiskey updated the Board on the following matters:</p> <p>CQC Mental Health Survey The CQC mental health survey was published on 26 November 2019. The data is currently being analysed and will be reported back to the Board in January 2020.</p> <p>Breakfast with Sheena Andy Styring recently covered a breakfast with Sheena session held in Ancora House as Sheena had a personal emergency. This session focused on staff reflections on experiences of being a CWP employee. A six monthly feedback opportunity following new staff induction has also commenced, taking an appreciative enquiry format.</p> <p>Overview of discussions at the private board meeting Sheena Cumiskey briefed the Board and those in attendance on discussions held in private board meeting. This included:</p> <ul style="list-style-type: none"> • reflections from a patient story • assurance and feedback from the Operational Committee • Update on delivery of the Operational and Financial Plan 2019/20. • Provider Collaboratives and other strategic developments • Updates on place based working and systems financial recovery support. <p>The Board of Directors noted the above summary.</p>	
<p>Internal reporting from committees, matters of governance and assurance</p>		
19/20/97	<p>Quality Committee: Chair's report of the Quality Committee held on 6 November 2019</p> <p><i>(Tim Welch joined the meeting)</i></p> <p>Dr Jim O'Connor highlighted the following points from the report.</p> <ul style="list-style-type: none"> • Review of the risk register and new risks in-scope including flu immunisation campaign and training compliance. • Discussions regarding matters escalated from the subcommittees of the Quality Committee and ensuring these are appropriately managed in line with the integrated governance strategy. <p>A discussion followed regarding Board assurance on chemical restraint in settings outside of CWP. Dr Anushta Sivananthan confirmed that this was considered by the Quality Committee from an inpatient perspective but that work was undertaken with local authorities feeding into the Safeguarding sub-committee for these settings. It was acknowledged there was further work to do regarding ensuring effective assurance around these issues.</p> <p>Action: Jim O'Connor and Anushta Sivananthan to consider ways of Quality Committee gaining assurance on use of chemical restraint in settings outside of CWP.</p> <p>The Board of Directors noted the Chair's report.</p>	AS/JOC

Ref	Title of item	Action
19/20/98	<p>Audit Committee: Chair's Report of the Quality Committee held 12 November 2019</p> <p>Edward Jenner highlighted the following points from the report:</p> <ul style="list-style-type: none"> • Limited assurance was received on an audit of waiting times in children and young people's services. Reassurance was received at the meeting from the Head of Operations on the recommendations. • A further update on this will be provided early in 2020 to inform on progress made. The need to extend the scope of risk 12 (data quality) was highlighted in light of this audit to even better reflect the current Trust position. • Relationships with the new external auditor leads are embedding well and preparations for the 2019/20 audit are in place. <p>Dr Anushta Sivananthan provided an update on the positive progress with the work on data quality, particularly the development of data dictionaries and operational work around performance and information teams.</p> <p>The Board of Directors noted the Chair's report.</p>	
19/20/99	<p>Register of Seals 2019/20</p> <p>Following review at the Audit Committee, Sheena Cumiskey introduced the 2018/29 Register of Seals.</p> <p>The Board of Directors approved the Register of Seals 2019/20.</p>	
19/20/100	<p>Fit and Proper Persons regulations annual assurance 2019/20</p> <p>Mike Maier presented the report setting out the action undertaken to comply with the Trust's Fit and Proper Persons policy. This included the annual review of compliance which included the checks undertaken for existing Directors and those undertaken for incoming Directors.</p> <p>Board members were reminded that it is the responsibility of the Chairman to discharge the requirement placed on the Trust, to ensure that all directors satisfy the requirements of the Fit and Proper Persons Test, both on appointment and on an ongoing basis.</p> <p>The Board of Directors noted the report.</p>	
19/20/101	<p>Safer staffing: September and October 2019</p> <p>Gary Flockhart presented the report. Board members were advised that the report did not include data from Ancora House as this required further validation. This will be included in the report to the January 2020 Board meeting. Gary Flockhart reminded Board members that the next six monthly report to the Board is due in January which includes the staffing of wards from a multi-disciplinary perspective which provides greater insight into ward staffing.</p> <p>A discussion followed. Dr Jim O'Connor queried the cancellation of staff training at Greenways. Reassurance was provided that when this occurs, it is ensured that staff have an opportunity to have this rearranged quickly.</p>	

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	<p>The Board of Directors noted the report.</p> <p><i>(James Partington joined the meeting)</i></p>	
19/20/102	<p>Report against Strategic Objectives</p> <p>The Chair welcomed James Partington to the meeting. James reminded Board members of the work to date on the development of the dashboard and the links between this dashboard, the quality dashboard, and team level locality data packs. Further developments will also include seasonally adjusted variance charts.</p> <p>A discussion followed on performance exceptions. Supervision was highlighted as remaining off track. It was suggested that the SPC chart denote the inception of the new policy to allow review of progress towards target achievement. It was suggested that the mandatory learning target could be reviewed to consider a greater stretch.</p> <p>Board members commended the dashboard and extended thanks to James Partington for his work on this.</p> <p>The Board of Directors noted the report.</p> <p><i>(James Partington left the meeting)</i></p>	
19/20/103	<p>Board Assurance framework and strategic risk register</p> <p>Dr Anushta Sivananthan presented the report and reminded Board members of the requirements of the integrated governance strategy.</p> <p>Advising on the risks in-scope, Dr Sivananthan updated that with regard to the ADHD risk, this remains in-scope and a report is due at the December 2019 Board meeting setting out outcomes of discussions with commissioners.</p> <p>A new risk is in-scope on financial performance which will include systems financial impacts and efficiencies.</p> <p>Two further risks are in-scope concerning the flu campaign and the essential learning. These are under consideration and will have full risk treatment plans developed if required.</p> <p>Dr Anushta Sivananthan also reported on risk score changes. This included an increase to the supervision risk (risk1) which has increased to a score of 12 reflecting the policy implementation and a decrease to the bed pressures risk (risk10) reduced to a score of 12 following a stable period of OPEL 2 and recent assurances presented to the Operational Committee.</p> <p>Brian Burke, CQC inspector in attendance acknowledged the reference in the SBAR to the delay in obtaining the certificate of CQC registration for the service, however advised Board members of the implications of the provision of services without formal registration as the provider. It was noted that the registration issue had since been rectified. Brian Burke sought Board members reflections on this issue. Dr Anushta Sivananthan advised that the issue was borne from pressures from commissioners to ensure that the service was mobilised quickly to ensure seamless, ongoing service for patients, however business development processes</p>	

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	<p>had since been further reviewed and will fully take account of this for future acquisitions.</p> <p>Dr Paul Bowen sought assurance on the ADHD risk, particularly concerning the CCG prioritisation of this issue given the potential patient impacts. A discussion followed. Suzanne Edwards advised that there is an ongoing dialogue with commissioners on the issue and that CWP colleagues are ensuring that patient needs are at the centre of these discussions. A report will be provided to the Board in December 2019 to advise on the future plans for these services.</p> <p>The Board of Directors approved the report and noted the CQC registration issue.</p>	
Quality of Care		
19/20/104	<p>Central and East Cheshire services redesign</p> <p>Suzanne Edwards presented the report providing an update on the implementation of the redesign of impatient and community services in Central and East Cheshire. The following points were highlighted:</p> <ul style="list-style-type: none"> • Enhanced community provision is now in place, including 5 additional crisis beds which will increase to 6 in January 2020. Additional staff will also join the community teams in January. • Feedback from staff remains positive and the impact of OD work is coming to fruition. A CQC mental health visit feedback was also positive. • Increased senior staff visibility and support was also acknowledged and has been welcomed, in addition to well-received support from PALS. <p>A discussion followed. Thanks were extended to all supporting the redesign programme. The opportunity to use review the redesign process from a benefits realisation of effectiveness, experience and quality perspective was agreed. It was also acknowledged that Positive Behavioural Support approaches were being supported by staff. The opportunity to ask a body such as HealthWatch to assist with a qualitative review of the programme was suggested along with potential other research opportunities.</p> <p>Sheena Cumiskey commended the Executive team for their diligence and commitment to the programme.</p> <p>The Board of Directors noted the report.</p>	
19/20/105	<p>2019/20 Flu immunisations campaign</p> <p>David Harris presented an update on the current flu immunisation campaign. Attention was drawn to the self-assessment undertaken following a request from NHSI/E.</p> <p>The following points were highlighted:</p> <ul style="list-style-type: none"> • The Trust's target is 80%. Current performance is 50.2% which is a positive improvement on the performance at the same point last year. • The provision of a sufficient level of vaccines. 	

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	<ul style="list-style-type: none"> • A successful CELF session was held to raise understanding around the importance of herd immunity and the potential impacts of flu on patient safety. • Emergency Planning team are considering a response in the event of a flu outbreak. <p>A discussion followed. There was recognition regarding the importance of peer vaccinators and of using them as much as possible. The potential of emphasising non-vaccination as a patient safety issue was supported and the potential to move staff to other areas if risks are high. Consideration was also given to the potential of e-learning. This would be considered further in addition to other communication channels including staff story videos etc.</p> <p>The Board of Directors noted the report.</p>	
19/20/106	<p>All age Disability Service: Year 1 evaluation</p> <p>(Sarah Aldis and Adrian Moss joined the meeting)</p> <p>Suzanne Edwards provided a presentation setting out the progress following the first year since the acquisition of the Wirral All Age Disability services, facilitated by a S175 agreement enabling the transfer of service and the according delegation of duties.</p> <p>Suzanne Edwards highlighted the following points:</p> <ul style="list-style-type: none"> • There are three phases to the transfer. Two are now complete. Phase 3 is around transformation and is progressing with a focus on population health outcomes and benefits realisation. • From a governance perspective, the service has been integrated as a care group itself and reports into the Operational Committee. • The ‘intra-provider’ relationships are positive and well developed enabling improvements to pathways and improved collaboration which now presents great opportunities moving forward. • The role of the principle social worker which includes supporting effective social work supervision, ensuring quality assurance and improvement in social work practice. • Statutory duties remain with Wirral Council in line with Care Act requirements but the S75 agreement sits with CWP requiring the Trust’s assurance of the delivery of the duties. • A recent peer review undertaken by directors of adult social services in the north-west highlighted positive benefits included joint working improvements, communication and increased professional development opportunities. • Challenges existing within the service include people planning and the recruitment of approved mental health practitioners, efficiencies linked to care budgets, interoperability of clinical and information systems, and ensuring the balance between CPA requirements and the Care Act duties. <p>Suzanne Edwards advised that a board development session will be held early in 2020 to enable Board members to discuss ways to strengthen the voice of social work at Board level. It was also noted that the social work voice also needs to influence trust strategy in a greater way.</p>	

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	<p>A discussion followed regarding quality impact assessment processes around efficiency planning. Suzanne Edwards advised there is a need to work with the local authority as commissioners on these processes.</p> <p>Thanks were extended to Sarah Aldis and Adrian Moss for their work on developing this service.</p> <p>The Board of Directors noted the report.</p> <p>(Sarah Aldis and Adrian Moss left the meeting)</p>	
Strategy / Strategic Development		
19/20/107	<p>People strategy 2019/24: delivery plan</p> <p>David Harris presented the report and reminded Board members of the discussions at the July 2019 Board meeting and the approval of the People and OD strategy. The following points were highlighted:</p> <ul style="list-style-type: none"> • A full delivery plan has been developed to support the achievement of the strategy. • Board scrutiny of the strategy progress will be through review of key KPIs through the monthly dashboard and via a quarterly overview report to the Board. • The People and OD subcommittee will retain grip on the delivery plan progress. The Terms of Reference and membership of this sub-committee are currently under review to ensure it is fit for purpose. • The People and OD strategy will continue to report into the Operational Committee. <p>Non-Executive Directors commended the work to date however voiced some concern on the scale of the plan and capacity for delivery. It was noted that recent local capacity issues have since been resolved so there is greater confidence in the ability to deliver the agenda.</p> <p>Andrea Campbell commented on the need for the delivery plan to better reflect the breadth of Trust staff and professional groups.</p> <p>Action: Ensure POD delivery plan, education elements, include even further reference to wider professional groups.</p> <p>The Board of Directors noted the report.</p>	DH
19/20/108	<p>Learning lessons to improve HR processes</p> <p>David Harris presented the report and reminded Board members of the NHSI/E requirements to all trusts to provide assurance following a serious incident in another Trust, occurring as a direct result of poor HR processes.</p> <p>A QI methodology has been used to review disciplinary processes but further work is needed to ensure consistent application of policies and ensuring this is done in a person centred and resolution focused way. People services will also be monitoring cases to assess the quality and experience of certain staff groups who could be impacted by internal policies, such as BAME staff.</p> <p>The Board of Directors noted the report.</p>	

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19/20/109	<p>Research strategy</p> <p>Dr Faouzi Alam presented the report and reminded Board members of the discussions at the October 2019 seminar regarding the development of the strategy. The strategy has been informed by the Long Term Plan, the Patient Safety Strategy the CWP FYFV and has been co-produced with Care Groups.</p> <p>A discussion followed. Board members commended the strategy and its improved approach. The need to retain opportunities for non-clinical research was highlighted and the potential opportunities offered by research collaboratives. Board members will be kept apprised of the strategies progress through six monthly reporting.</p> <p>The Board of Directors noted the report and approved the strategy.</p>	
Closing Business		
19/20/110	<p>Any other business</p> <p>There were no further items of business.</p> <p>The Chair offered members of the public in attendance an opportunity to query any issues discussed.</p>	
19/20/111	<p>Matters for referral to any other groups</p> <p>There were no matters to refer or escalate to other groups from the meeting.</p>	
19/20/112	<p>Matters impacting on policy and/ or practice</p> <p>There were no matters identified impacting on policy and/or practice.</p>	
19/20/113	<p>Review risk impact of items discussed</p> <p>It was acknowledged that the board assurance report and risk register had captured all risks discussed.</p>	
19/20/114	<p>Key messages for communication</p> <p>These were agreed for dissemination by the Communications Team.</p>	
19/20/115	<p>Review of meeting performance</p> <p>Board members were encouraged to review the meeting via the smart survey in order to continuously improve the meeting.</p>	
CLOSE		
Date, time and venue of the next meeting:		
Wednesday 29 January 2020, 9.30am, Boardroom, Redesmere		

Signed

A handwritten signature in black ink, appearing to read "Mike Maier", is centered at the top of the page. The signature is written in a cursive style with a prominent loop at the end.

Mike Maier
Chairman

29 January 2020