

**Council of Governors Meeting
7th October 2014
Summary Report**

Council of Governors
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Item 11(c)

TITLE OF PAPER	Feedback from Performance Overview Group
TO BE PRESENTED BY	John Kay, Lead Governor
ACTION REQUIRED	None, for information

OUTCOME	Governors are supported to effectively carry out their statutory responsibility to hold the Trust to account
TIMETABLE FOR DECISION	n/a
LINKS TO OTHER KEY REPORTS / DECISIONS	Constitution, Health & Social Care Act 2012
LINKS TO OTHER RELEVANT FRAMEWORKS BAF, RISK, OUTCOMES ETC	Constitution and Council of Governor Standing orders – requirement for governors to represent members HSE ■ MH Act ■ Equality ■ NHS Constitution: Staff Rights ■ Patients' Rights ■ Public's Rights ■ Principles ■ Values ■
IMPLICATIONS FOR SERVICE DELIVERY AND FINANCIAL IMPACT	n/a
CONSIDERATION OF LEGAL ISSUES	n/a

Author of Report	Sam Stoddart
Designation	Memberships Manager
Date of Report	30 th September 2014



**Council of Governors
Performance Overview Group**

DRAFT

Minutes of the 4th Performance Overview Group held on Tuesday 2nd September 2014 in the Board Room of Fulwood House, Old Fulwood Road, Sheffield S10 3TG

Present:

Name	Title	Name	Title
John Kay	Chair	John Burton	Head of Planning & Development
Paul Robinson	Executive Director of Finance	Dean Wilson	Director of Human Resources
Elaine Hall	Staff Governor	Jules Jones	Public Governor
Doug McCallum	Public Governor	Paul Miller	Staff Governor
Andrew South	SU Governor	Ian Downing	Carer Governor
Clive Clarke	Deputy Chief Executive	Samantha Stoddart	Membership Manager
Jane Lyon	Head of Service User Experience Monitoring Unit	Helen Payne	Director of Facilities Management
Janet Mason	Hotel Services Manager	Prof Peter Woodruff	Appointed Governor University of Sheffield
Karen Jones	PA (notes)		

Minute	Item	Action
POG 04/01	Welcome John Kay welcomed everyone to the meeting. The Chair thanked John Burton for attending on behalf of Jason Rowlands.	
POG 04/02	Notes of the meeting held on 13th May 2014 Dean Wilson requested an amendment to item POG 03/06. When answering Sam Stoddart's question on Working Time Directive he did not state that it was targeted at doctors, it is for <u>all staff</u> not just doctors. The notes of the meeting were accepted as a correct record with the above amendment.	Agreed
POG 04/03	Matters arising from Notes of the Meeting held on 13th May 2014 (a) Research Activity within the Trust – Nick Bell, Interim Director of Research and Development, has been invited to present to a future Council of Governor meeting, maybe in December or February. (b) IAPT Four Week Wait – Jules Jones asked for further information on the IAPT four week waiting times. John Burton reported that an update is available in the Annual Plan and that it is the intention to reduce waiting times to below four weeks. (c) Memory Service Update – The Chair had asked for further feedback on the Memory Service. Unfortunately John Burton had to report that the information was not yet complete and would be available later in the year, however early indications show improvement.	All to note John Burton

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	<p>(d) Staff to Patient Ratio – Jules Jones requested a follow up regarding staff to patient ratio figures. Dean Wilson explained that although there are no national guidelines this would be reported on at the Capacity and Capability Group. Clive Clarke joined the meeting at Item 6 and added that ratios are at the manager’s discretion and are defined by clinical need.</p>	<p>All to note</p>
<p>POG 04/04</p>	<p>Patient Led Assessments of the Care Environment (PLACE) outcomes from the 2014 assessments</p> <p>Helen Payne, Director of Facilities and Janet Mason, Hotel Services Manager attended the meeting to provide information about PLACE. Helen introduced Janet as lead for PLACE. Janet explained the background to PLACE and how it had replaced the Patient Environment Action Team. Previously there could be five in a team and this was felt to large, disruptive and often upsetting. PLACE teams are smaller with a 50:50 ratio of patient assessors to staff. Teams are encouraged to be objective and not biased and have a practical common sense approach. These assessments are not a technical audit or a tick box exercise. Teams should take into consideration that, for some people, this is their home and that the environment will reflect that with personal belongings. Scoring methodology and SHSC results for 2013 and 2014 were shared with the group.</p> <p>Areas assessed are:</p> <ul style="list-style-type: none"> • Cleanliness • Food and Hydration • Privacy and Dignity • Condition and Appearance and Maintenance <p>Results are presented in percentages and comparable with the national average. SHSC figures have improved for all areas in 2014 compared with 2013.</p> <p>Discussion took place around the results and scoring with members of the group expressing their concern with the lack in clarity in how questions would be applied. Peter Woodruff shared his concerns around the scoring methodology and wanted to know what exactly the percentage represented. He also asked if patients were asked for their views. Helen said that individual patients were not asked, only representatives. She explained that scoring is against the PLACE assessment tool measures and the percentages are generated by Health & Social Care Information Centre (HSCIC), the national provider of information, data and IT systems for health and social care using their national web based scoring system. Helen told the group that she would be happy to share the full report and would forward any formal suggestions to HSCIC for improving the way in which scoring is undertaken. The group agreed that it needed to understand the criteria that equates to percentages and seeing the national ranges would give a better picture of how SHSC compares. Peter Woodruff was invited to receive the full report and make comments. Jules Jones suggested an excellent rating on top of the percentage rating would be useful.</p> <p>Sam Stoddart asked about timetabling of next year’s assessments and whether it would be possible to include governors. Helen said that next</p>	<p>Peter Woodruff</p>

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	<p>year's assessments will take place during February/March. Janet informed the group that an evaluation of this year's PLACE would take place soon and that Tyrone Coley, SU Governor, had been involved. Sam to ask Tyrone to provide feedback on his involvement.</p>	<p>Sam Stoddart</p>
<p>POG 04/05</p>	<p>Planning, Performance and Governance Report John Burton attended on behalf of Jason Rowlands. John introduced two reports. Annual Plan 2014-15 review of progress against Corporate Objectives and the Monthly Performance Report for period end of July 2014. John explained how the corporate objectives are set by and signed off by the Board of Directors. The Monthly Performance Report goes to the Board of Directors each month and gives them the opportunity to raise any questions. Discussion took place around the two reports with John answering queries as they arose. John explained that the distributed report has some data delay and figures could have changed from when first produced. Sam Stoddart asked how performance is assessed and if it is comparable with other Trusts to help determine if attention is needed. John said that we do not make comparisons with other Trusts but we do compare teams within Sheffield.</p> <p>While examining the figures within the Community Mental Health Services Dashboard period ending July 2014, Jules Jones raised questions around CMHTs and the number of short-term interventions that then go on to need full-time support, and asked are we not getting it right first time or are we not properly assessing people? Sam suggested that as many of the questions being raised related to this subject it would be good to meet with Jason Rowlands and hold a session specifically around analysing the CMHT data. Paul Miller suggested that the data was not large enough to have two decimal places. John concurred. Peter Woodruff asked why seclusions had gone up during May. John explained that this was due to a push by the Trust for more accurate reporting. Both Paul and Peter suggested that providing explanations behind the figures would be helpful. John informed the group that Jason was keen to present the data better and was looking at including governance indicators. Sam suggested that quality report could be incorporated into the meeting but identified separate in order to make clear the difference aspects of governance being addressed. This was agreed.</p> <p>The Chair thanked John for attending.</p>	<p>Sam Stoddart</p> <p>John Burton</p> <p>Agreed</p>
<p>POG 04/06</p>	<p>Finance Report Paul Robinson, Executive Director of Finance, presented and ran through the DASHBOARD report as at 30th June, 2014. Paul informed the group that the Trust has a risk rating of 4 from Monitor, which is the best that can be awarded. On income and expenditure the Trust achieved a £1.8m surplus which was better than the £1.2m expected. However forecasts for yearend identified a possible red area of £2.55m underspend, but this will be covered by reserves and has been signed off by Board. Sam asked if the position could change and the reasons behind this. Paul explained that yes this could change if we were unable to provide cost improvements, which are 4% year on year. All changes that could be done have been. It could turn around but at present we are £264k under target. CIPs on the graph are showing green/amber with planned CIPs quite modest resulting in the full year target</p>	

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	<p>being at risk. Questions were raised in regard to 'income received within planned days' as this is reported as red. Sam asked if we are proactive with debtors. Paul explained that the majority of debtors are low risk, ie being other NHS organisations. Any non-NHS debt will be actioned. The majority of invoices sent out at month end take around five weeks to get paid. Paul suggested re-examining the process to ensure invoices flow through the system and building better relationships to encourage payment on time. Monitor takes liquidity into account when setting targets. Paul continued through the figures for net working capital and capital spend. Elaine Hall asked if the Trust receives interest on its money. Paul said yes we do but it is at the base rate as the banks we use are dictated by government for low risk and so they return low levels of interest.</p> <p>The Chair thanked Paul for his report.</p>	
POG 04/07	<p>Workforce Report</p> <p>Dean Wilson introduced the workforce report for period July 2014. As of 31st July 2014 the Trust headcount was 2740 with 10.84% turnover and presents no issues. On sickness absence only two directorates are over target. LDS has ongoing issues but this is reducing very slowly. The Trust's sickness rate is slightly higher than the NHS national average of 4.3% but is in line with other mental health trusts. Dean spoke of the steps being taken to tackle sickness absence. A paper has been produced on proactive ways to manage sickness absence and an internal conference was held, the first of many, and was well attended. Hopefully these moves will have a positive impact in the future.</p> <p>Looking at Chart 3.2 Trust Episode of sickness it shows the length of absences increasing which could indicate levels of anxiety/stress increasing. 33% of the Trust's absences are stress related, which is representative of the national picture. The specialist directorate figure is lower which could be an indicator of good practice, which could be shared and rolled out across the Trust. The Trust is doing huge amounts of work around addressing staff wellbeing.</p> <p>Dean gave an update on Personal Development Reviews. At present 89% are complete with the remaining being encouraged to complete as soon as possible. The Board of Directors have agreed and signed off the new reporting period of April-June each year. Sam asked if there were any plans to monitor supervision. Dean responded that this is currently being looked at.</p> <p>The Trust's spend on bank staff had increased in July due to the holiday period. Dean told the group that the Trust's own flexi staffing office was in the process of setting up flexible administrative staff, which would be made up primarily of our own substantive staff.</p> <p>On mandatory training Dean explained that the way in which training is delivered is currently under review and would provide an update next time.</p> <p>Dean introduced two new sections of the report; one with targets covering the average hours worked by staff and the second covering employment</p>	Dean Wilson

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	<p>tribunals. It's the intention of the Trust to reduce the average hours worked per week to no more than 48 by the end of the year. The table shows that the number of staff working excessive hours is reducing as planned. The table on employment tribunals shows settled and ongoing claims. No new claims have been received during July.</p> <p>The Chair thanked Dean for his report and roundup.</p>	
POG 04/07	<p>Any Other Business No further items.</p>	
POG 04/08	<p>Date and Time of Next Meeting Tuesday 9th December 2014, 9.30-11.30 am in the Tudor Board Room, Fulwood House. Date and times for 2015 to be arranged.</p>	