

## **2<sup>GETHER</sup> NHS FOUNDATION TRUST**

### **BOARD MEETING STROUD COLLEGE 24 NOVEMBER 2008**

**PRESENT**

Rennie Fritchie, Chair  
Lizzie Abderrahim, Non-Executive Director  
Tracey Barber, Non-Executive Director  
Sandra Betney, Director of Finance and Commerce  
Roger Brimblecombe, Non-Executive Director  
Shaun Clee, Chief Executive  
Martin Davis, Non-Executive Director  
Carolyn Elwes, Non-Executive Director  
Kay Harrison, Director of Human Resources  
David McGrath, Director of Corporate Affairs/Trust Secretary  
Dermot McMeekin, Non-Executive Director  
Frank Powell, Non-Executive Director  
Simon Thompson, Director of Operations  
Hazel Watson, Director of Nursing Social Care and Therapies  
Paul Winterbottom, Medical Director

**IN ATTENDANCE**

Anna Hilditch, Assistant Trust Secretary  
Bren McInerney, Member of the Public

#### **1. APOLOGIES**

No apologies were received.

#### **2. DECLARATION OF BOARD MEMBERS INTERESTS**

Rennie Fritchie declared that she had been asked to become President for the Hospital Caterers Association, taking up this post in April 2009. No conflicts of interests arising from the items being discussed were declared.

#### **3. NOTES OF THE MEETING HELD ON 27 OCTOBER 2008**

- 3.1 It was noted that Tracey Barber had been highlighted as both present and absent at the meeting. Tracey would be noted as having sent her apologies.
- 3.2 A typo was noted at 6.7 and the word "is" would be changed to read "if it were to delay".
- 3.3 Subject to the amendments above, the notes of the meeting held on 27 October were approved.

#### **4. MATTERS ARISING AND ACTION POINTS**

- 4.1 The Performance Management Committee had reviewed the Delayed Transfers of Care (DToC) position in more detail at their last meeting and an update would be provided to the Board during the Performance Dashboard Report later in the agenda. The Committee would also be progressing the work to focus on the validity of predications and how the current surplus could be used to identify projects within the Trust.

- 4.2 Frank Powell informed the Board that Martin Davis had been appointed as Chair of the Governance Committee, chairing his first meeting which had taken place on 19 November. The Board noted this appointment.

## **5. QUESTIONS FROM THE PUBLIC**

- 5.1 The Trust had received an e-mail from Mr Anthony Burton which he had asked to be read out at the meeting. This was as follows:

“Thanks for bringing a Board meeting to Stroud. Unfortunately it clashes with the Stroud Carers Support Group which I lead, but I will try and attend at the beginning. No questions, but I would like to record on behalf of users and carers the work which the Trust is undertaking on a 'Mental Health and Social Inclusion Strategy' which will be for Gloucestershire, and as I understand it, also be a pilot for England as a whole. I did take part in the consultations that Ian Gregory had with the Voluntary and Community Sector earlier in the year, and attended the Research Group stakeholder event this week. It was encouraging to see Rennie devoting her time to meet with us. Also I am sure that Ian is the right person to direct this project. He has always shown empathy and respect for us clients, and appears to have recruited a good team of researchers. I wish them all good luck and am looking forward to hear of progress.”

- 5.2 No further questions or comments were received from members of the public.

## **6. MENTAL HEALTH ACT COMMISSION ANNUAL REPORT**

Due to unexpected absence, this report was deferred to a future meeting.

## **7. CHAIR'S REPORT**

- 7.1 Rennie Fritchie provided the Board with a verbal update on some of her activities since the Board last met in October.
- 7.2 The Board paid tribute to George Lott, Psychiatric Nurse, who had sadly passed away. The Medical Director informed the Board that George had worked for the Trust for many years, working with Learning Disability clients. He was always very client focussed and was a clinician's and patient's ideal psychiatric nurse. George would be missed by both patients and work colleagues. The Medical Director had attended his funeral which had taken place on 21 November and reported that there had been a good turn out, with many colleagues, past and present in attendance.
- 7.3 Rennie Fritchie had attended the Recognising Outstanding Service and Contribution Awards (ROSCAs) at Cheltenham Racecourse on October 30<sup>th</sup>. She said that this had been a great night for all involved and congratulated all those who had been awarded that evening with either a ROSCA or a long service award.
- 7.4 Rennie Fritchie and the Chief Executive had attended an evening meeting in Bath where the speaker was Charles Clarke MP who had been working with KPMG on The NHS of the future: its services and funding. She said that this was an interesting evening and that she found it helpful to get out and hear about current thinking.

- 7.5 Along with Dermot McMeekin and the Director of Finance, Rennie had attended the Bevan Brittan seminar on Inquests and Inquiries which she said was a very useful event.
- 7.6 Rennie was invited to attend a farewell event at Lexham Lodge for Maureen Shortland, a Nurse with the Assertive Outreach Team, who had been part of the organisation and its predecessors for 35 years. Rennie said that she was happy to be asked to attend the event in recognition of Maureen's length of service.
- 7.7 On Monday 17 November a Stakeholders Event was held at the Guildhall in Gloucester. The National Social Inclusion Programme are sponsoring the development of an evaluation tool to evaluate mental health providers and others to assess the extent to which a service demonstrates inclusive capabilities. Rennie said that she was pleased to both open and close this well attended event.
- 7.8 Together with Carolyn Elwes, Rennie Fritchie has been taking part in the preliminary work to support the Clinical Excellence Awards and looked forward to updating the Board further at the conclusion of the process.
- 7.9 Rennie had accepted an invitation to visit the Lydney GP Practice of Dr's Bennett and Sharma and to meet with them and John Hale from Crossroads to hear about their work and their experience of 2gether services and, together with the Director of Operations, explore ways of working together better. Rennie formally wished to thank Linda Vaughn, Practice Manager, who both organised and facilitated the meeting.

## **8. NON-EXECUTIVE DIRECTOR'S UPDATE**

- 8.1 Frank Powell informed the Board that he had chaired the recent Mental Health Act Management Committee and attended the Mental Health Act Managers training day on the revised MH Act. He said that the feedback from this event had been positive and it was hoped that a similar event could be held for Non Executive Directors. Frank had attended the Audit Commission event on High Performing Boards, had chaired the interview panel for a new working Age Consultant Psychiatrist and had attended the Governance Committee. The Director of Finance had also attended the High Performing Boards event hosted by the Audit Commission and reported that feedback was that the event had been weak with little information being shared that the Trust did not already know.
- 8.2 Lizzie Abderrahim had attended the ROSCAs ceremony at the Racecourse and offered her thanks to all those who had made it a successful evening. She said it was clear that the staff at the event felt valued. Lizzie had also attended an internal review and the Non Executive Directors meeting with Rennie Fritchie on Friday 21 November which had been a useful meeting. Rennie Fritchie passed on her thanks to the Director of Finance for preparing the afternoon session which was a joint session on Business Planning with the Council of Governors.
- 8.3 Martin Davis had attended the Mental Health Act Management Committee and had sat in on two hearings. He said that he had been impressed with the quality and humanity of the hearings. Martin had also attended the Audit Commission's High Performing Boards event and had chaired his first meeting of the Governance Committee.
- 8.4 Roger Brimblecombe had chaired the Performance Management Committee and had attended both the Governance and the Mental Health Act Management Committee. Roger

attended the Non Executive Directors meeting on Friday morning and said that the afternoon session with the Governors had been useful with lots of good challenge. Roger Brimblecombe had attended two MHAM reviews, two internal reviews and had sat on the panel of a recent appeal.

- 8.5 Tracey Barber had recently attended a 'Women in Business' lunch and had given a talk about 2gether. She had carried out a site visit to Wotton Lawn with the Director of Human Resources and had attended the recent Governance Committee. Tracey had also attended the Non Executive and Governor session on Friday 21 November and had completed a Non Executive Audit of Complaints which would be presented later on in the meeting.
- 8.6 Dermot McMeekin had attended the Governance Committee and the Non Executive and Governor session. Along with Rennie Fritchie and the Director of Finance, Dermot had attended a Bevan Brittan event on Inquests and Inquiries. Dermot was continuing with his programme of Board site visits with the Director of Operations.
- 8.7 Carolyn Elwes had attended the MHAM Committee. She had continued to follow up her work on Voluntary Mapping by meeting with Guide and PALS and the British Legion. Carolyn had worked with Rennie Fritchie to review the process of awarding Clinical Excellence Awards and had attended an internal review. She reported that the Medical Director had chaired the review well and was able to put people at ease to ensure that no one felt personally to blame for incidents that may have happened. Rennie Fritchie asked the Medical Director about the notes from each of the Internal Reviews and queried where they went after the meeting. The Medical Director reported that there was a small back log due to workload at present; however, the notes would be sent out to the SSUs for necessary action and to those in attendance at the reviews for approval.

## **9. CHIEF EXECUTIVE'S REPORT**

- 9.1 The purpose of this item was for the Chief Executive to bring to the attention of the Board significant items of business in progress.
- 9.2 The Board was informed that Les Trewin had successfully been appointed as Service Director for Working Age Adults. Les had been acting in this role for a number of months and the Board passed on their congratulations. The Chief Executive also reported that the Trust had been successful in recruiting a new Working Age Consultant Psychiatrist who would work jointly for Psychotherapy and the Crisis Team.
- 9.3 From 3 November, victims' rights under the Domestic Violence Crime and Victims Act 2004 would be extended to victims of offenders detained as unrestricted patients under Part 3 of the MH Act 1983. Guidance has been published explaining the new duties on the NHS and those bodies which fund placements in the independent sector. It was noted that the Director of Nursing, Social Care and Therapies and the Director of Operations had been asked to cascade this information and ensure that mechanisms were in place to ensure that the Trust is compliant with the new duties.
- 9.4 The Department of Health, the Home Office and the Ministry of Justice have launched the national consultation on the review of the No Secrets guidance. It was reported that the consultation would close on 31 January 2009. The Chief Executive agreed to bring this item back to the Board in January for review.

***ACTION: Consultation on Safeguarding Adults to be considered by Board at January 2009 meeting***

- 9.5 The Department of Health has launched the 'Human Rights in Healthcare – A framework for local action'. The Chief Executive advised that the Trust would be working with Mark Harper MP to look into this further and had asked Executive colleagues to ensure that the framework was discussed in the appropriate forums.
- 9.6 From 1 December 2008 no one under the age of 16 should be treated on an adult psychiatric ward in line with the Government commitment made in November 2006. The Chief Executive, Medical Director and the Director of Operations were currently in talks with the CAMH Service about developing services locally.
- 9.7 Strengthened 'Duty to Involve' guidance has been published which will help patients and the public have more say over the running of their local health service. The guidance offered statutory guidance for NHS organisations on the updated duty of involvement. The Chief Executive informed the Board that the Director of Corporate Affairs had been asked to pick this up for further consideration and action. Lizzie Abderrahim noted that the Equality Steering group would also be considering this new guidance.
- 9.8 The Chief Executive expressed his thanks to Kay Harrison and the Human Resources Team for organising the ROSCAs event on 30 October. Thanks also went to the Communications Team for their input. He said that the event had gone very well and was a special occasion for the staff invited to attend. The Trust would be updating its photo boards in the headquarters reception with pictures from the event. The Chief Executive also expressed his thanks to the sponsors for the evening, Gloucestershire Media and UNISON and to those colleagues who had been part of the judging panel.
- 9.9 On 11<sup>th</sup> November, the Trust, working in partnership with Job Centre plus launched the second 'Journey to Work' course at Gloucester Rugby Club. The 17 week course is designed to enable individuals who have been unemployed for a long time, some due to mental health difficulties, to return to work or study. It was reported that Gloucester Rugby Club would again be hosting the Journey to Work scheme completely free of charge, in recognition of the importance of being part of the Gloucester community.
- 9.10 The Gloucestershire Health and Community Wellbeing Partnership was developed to establish a joint vision for the health and wellbeing of Gloucestershire for the next ten years. The Chief Executive and the Director for Social Inclusion have represented the Trust on the Partnership and have been able to ensure that mental health and wellbeing has been appropriately considered. The Board received copies of Healthy Gloucestershire 2008 – 2018. Lizzie Abderrahim noted that it was a long term strategy and queried how it would be monitored and how often. The Chief Executive reported that an annual report would be produced each year to ensure progress with the strategy was monitored. The Board endorsed the Health and Community Wellbeing Strategy for Gloucestershire.
- 9.11 The Chief Executive informed the Board that work had now been completed on the feedback received from Social Inclusion Strategy consultation. This would now go back through the partner agency Board's for approval and would be presented at the December Board meeting.

***ACTION: Social Inclusion Strategy to be presented to December Board for approval.***

## 10. FINANCE UPDATE

The Director of Finance provided a verbal update on the financial position for the period ending 31 October 2008. The Trust was currently performing better than plan with a strong surplus position at month 7. Work would be carried out to look at how the Trust could bring forward expenditure from next year or use this surplus to invest in the improvement of Trust services. It was reported that the Trust's capital expenditure was starting to pick up in line with plan.

## 11. IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES AND PCAT

- 11.1 The Director of Operations advised the Board that the PCT had informed 2gether that it was the preferred contract for the provision of Psychological Therapies and would be working with the Trust to help further develop services around cognitive therapy. A Project Board had been set up and would be looking at the impact on the Trust's Primary Care Assessment and Treatment service. Work would be carried out to look at developing 24 hour phone lines.
- 11.2 Rennie Fritchie queried the invisible age barrier in place for these services which would be provided to people aged 18 – 65 and asked whether this could be classed as age discrimination. The Director of Operations advised that this was what was specified in the funding stream for Improving Access to Psychological Therapies; however, the Trust could go back to the Commissioners and ask about this. The Chief Executive noted that the Government initiative for IAPT was to put new funding into the system for people who had not accessed mental health services before. He noted that the Trust was trying to comply but at the same time get beyond this and look at how it could position itself at the forefront of where services needed to be in 5 years time.

## 12. PERFORMANCE DASHBOARD REPORT

- 12.1 The Board was presented with the performance dashboard report which provided commentary on performance against national and local indicators for the first seven months of 2008/09.
- 12.2 The Crisis Home Treatment service was on target to deliver the 1021 cases required by the end of the financial year. They had supported 716 home treatment packages against a target of 595 at the end of October. The Early Intervention service had also increased its caseload to 191 at the end of October and was confident that the projected caseload would deliver the December target of 211 cases as 30 new cases had been identified over the past month. The Director of Operations expressed his thanks to both teams for the positive direction of travel.
- 12.3 Sickness absences rates have continued to reduce with the 12 month rolling average for the Trust standing at 5.31% at the end of September. The Board was advised that the sickness absence performance over the past six months actually stood at 4.41% which was excellent and demonstrated significant improvement.
- 12.4 The Board was informed that the proportion of staff with completed appraisals and personal development plans stood at 68% at the end of October and the proportion of statutory and mandatory training delivered by the Trust had reached 61%.

- 12.5 It was reported that the Delayed Transfers of Care (DToC) position had not improved over the past month. The zero position has been maintained within learning disability and substance misuse services and there has been a reduction from 14 to 12 in working age; however, DToC have moved from 8 to 10 within older people's services. The Board was reminded of the new Healthcare Commission target of 7.5% for DToC. The Trust's overall position stood at 9.9%. The Director of Operations advised that an action plan had been produced and sent out to the SSUs with an acute definition of what DToC are. It was thought that this would help the Trust over the next few weeks establish whether some patients had been misclassified such as being on leave but classed as a DToC. The Director of Operations assured the Board that active work was ongoing to manage the position and the SSUs had been asked for their input into how to help resolve the position. The Director of Finance suggested that the Board needed to consider the DToC position and communications with Monitor if it was felt that the Trust was not going to hit the 7.5% target set. The Chief Executive said that it would be sensible to wait until the data ratification exercise had been carried out by the SSUs and then decide whether or not to approach Monitor. The results of this exercise would be reported to the Performance Management Committee at their next meeting on 9 December.
- 12.6 The Chief Executive noted that the Trust was hitting all of its 'must do' targets which was excellent. DToC were posing to be a challenge but good work was going on to manage the position. Overall, he saw the dashboard as a good news story. Rennie Fritchie agreed, stating that it was encouraging to see so few red arrows on the dashboard. She offered her congratulations to operational services for helping to achieve these targets.

### **13. SERVICE EXPERIENCE REPORT**

- 13.1 The purpose of this report was to provide the Board with an update and overview of patient and public engagement within the Trust during the period June to October 2008. The Director of Operations reported that the service experience report had been revised over the past few months and there was still a long way to travel; however, the report offered a generally good picture of activities taking place.
- 13.2 The Board acknowledged the valuable partnership with Guide and PALS who worked closely with the Trust to help resolve issues and provide information for patients.
- 13.3 The Director of Operations highlighted the excellent work going on within the Learning Disabilities Health Facilitation Team. He advised that the team had a good energy and had recently produced some DVDs and information leaflets. Rennie Fritchie agreed that the Team, in particular the contribution by Simon Shorrack was excellent and the team's energy and cohesion was outstanding.
- 13.4 The Board agreed that the intention of the service experience report needed to be clear, ensuring that the Board received enough information to keep it informed. The Director of Corporate Affairs noted that the Trust had a PPI strategy in place and suggested that the report could monitor the Trust's performance against this. Rennie Fritchie was keen that the report also fed in to the work being carried out by Trust Governors. Bren McInerney, Member of the Public, asked to make a comment. He informed the Board that direction was moving along from a PPI strategy to the development of a Patient and Public Empowerment Strategy.

- 13.5 The Board thanked Pam Smith, Interim Community Involvement Team Manager for assisting in producing the report.

#### 14. MENTAL HEALTH ACT MANAGEMENT ANNUAL REPORT

- 14.1 The purpose of this report was to give an overview of activities in relation to Mental Health Act Management (MHAM) and for the Board to approve objectives for the forthcoming year, 2009.
- 14.2 Frank Powell, Chair of the MHAM Committee, informed the Board that 2008 had been a busy year particularly due to the impending revised MH Act and Code of Practice implemented from 3 November. He said that these changes would provide a good opportunity for the Trust to thoroughly review its approach to MHAM during 2009.
- 14.3 Frank Powell offered his thanks to Lizzie Abderrahim who had chaired the MHAM Committee up until March 2008.
- 14.4 The Chief Executive queried whether the South West had an MH Act Network. He had known one in the West Midlands which he felt helped with focus and offered different forums for comparison. The Director of Nursing, Social Care and Therapies noted that there was a network in the South West for MH Act Administrators. Carolyn Elwes said that if there was an umbrella network in the West Midlands it might be worth the Trust sharing learning with them.
- 14.5 The Chief Executive reminded the Board that there was a distinct difference between the functioning of MH Act Managers and the MH Act Management Committee. The Director of Nursing, Social Care and Therapies noted that there were also legal issues to consider and she had spoken to the Director of Corporate Affairs about how this could be managed. Lizzie Abderrahim also highlighted the need for additional resources for MHAM activities. The Director of Finance advised that there may be resources available during the first quarter of the year and discussions would take place at the Executive Team to follow this up.
- 14.6 Frank Powell advised that the Mental Health Act Managers had been asked about appraisal methods that they would want and the majority said that they would welcome someone sitting in on reviews with them. The Chief Executive had asked the Director of Human Resources to follow up the contractual arrangements in place around the Managers.
- 14.7 The Board recommended some additional wording for the objectives for 2009 as follows:
- 4 – a) re-describing the expected role and competencies of MHAMs
- 5 – Seek to increase the diversity of appointed lay MHAMs, particularly with regard to age and ethnicity for those who apply to become MHAMs.
- 6 – Develop an independent and objective/competence based approach to the appraisal of MHAMs.

- 14.8 The Board were informed that Frank Powell and the Director of Nursing, Social Care and Therapies would take forward the objectives for 2009 initially, reporting back to the Board on progress.

## **15. INFECTION CONTROL QUARTERLY UPDATE**

- 15.1 The purpose of this report was to update the Board on the infection control and prevention measures being carried out within the Trust.
- 15.2 The Board were informed that since August 2008, there had been no cases of C.difficile diagnosed in 2gether and no new cases of MRSA or MRSA bacteraemia. There had been one outbreak of diarrhoea and vomiting at Holly House in Gloucester but this had been managed appropriately by the infection control team.
- 15.3 The National Patient Safety Agency (NPSA) Clean your hands campaign was successfully launched in 2gether on 22 July 2008. Since then the NPSA have been to visit 2gether and were impressed with the campaign within the Trust. The Director of Nursing, Social Care and Therapies reported that the NPSA visit had given the Trust the opportunity to speak to them about specific learning points regarding the differences and difficulties in hand hygiene issues within the mental health setting.
- 15.4 The Board were asked to note that overall 2gether had experienced a very good quarter in relation to infection prevention and control.

## **16. NON EXECUTIVE DIRECTOR AUDIT OF COMPLAINTS**

- 16.1 Tracey Barber presented her Non Executive Director Audit of Complaints carried out for the period July to September 2008.
- 16.2 Tracey Barber informed the Board that the Trust needed to move towards a customer first approach. She reported that the Complaints and Health Records Manager had been very positive and supportive of the Trust's move towards a more effective complaints process.

## **17. REVIEW OF COMPLAINTS**

- 17.1 The purpose of this report was to propose a set of principles for complaints management and listed a number of changes to practice for the Board to consider prior to the development of detailed revisions to the complaints policy and procedures.
- 17.2 The report included information drawn from the National Audit Office report on complaints management and highlighted that 2gether spent very little on advertising and promoting the complaints system compared to the average of all MH Trusts. The Board acknowledged that PALS helped the Trust resolve complaints at an early stage and that 2gether needed to offer more support to them to continue this work. The Director of Corporate Affairs advised that a paper had been drafted around the resourcing of PALS which would be presented to the Executive Team for initial consideration.
- 17.3 One new area considered was compensation. The Health Service Ombudsman had emphasised the need for Trusts to consider compensation. In future as a general principle the Trust will try to return the complainant and, where appropriate, others who have suffered similar injustice or hardship to the position they would have been in if the

- maladministration or poor service had not occurred. If that is not possible the Trust will consider compensation for the complainant and such others appropriately.
- 17.4 Rennie Fritchie advised that the purpose of revising the Trust's current complaints system was to enable the Trust to resolve complaints, rather than simply administering them. The Chief Executive agreed, noting that current practice was to respond to complaints, rather than looking to resolve them. Future practice would involve a trained investigating officer who would investigate the response but who would then go on to write the response, with central support. This would ensure that the process became more customer focussed.
- 17.5 Tracey Barber said that she felt that this was a very comprehensive report and the overarching principles were very good.
- 17.6 The Director of Finance noted the section on increasing resourcing of the complaints process in line with national benchmarking. She said that she did not see it as an aim simply to increase expenditure. If the Trust needed to carry out a piece of work or employ more staff this was one thing but increasing costs simply because the Trust currently doesn't spend much was not a sensible reason.
- 17.7 The Medical Director raised two concerns about the report. The first related to the re-directing of clinically trained staff to investigate complaints and the cost of this. The second related to the reference in the report to "new complaints staff" bearing in mind the Trust already had staff in place. The Director of Human Resources had already been asked to address the implications of this and the impact that the new principles would have on current staff. Rennie Fritchie said that if on reviewing this report, it had been made clear that the changes would increase pressure on clinical staff, then it would need to be reconsidered as this was certainly not the aim.
- 17.8 Lizzie Abderrahim asked about the independence of complaints investigations and who would be trained to carry these out. The Chief Executive agreed that the inclusion of independence in the process was important and this would need to be worked through.
- 17.9 Bren McInerney, Member of the Public asked to raise a point. He noted that some people did not make complaints as they were not sure how to do it. The Director of Corporate Affairs informed the Board that there was an information strategy associated with the report which included a planned route of giving people information about making complaints.
- 17.10 The Board approved the report on the review of the complaints process and agreed that it be taken to the Executive Team to move forward.

***ACTION: Executive Team to receive the proposed revisions to the complaints process for moving forward***

## **18. COUNCIL OF GOVERNOR MINUTES**

The Board noted the minutes from the Council of Governor meetings held on 9 September and 15 October 2008.

## 19. BOARD COMMITTEE REPORTS

- 19.1 The purpose of this report was to provide the Board with a regular update on the key areas of discussion taking place within the Board Committee structure.
- 19.2 The Board were presented with the reports from the Practice Standards Committee held on 22 October, the Business Development Committees held on 18 September and 15 October, the Charitable Funds Committee held on 23 October, the Performance Management Committee held on 11 November and the Governance Committee held on 19 November.
- 19.3 Tracey Barber reported that there was a lot of good work going on within business development, looking at both retention and acquisition. She felt that the way the committee was being used was good and lots of work had progressed well including the Learning Disabilities Challenging Behaviour service.
- 19.4 Dermot McMeekin informed the Board that some good discussions had taken place at the Charitable Funds Committee held on 23 October. There was some concern that the Trust did not appear to have an original memorandum or a constitution for the Charitable Funds Committee. It was suggested that the Trust get in touch with the Charities Commission to see if a copy could be obtained. The Chief Executive queried whether the Board could be assured that other source documents were in place and accessible. The Director of Corporate Affairs advised that due to the organisational changes over the past 7 years, there was some reliance on institutional knowledge; however, current documents were collated and stored centrally by the Assistant Trust Secretary. It was agreed that a short report for the Board would be produced highlighting what documents were kept by the Trust and how these could be accessed. The second item discussed by the Committee related to the continuance of the Trust's current Charitable Funds. It was agreed that a more detailed discussion about this issue would be scheduled in for a future Board meeting to consider how the Trust's Charitable fund is used, how it could be increased or whether it should be dissolved. In the meantime the Chief Executive, Director of Finance and Director of Corporate Affairs would meet for initial discussion on this matter.

***ACTION: Briefing to be written on what important documents were kept by the Trust and how they could be accessed***

***ACTION: Schedule in future discussion at Board around the future of the Trust's Charitable Funds***

***ACTION: The Chief Executive, Director of Finance and Director of Corporate Affairs would meet for an initial discussion about Charitable Funds.***

- 19.5 The Board received the summary report from the Governance Committee held on 19 November. The Committee had considered the issues in relation to the final accounts 2008/09 and timing difficulties for the sign off of the balance sheet and restated balance sheet and associated Board assurance statements. The Board agreed to delegate authority to the Governance Committee to sign off these documents and an additional Committee meeting would be scheduled to take place before the December Board meeting.

***ACTION: Additional Governance Committee meeting to be scheduled before December Board meeting***

**20. ANY OTHER BUSINESS**

There was no other business.

**21. DATE OF NEXT MEETING**

The next meeting would take place on Monday 22 December 2008 at 1.00pm at Age Concern, Station Road, Gloucester.

Signed: .....  
**Rennie Fritchie, Chair**

Date: .....

**BOARD MEETING  
ACTION POINTS**

<b>Date of Meeting</b>	<b>Item ref</b>	<b>Action</b>	<b>Lead</b>	<b>Status/Progress</b>
27 Oct	13.3	Identify whether Library Service Strategy had been presented to all relevant forums and any further action required	Hazel Watson (G Benson)	
24 Nov	9.4	Consultation on Safeguarding Adults to be considered by Board at January 2009 meeting	Shaun Clee (for Board agenda)	
	9.11	Social Inclusion Strategy to be presented to December Board for approval	Shaun Clee	On December agenda
	17.10	Executive Team to receive the proposed revisions to the complaints process for moving forward	David McGrath (for Exec Agenda)	
	19.4	Briefing to be written on what important documents were kept by the Trust and how they could be accessed  Schedule in future discussion at Board around the future of the Trust's Charitable Funds  The Chief Executive, Director of Finance and Director of Corporate Affairs would meet for an initial discussion about Charitable Funds.	David McGrath	
	19.5	Additional Governance Committee meeting to be scheduled before December Board meeting		Scheduled