



With all of us in mind

**Minutes of the Members' Council meeting held on 31 October 2012**

<b>Present:</b>	Marios Adamou Inara Bennett Ian Black Doug Dale Adrian Deakin Claire Girvan Nasim Hasnie John Haworth Andrew Hill Roman Logush Margaret Morgan Bob Mortimer Kath Padgett Dave Rigby Tom Sheard Jeremy Smith Gordon Tennant Hazel Walker Susan Walker Tony Wilkinson	Staff – Medicine and pharmacy Appointed – Staff side organisations Chair of the Trust Public – Wakefield Staff – Nursing Staff – Allied Health Professionals Public – Kirklees Staff – Non-clinical support Public – Barnsley Staff – Social care staff working in integrated teams Appointed – Barnsley Council Public – Kirklees Appointed – University of Huddersfield Public – Kirklees Appointed – NHS Barnsley Public – Kirklees Public – Wakefield Public – Wakefield Appointed – Mid Yorkshire Hospitals NHS Trust Public – Calderdale (Lead Governor)
<b>In attendance:</b>	Peter Aspinall Tim Breedon Bernie Cherriman-Sykes Alex Farrell Bernard Fee Julie Fox Sean Rayner Dawn Stephenson Andrea Wilson	Non-Executive Director Acting Director of Nursing Integrated Governance Manager (author) Deputy Chief Executive/Director of Finance Non-Executive Director Non-Executive Director District Service Director, Barnsley Director of Corporate Development and Constitutional Affairs Acting District Service Director, Wakefield
<b>Apologies:</b>	Shaun Adam Hilary Brearley Mick Burns Sue Cannon Netty Edwards David Gill Grenville Horsfall Margaret Isherwood Richard Kerry Robert Klaasen Ruth Mason Michael Smith Peter Walker David Woodhead	Public – Barnsley Appointed – Barnsley Hospital NHS Foundation Trust Appointed – Secure Commissioning Group Appointed – NHS Calderdale Staff – Nursing support Public – Kirklees Public – Calderdale Appointed – Wakefield Council Staff – Psychological Therapies Public – Wakefield Appointed – Calderdale and Huddersfield NHS Foundation Trust Public – Calderdale Public – Wakefield Public - Kirklees

**MC/12/41 Welcome, introduction and apologies (agenda item 1)**

Ian Black, Chair of the Trust, welcomed everyone to the meeting. The apologies, as above, were noted. The Chair informed the Members' Council that Noreen Young had taken retirement due to ill health from 1 November 2012. Tim Breedon, District Service Director for Wakefield, continues to act as Director of Nursing and Andrea Wilson, Deputy Director of Operations in Barnsley, is providing operational cover in Wakefield during this period. An external recruitment exercise has started with a view to making an appointment in the New Year.

The Chair also mentioned the annual members' meeting held on 10 October 2012, which was an excellent, well attended event. He thanked all who attended to support the Trust and gave particular thanks to Dave Rigby and Tony Wilkinson who presented on behalf of the Members' Council.

The Chair then invited Sean Rayner to give a brief introduction to services in Barnsley.

**MC/12/42 Declaration of interests (agenda item 2)**

There were no declarations over and above those presented to the Members' Council in January 2012 or made since.

**MC/12/43 Minutes of the previous meeting held on 1 August 2012 (agenda item 3)**

**The Members' Council APPROVED the minutes from the meeting held on 1 August 2012.** There was one matter arising.

MC/12/05 Public engagement on services in Kirklees (page 2)

Dave Rigby confirmed that the meeting had taken place on 31 August 2012 in the context of the Estates Strategy and in-patient services review, which the Members' Council will be considering in January 2013.

The Chair also took the Members' Council through the action points arising from the last meeting.

**MC/12/44 Chair's report and feedback from Trust Board (agenda item 4)**

Ian Black reminded the Members' Council that Trust Board all business meetings will be held in public from December and Governors are encouraged to attend. He highlighted a number of issues from the Trust Board meeting the previous day.

1. Trust Board approved the outline implementation plan for the Estates Strategy. The Trust's current estate does not maximise the potential to deliver the highest quality of services as close to home as possible and rooted in the communities the Trust serves. The Strategy is based on five broad themes for development:
  - development of community infrastructure;
  - Barnsley estate development plan;
  - in-patient services ('hospital');
  - support services hub;
  - disposal of surplus accommodation.

The plan must be affordable and the Trust will adopt a pragmatic approach to funding and prioritisation. Where appropriate, and where it brings benefit, the Trust will explore opportunities to work in partnership with, for example, local authorities, acute partners and GPs. Early work will include 'piloting' or 'trailing' community 'hubs', seeking to develop a new form of community facility at the heart of local communities. In addition, the Trust is working to determine how Barnsley estate can be transferred safely to Trust ownership and how the Trust can dispose of surplus accommodation.

Tom Sheard commented that two sites in Barnsley, Mount Vernon and Keresforth, are valuable assets both in terms of finance and to the wider community. Ian Black responded that the Trust has no clear view currently on

the future for individual buildings. The Strategy is a general articulation of the direction for estate that is fit for purpose to deliver high quality services.

2. Trust Board also approved the Monitor quarterly return for quarter 2 of 2012/13, which showed a financial risk rating of 4.3 and a governance rating of green.
3. Trust Board discussed the current position of Mid-Yorkshire Hospitals NHS Trust.
4. Trust Board received a report on children's services provided by the Trust and asked whether this would be a subject the Members' Council would like a more detailed briefing on. It was suggested that the Co-ordination Group considers this as part of agenda setting for January 2013. The role of OfSTED was also suggested.

### **MC/12/45 Performance report Quarter 2 2012/13 (agenda item 5)**

Alex Farrell took the Members' Council through the headlines from the quarter 2 2012/13 performance report.

Roman Logush commented on the additional expectations of front-line staff in achieving CQUIN targets. Alex Farrell responded that the work with Business Delivery Units (BDUs) to achieve care programme approach targets had identified a number of areas where the Trust could improve the way teams work and improve day-to-day working patterns.

Marios Adamou commented that a metric for professional development would enhance the assessment of performance against 'fitness for the future' and this was supported. Ian Black suggested that the Members' Council might find useful a presentation on how the Trust invests in its staff and what the workforce would look like in the future.

Dave Rigby asked about access to psychological therapies within learning disabilities (page 7 M5 report). Tim Breedon explained that this related to one district where the Trust has historically provided more than health-based services through intellectual assessments for social care. This has now been addressed and performance is on track.

Dave Rigby also asked about the impact of changes to measuring mental health clustering. Alex Farrell explained that, in the absence of national guidance, the Trust used 28 days as a measure. No material difference is expected in relation to the change and ensuring service users are clustered within a twelve month period will be a priority for the coming quarter.

Kath Padgett asked for the number of complaints with staff attitude as an issue to be included in the report as well as the % as previously requested.

Tom Sheard asked whether there was a particular reason for the increased forecast surplus. Alex Farrell responded that this was mainly due to the release of provisions around the re-structuring of support services following the transfer of services from Barnsley.

Dawn Stephenson presented the key highlights from the 'What Matters' report and confirmed that the comments on design had been taken on board for issue 3.

## **MC/12/46 Health and Social Care Act 2012 – changes to the Trust’s Constitution (agenda item 6)**

### Section 1 Changes to be implemented from 1 October 2012 (agenda item 6.1)

The proposed changes were approved by Trust Board in September 2012. The Members’ Council sub-group looked at the proposals in detail at its meeting on 17 September 2012 and were supportive of the proposals.

#### **The Members’ Council AGREED to:**

- **SUPPORT Trust Board’s agreement to the changes on page 4 of the Constitution relating to the Trust’s principle purpose;**
- **SUPPORT Trust Board’s agreement to change the Constitution to refer to ‘council’ of governors where appropriate and as advised by Monitor but retain the wording regarding the name ‘Members’ Council’, and to change reference to members of the Members’ Council from ‘Council Members’ to ‘governors’;**
- **SUPPORT Trust Board’s agreement to the technical changes to the wording in section 36 (page 16) relating to the accounts; and**
- **SUPPORT Trust Board’s agreement to the changes to the Constitution in section 37 (page 17) relating to private patient income.**

In terms of the requirement for governors to decide whether the Trust’s private patient work would significantly interfere with the Trust’s principle purpose, as this was unlikely to be an issue for the Trust, the Members’ Council agreed to include information on the level of private patient work, if any, in the quarterly performance report to the Members’ Council. Should a situation arise where there was a proposed increases in private patient income of 5% or more in any financial year, a process would be put in place for Members’ Council to consider any proposal as set out in the paper.

### Section 2 Changes to be implemented from 1 April 2013 (agenda item 6.2)

The Members’ Council was asked to consider four key areas relating to the changes brought about by the Act:

- holding Trust Board to account;
- significant transactions;
- Members’ Council skills and experience; and
- Members’ Council composition.

The key points made during feedback were as follows.

#### Holding Trust Board to account

- Understand responsibility and accountability and the difference.
- ‘Ask’ – at Members’ Council meetings and outside.
- Agree what the organisation needs to do to support the Members’ Council, both collectively and individually.
- Better induction and appraisals
  - identify skills
  - identify personal aspirations and ambitions
  - individual plan for each governor

- Should the Members' Council formally appraise Trust Board on its performance?
- Develop plan to determine what should be done
  - immediately
  - in the next year
  - in the future
- Evidence what the Members' Council does and what it does well. Should the Members' Council have its own section on the agenda?
- Attendance at Trust Board.
- Action outside of formal meetings
  - 'communications'
  - informal contact
  - what actually works and focus resource in these areas.

### Significant transactions

- Level
  - < 10% not considered significant
  - 10% to 25% assess on merit and risk
  - > 25% definitely significant
- To assess what level of scrutiny
  - where does transaction fit on the above scale?
  - early discussion between Chair and Lead Governor
  - consider composition of potential sub-group
  - agree timescales
  - ensure no big surprises
- Sub-group
  - fixed membership and utilising specific expertise
  - core group training including a 'dummy run'
  - test through transfer of estate from NHS Barnsley in a workshop format.

### Members' Council skills and experience

- Able to understand papers – clear and jargon free
- Between meetings, contact to answer questions and buddy system
- Clarity on roles both inside and outside the organisation.
- Emphasise attributes rather than skills.
- Give examples of what the Members' Council does as part of recruitment.
- Appraisal and feedback.
- Be clear on confidentiality boundaries, if any.
- Staff representatives – encourage through management structures for recruitment.
- Market role to aid recruitment.

### Members' Council composition

- Support for proposal that optimum number is 33.
- Exclude clinical commissioning groups and specialist commissioners but retain other stakeholders.
- In terms of acute trusts, could be a conflict of interest; however, provides part of a solid partnership arrangement, which should continue, but should be reciprocal.
- Review in twelve months but no ad-hoc adding of governors.
- Engage with clinical commissioning groups bearing in mind conflicts of interest. Invite to meetings to talk about specific subjects.

- Yearly appraisal of the Trust.
- Engender closer BDU/CCG links, including Members' Council.

**MC/12/47 Chair and Non-Executive Directors' remuneration (agenda item 7)**

*The Chair and Non-Executive Directors left the meeting for this item.*

Dawn Stephenson introduced this item on behalf of Alan Davis and took the Members' Council through the paper.

**The Members' Council AGREED to set up a small sub-group supported by the Director of Human Resources involving Tony Wilkinson (publicly elected, Calderdale) as Lead Governor, and Michael Smith (publicly elected, Calderdale) for continuity as the only member of the previous sub-group who remains as a governor, to review the Chair and Non-Executive Directors' remuneration.** Two further volunteers were sought. A report with recommendations will be presented to the Members' Council at its meeting in January 2013.

Dave Rigby asked that the group takes into consideration the current pay freeze in the public sector and the cost improvement programme in 2013/14.

*The Chair and Non-Executive Directors re-joined the meeting.*

**MC/12/48 Recruitment to the Members' Council (agenda item 8)**

Dawn Stephenson took the Members' Council through the paper. Ian Black commented that he sees two key commitments from governors to support the Trust.

- Contribution at Members' Council meetings.
- Thinking ahead to the end of a term of office, what can individual governors do to seek a replacement or to encourage someone to stand for election?

Dawn Stephenson suggested setting up a small sub-group to develop some promotional materials to attract people to stand for election. Tony Wilkinson suggested that governors make links with their own GP surgeries as each is required to have a patients' group and are looking for willing people to be involved.

**MC/12/49 Membership Strategy 2012/13 (agenda item 9)**

**The Members' Council approved the Membership Strategy for 2012/13.**

**MC/12/50 Members' Council dates and work programme for 2013 (agenda item 10)**

Ian Black encouraged governors to feed ideas for agenda items or discussion topics into the Co-ordination Group. **The Members' Council AGREED the Members' Council dates for 2013 and the work programme.** The Trust Board dates for 2013 were noted.

**MC/12/51 Dates of next meeting (agenda item 11)**

The next meeting will be held in the morning of **Tuesday 29 January 2013** in the Large conference room, Textile Centre of Excellence, Textile House, Red Doles Lane, Huddersfield HD2 1YF and will be followed by the annual joint meeting with Trust Board.

Ian Black reminded governors about the reviews with the Chair that provide an opportunity for a two-way discussion on what individuals want from their role and how the Trust can support this.

**Signed** ..... **Date** .....