



With all of us in mind

Minutes of the Members' Council meeting held on 6 November 2015

<b>Present:</b>	Ian Black	Chair of the Trust
	Jackie Craven	Public – Wakefield
	Andrew Crossley	Public – Barnsley
	Manvir Flora	Appointed – staff side organisations
	Claire Girvan	Staff – Allied Health Professionals
	John Haworth	Staff – Non-clinical support
	Andrew Hill	Public – Barnsley
	Bob Mortimer	Public – Kirklees
	Daniel Redmond	Public – Calderdale
	Michael Smith	Public – Calderdale (Lead Governor)
	Hazel Walker	Public – Wakefield
	Peter Walker	Public – Wakefield
	Tony Wilkinson	Public – Calderdale
	David Woodhead	Public - Kirklees
<b>In attendance:</b>	Bernie Cherriman-Sykes	Integrated Governance Manager (author)
	Rachel Court	Non-Executive Director
	Alan Davis	Director of Human Resources and Workforce Development
	Charlotte Dyson	Non-Executive Director
	Julie Fox	Deputy Chair
	Chris Jones	Non-Executive Director
	Jonathan Jones	Non-Executive Director
	Steven Michael	Chief Executive
	Sean Rayner	District Service Director, Barnsley and Wakefield
	Dawn Stephenson	Director of Corporate Development
	Karen Taylor	District Service Director, Calderdale, Kirklees and Specialist Services
<b>Apologies:</b>	Marios Adamou	Staff – Medicine and pharmacy
	Stephen Baines	Appointed – Calderdale Council
	Garry Brownbridge	Staff – Psychological Therapies
	Michelle Collins	Appointed – Wakefield Council
	Adrian Deakin	Staff – Nursing
	Emma Dures	Appointed – Barnsley Council
	Michael Fenton	Public – Kirklees
	Nasim Hasnie	Public – Kirklees
	Chris Hollins	Public – Wakefield
	Susan Kirby	Public – Kirklees
	Ruth Mason	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Margaret Morgan	Appointed – Barnsley Council
	Cath O'Halloran	Appointed – University of Huddersfield
	Jules Preston	Appointed – Mid Yorkshire Hospitals NHS Trust

**MC/15/32 Welcome, introduction and apologies (agenda item 1)**

Ian Black, Chair of the Trust, welcomed everyone to the meeting.

**MC/15/33 Declaration of interests (agenda item 2)**

There were no further declarations over and above those already made by governors.

**MC/15/34 Minutes of the previous meeting held on 24 July 2015 and notes from the development session held on 13 October 2015 (agenda item 3)**

The Members' Council **APPROVED** the minutes from the meeting held on 24 July 2015. There were no matters arising.

**The Members' Council RECEIVED the notes from the development session held on 13 October 2015.** Ian Black commented that the session had been a very good event and all who attended contributed hugely but he was disappointed at the level of attendance. The session is very much seen as part of the governor role. He will discuss the session in his annual reviews with governors early in 2016. Governors who did attend felt that it was an excellent and helpful event, providing an opportunity to get to know each other better.

#### **MC/15/35 Chair's report and feedback from Trust Board/Chief Executive's comments (agenda item 4)**

Ian Black began his remarks by commenting on Steven Michael's planned retirement at the end of March 2016 and his tenure as Chief Executive for the last nine years during a time of unprecedented challenge and change. The Chair and Chief Executive relationship is very dependent on the personalities involved and it will be a significant transition. There are three key areas of work, which Steven Michael will ensure are finalised prior to his retirement in terms of:

- approval of plans and budgets for 2016/17;
- delivery of the 2015/16 plan; and
- Care Quality Commission inspection.

On behalf of the Members' Council, he thanked Steven for his contribution and commented that the Trust is where it is now due very much to Steven's efforts. He is and has been an outstanding leader.

Ian Black went on to remind the Members' Council that Trust Board approved a deficit budget in March 2015 of £700,000 to reflect both capital and revenue investment in services to continue to enhance and improve the Trust's offer to service users. He was, therefore, comfortable with the position. At its meeting in October 2015, Trust Board approved a revised financial position with a small surplus of £100,000 due to prudent financial management. He added that foundation trusts are under some pressure to review and revise their financial outturn; however, the Trust's position reflects its current financial standing.

He went on to comment on the following.

- The Care Quality Commission (CQC) has advised that it will undertake an inspection of Trust services in March 2016 (to be discussed further under agenda item 9).
- Governors' annual reviews will take place in January/February 2016.
- Creative Minds won the best Collaborative Arts Project in the recent National Building Better Healthcare Awards.
- Trust Board has been shortlisted for the Health Service Journal Board Leadership award and he and Steven Michael presented to the judging panel last month. The Trust's forensic child and adolescent mental health service has also been shortlisted in the Specialist Services Re-design category.
- Child and adolescent mental health services in Kirklees and Calderdale where the next summit meeting will not be until December 2015 and will concentrate primarily on the new service.

Steven Michael began his remarks by thanking the Members' Council for its support to Trust Board, the Executive Management Team and to him personally. This has built a really good legacy for the relationship with the governing body. He went on to say that he felt privileged to have occupied the position of Chief Executive over the last decade; however, as the NHS enters a new phase, the Trust needs continuity over the next four to five years at senior level.

He went on to comment on the following.

- The current activity in the NHS is an indication of how the provider landscape, for both primary and secondary care, is beginning to change. A key consideration for Trust Board, therefore, is to ensure the organisation is well-prepared to meet the changes and challenges. The Members' Council can support this through continuing to provide challenge to Trust Board and holding non-executive directors to account.
- The Trust has had a healthy response to the advert to recruit a Director of Forensic and Specialist Services with a longlist of six candidates. He is confident the Trust can make a high-calibre appointment.
- The proposed Tier 4 child and adolescent mental health service development with Priory is currently on hold as there is no clear direction from NHS England for the commissioning of the service; therefore, the Priory board does not feel it can commit to any new developments at this time.

Steven Michael ended by commenting on the Trust's capital programme, which recently saw Trust Board approval for two community hubs in Wakefield and Pontefract. The two developments add to community hubs at Laura Mitchell House in Halifax and at New Street in Barnsley. The Wakefield hub will be based in a central site in the city and the Pontefract hub will see the re-development of an existing Trust property, Baghill House. Both will be built on an agile working model. The Chief Executive also commented on the refurbishment of non-secure estate on the Fieldhead site (Trinity, Chantry and Priory). Trust Board is currently working through financial scenarios but is committed to taking the development forward. Monitor (the Trust's regulator), on behalf of the Department of Health, has asked the Trust to review its capital programme for 2015/16. The Trust has responded that, following a review of the projected capital spend for 2015/16, its forecast spend, which it provided to Monitor at month 6, continues to be the projected position. To defer any of the planned schemes at this point could not be done safely and/or without causing additional clinical and financial pressures for this and next year. He cautioned that this might have implications for the approach adopted centrally.

Tony Wilkinson asked if the change in surplus related to a one-off windfall. Ian Black responded that the Trust is hoping to sell a piece of land but the sale may conclude after the end of March 2016. The change in the end-of-year financial position is due to prudent financial management and an improved in-year position. Steven Michael added that the Trust's overall financial position is very strong and it forecast a small in-year deficit in order to plan for the future; however, there is increasing pressure to be seen to be achieving a surplus.

He cautioned, however, that there is a financial risk with this year-end in relation to the planned disposal of some capital assets.

### **MC/15/36 Independent review of the Trust's governance arrangements (agenda item 5)**

An executive summary of the report and the Trust's action plan were circulated with the papers for this meeting. Ian Black commented that he took comfort from the similarity between Trust Board's self-assessment and the assessment provided by Deloitte following its review. Steven Michael commented that the CQC will look at the organisation from the front-line upwards and a key domain is whether the organisation is well-led; therefore, it is very useful to have had this review. All actions will be completed by the end of the financial year.

### **MC/15/37 Holding Non-Executive Directors to account (agenda item 6)**

Ian Black began by reminding governors that the duty to hold Non-Executive Directors to account for the performance of Trust Board is a key part of their role. The discussion item was designed to help governors find out more about the Non-Executive Directors, the role they play in the Trust and how they perform their role as a member of the Trust's unitary board effectively. Involved in the session were Rachel Court, Charlotte Dyson, Julie Fox, Chris Jones and Jonathan Jones. Ian Black explained that Laurence Campbell was on leave. Each Non-Executive Director, including the Chair and Laurence Campbell, provided background information to describe what they believe they bring to the Trust, their individual experience, skills and areas of expertise, why they became a Non-Executive Director and why this Trust, for established Non-Executive Directors, what they have achieved and, for newly appointed, what they would like to achieve, and their role in the Trust. Suggested areas for probing were:

1. how and on what have you challenged the Executive Management Team and how effective has this been?
2. what do you do to prepare to ensure you understand the Trust's business and gather information to enable you to challenge effectively?
3. where do your skills add value?
4. what preparation have you done in terms of taking on this new role?
5. has the Members' Council influenced any change in behaviour, your views or the way Non-Executive Directors provide challenge at Trust Board?
6. how do you ensure Trust Board acts in the best interests of its service users/patients?

All involved agreed this had been an excellent session, which allowed governors to explore both the new Non-Executive Directors' potential and skills, and the delivery of the longer serving Non-Executive Directors. It was appreciated that Non-Executive Directors had responded with integrity, openness and honesty in their answers.

### **MC/15/38 Implementing the Trust's plans (agenda item 7)**

#### Review of the Trust's five-year plan (agenda item 7.1)

James Drury, Deputy Director of Strategic Planning, introduced this item. Key areas for this year and next were highlighted as:

- strengthening operational links with primary care, the third sector and local authorities, and extending the application of Creative Minds and Recovery Colleges to foster and create resilient communities supporting integrated care;
- ensuring operational implementation of the current tranche of transformation projects, applying the understanding derived from health intelligence and marketing work;
- managing the acute mental health pathway so that occupancy rates in acute mental health wards are running at occupancy levels that enable flow, enhance quality and reduce the use of beds out-of-area;
- ensuring people needing early intervention support with mental health get timely and evidence-based care; and
- ensuring appropriate urgent care services are in place for all service users.

Daniel Redmond asked where day services featured. Steven Michael responded that these are linked to the development of recovery colleges and the Trust's recovery-based approach. Bob Mortimer commented that care home provision is reducing and asked what could be done. James Drury responded that the Trust needs to be clear on its contribution and what it can do to support the sector through, for example, Portrait of a Life and care home liaison services. Steven Michael added that the Trust needs to be imaginative in its response but it cannot take on the provision of care homes.

### Service transformation (agenda item 7.2)

Steven Michael introduced this item and commented that any service change or development has to fulfil three criteria.

- It must reflect the overall mission and strategic direction of the Trust.
- It must improve quality.
- It must improve efficiency and effectiveness.

If a service change or transformation does not provide the above, why would the Trust do it?

The paper provided set out the current position for each workstream of the transformation programme and Steven Michael reminded the Members' Council that, in the background, is the tasking of the NHS to find £30 billion of savings over the next five years and, in return, receive £8 billion investment. The challenge for the sector is to make any headway in achieving savings given its current financial position.

- The mental health workstream is the most advanced, which is appropriate given this is largest element of Trust services. New models of service for acute and community, memory assessment and rehabilitation and recovery are planned for implementation in 2015/16 in order to align with annual planning and cost improvement programme assumptions. A key enabler is the agreement of commissioners for new service models and reflection of these in 2015/16 contracts.
- The learning disability workstream is at full business case stage for planned implementation in 2016. A key enabler is commissioner agreement to the model and funds flow.
- The forensic service is preparing for national procurement to demonstrate an effective operational model and develop a clinical network and pathway approach with partners.
- For general community, services were tested in 2015/16 through tender or service specification (intermediate care, integrated care and 0-19 services). Work has begun to align workstreams with tender activity and annual planning for 2016/17.

Key supporting enablers for the programme focus on:

- changes in workforce and how the Trust works in partnership with other organisations;
- development of estate that meets and supports service needs; and
- information management and technology that supports the way people work and how services are delivered.

### **MC/15/39 Performance report Quarter 2 2015/16 (agenda item 8)**

Ian Black commented that, led by Alex Farrell, the Trust is reviewing its performance reporting as a result of the well-led review. He highlighted the key performance indicators as measured by Monitor and Steven Michael took the Members' Council through the key highlights from the quarter 2 performance report. The Members' Council provided feedback that this summary information was better suited to their needs.

### **MC/15/40 Care Quality Commission – preparing for our inspection (agenda item 9)**

Steven Michael took the Members' Council through the process and Trust preparation for the inspection in March 2016. He confirmed that a preliminary rating would be shared with the Trust at the end of the inspection team visit (starting on 7 March 2016) and a formal report will follow two to three months later for the Trust to review for factual accuracy. This will be followed by a Quality Summit, which is a formal meeting to provide the rating and any action

the Trust is required to take. The Trust would then be required to develop an action plan, approved with the CQC and Monitor.

Claire Girvan asked if the initial rating would be shared. Steven Michael responded that the CQC will advise the Trust what it can share. He went on to comment that the Trust should be aiming for a 'good' rating.

Service users and carers, and the Members' Council will be given the opportunity to give their views to inspectors and anyone can provide comments via the CQC website. A potential user of Trust services will be able to look at individual service ratings not just the amalgamated rating given the Trust.

Ian Black confirmed that the Members' Council will continue to be informed and involved in progress and Trust planning.

**MC/15/41 Date of next meeting (agenda item 10)**

The next meeting will be held in the afternoon of Wednesday 3 February 2016 in the large conference room, Learning and Development Centre, Fieldhead, Wakefield, WF1 3SP. The remainder of meetings for 2016 were confirmed as follows.

Friday 6 May 2016

Morning meeting

Elsie Whiteley Innovation Centre, Hopwood Lane, Halifax, HX1 5ER

Friday 22 July 2016

Morning meeting

Legends Suite, Oakwell Stadium, Barnsley FC, Grove Street, Barnsley, S71 1ET

Wednesday 26 October 2016

Afternoon meeting

Conference room 1, Textile Centre of Excellence, Textile House, Red Doles Lane, Huddersfield HD2 1YF

Ian Black ended the meeting by reminding the Members' Council that there is an open invitation for governors to attend the public sessions of Trust Board meetings and information on the dates and venues was included in the pack for today's meeting.

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