

Minutes of the Members' Council meeting held on 26 July 2017

Present:	Marios Adamou	Staff – Medicine and Pharmacy
	Bill Barkworth	Public – Barnsley
	Ian Black	Chair
	Bob Clayden	Public – Wakefield
	Jackie Craven	Public – Wakefield
	Andrew Crossley	Public – Barnsley
	Adrian Deakin	Staff – Nursing
	Claire Girvan	Staff – Allied Health Professionals
	Stefanie Hampson	Appointed – Staff side organisations
	Lin Harrison	Staff – Psychological therapies
	Tin Harrison	Public – Kirklees
	Nasim Hasnie	Public – Kirklees
	John Haworth	Staff – Non-clinical support
	Carol Irving	Public – Kirklees
	David Jones	Appointed - Wakefield Council
	Debika Minocha	Public – Wakefield
	Bob Mortimer	Public – Kirklees
	Chris Pillai	Appointed – Calderdale Council
	Phil Shire	Public – Calderdale
	Jeremy Smith	Public – Kirklees
	Ian Turnock	Public – Calderdale
	Peter Walker	Public – Wakefield
In attendance:	Tim Breedon	Director of Nursing and Quality
	Laurence Campbell	Non-Executive Director
	Alan Davis	Director of HR, OD and Estates
	Charlotte Dyson	Non-Executive Director
	Julie Fox	Deputy Chair
	Chris Jones	Non-Executive Director
	Emma Jones	Integrated Governance Manager (author)
	Dawn Stephenson	Director of Corporate Development
	Karen Taylor	Director of Delivery
	Salma Yasmeen	Director of Strategy
Apologies:	<u>Members' Council</u>	
	Shaun Adam	Public – Barnsley
	Neil Alexander	Public – Calderdale
	Chris Hollins	Public – Wakefield
	Sarah Kendal	Appointed – University of Huddersfield
	Ruth Mason	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Jules Preston	Appointed – Mid Yorkshire Hospitals NHS Trust
	Caroline Saunders	Appointed – Barnsley Council
	Richard Smith	Appointed – Kirklees Council
	Gemma Wilson	Staff – Nursing support
	David Woodhead	Public – Kirklees
	<u>Attendees</u>	
	Dr Adrian Berry	Medical Director / Deputy Chief Executive
	Mark Brooks	Director of Finance and Resources
	Kate Henry	Director of Marketing, Communication and Engagement
	Sean Rayner	BDU Director, Barnsley and Wakefield
	Rachel Court	Non-Executive Director
	Carol Harris	BDU Director, Forensic and Specialist Services, Calderdale and Kirklees
	Rob Webster	Chief Executive

MC17/31 Welcome, introductions and apologies (agenda item 1)

Ian Black (IB), Chair, welcomed everyone to the meeting including governors who were elected and re-elected in April 2017 and took up their appointments from the 1 May 2017. He also advised that Cr Jessica Carrington had retired from the Members' Council with Cr David Jones as new the appointed member for Wakefield Council. Apologies above were noted, including Rob Webster with Alan Davis (AGD) acting as Accounting Officer.

IB commented that there was a good attendance of governors at the Trust Board meeting on 25 July 2017 and he encouraged all governors to attend in future as a part of discharging their responsibilities of holding NEDs to account.

Jackie Craven left the meeting.

MC17/32 Members' Council business items (agenda item 2)

MC/32a Lead Governor appointment (agenda item 2.1)

IB reported that he had invited expressions of interest from publicly elected Governors at the last Members' Council meeting on 28 April 2017 and following the meeting, he wrote to all Governors formally inviting applications. Two (2) self-nominations were received and the Nominations Committee invited the nominees to their meeting on 13 June 2017 to discuss their applications.

Nasim Hasnie (NH), as a member of the Nominations Committee, commented that the recommendation was a unanimous decision by the Nominations Committee.

It was RESOLVED to APPROVE the recommendation from the Nominations Committee to appoint Jackie Craven as Lead Governor for two (2) years.

Jackie Craven returned to the meeting.

MC17/33 Declaration of Interests – Further declarations as part of annual exercise (agenda item 3)

The Trust's Constitution and the NHS rules on corporate governance require a register of interests to be maintained in relation to the Members' Council. Members are required to notify the Trust of any declarations and any changes to allow the Register to be amended. Any such changes are reported to the Members' Council, providing assurance that there is no conflict of interest in the administration of the Trust's business. The declared interests of governors are reported in the annual report and the register of interests is published on the Trust's website.

Further declarations over and above those set out in the report were made:

Governor	Description of interest
JONES, David Appointed, Wakefield Council	➤ Daughter works for the Trust.
TURNOCK, Ian Publically elected, Calderdale	➤ Product Manager at DXC Technology (responsible for Lorenzo Electronic Patient Records system for Mental Health and Community providers).
WALKER, Peter Publically elected, Wakefield	➤ Member of Ossett Community Centre Committee.
PILLAI, Chris Appointed, Calderdale Council	➤ Associate Hospital Manager.

It was **RESOLVED** to **NOTE** the individual declarations from governors in addition to those declared at the meeting on 28 April 2017 and **CONFIRM** the changes to the Register of Interests.

MC17/34 Minutes of the previous meeting held on 28 April 2017 (agenda item 4)

It was **RESOLVED** to **APPROVE** the minutes from the meeting held on 28 April 2017 with the amendment to typographical errors.

In relation to the action point MC17/19 Integrated Performance Report (IPR) Quarter 4 2016/17 (Clinical Commissioning Group withdrawing commissioning for counselling service at GPs), Carol Irving (CI) commented that the withdrawal of funding would see an increase in people who come through the Trusts service which may put pressure on the service. IB commented that decommissioning of services was by a Clinical Commissioning Group and CI may wish to raise her concern directly with them. It may lead to additional referrals from GPs to the Trusts services. CI asked what the referral process was. IB commented that referrals could be made by GPs to the Trust services and that people could also self-refer. TB commented that it was important through referrals that people are put in contact with the right psychological service and that perhaps further communications was needed with GPs on the types of services available from the Trust.

Action: Tim Breedon

MC17/35 Chair's report and feedback from Trust Board (agenda item 5)

Chair's report

IB began his remarks by reminding the Members' Council that the Trust falls within two Sustainability and Transformation Plans (STPs) with the West Yorkshire STP lead by our Chief Executive Rob Webster and the South Yorkshire and Bassetlaw STP lead by Sir Andrew Cash, the Chief Executive of Sheffield Teaching Hospitals. Being a part of two STPs presents challenges as they are developing at different speeds.

IB advised that at the Trust Board meeting held on 25 July 2017 a lot of time was spent discussing potential risks to the organisation and the Trust's appetite for risk for example there is a have a different appetite for clinical compared to financial and mitigating actions in place. The Members' Council discussed what information they would like to receive in relation to the risk management processes.

Marios Adamou (MA) commented that the management of risk was the responsibility of the Trust Board, with assurance through feedback to the Members' Council that the process was working. IB commented that the two main committees of the Trust Board that discuss risk were the Clinical Governance and Clinical Safety Committee and Audit Committee. Julie Fox (JF) as Chair of the Clinical Governance and Clinical Safety Committee commented that the committee reviewed risks that related to clinical matters with a deep dive on two risks at each meeting. When the committee did not feel assured that there were enough mitigating actions in place to reduce the risk this was escalated for further review. Laurence Campbell (LC) as Chair of the Audit Committee advised that the committee uses the same process to review risks as well as an overarching review of the risk management processes and work of committees. Some risks would always be present but it was how they were managed in accordance with our risk appetite.

Andrew Crossley (AC) commented that he attended the Trust Board and he felt it would be good for the Members' Council to understand when new organisational risks are added. IB highlighted that one of the risks was in relation to Microsoft Licences as this was something that the centre used to pay for that now individual Trusts need to pay for and had not been included in the budget. The Members' Council Coordination Group would discuss could be presented to the Members' Council in future around risk.

Action: Ian Black

Chief Executive's comments

As Accounting Officer in Rob Webster's absence, AGD reflected on the recent ranking of the NHS as number one internationally in terms of an effective system. He commented that while the pressures were known there was also a lot of good work going on, on a daily basis. The Trust holds its annual Excellence Awards to recognise the work of the services and staff and acknowledged the commitment of people who go above and beyond.

AGD advised that learning was taking place following the tragic events at Grenfell Tower. While the Trust did not have tower block buildings, fire safety has always been a high priority ensuring our fixtures, fittings and furniture are up to high standings. While it was not a requirement for the fire services to inspect the sites in response to Grenfell we did revisit sites. In terms of standards, the cladding on the Trusts' buildings is of a higher standard than that required. Training is also a priority, with fire safety training to be increased to 95% for staff in inpatient areas over the next six months. Work was also taking place to review high risk areas, the no smoking policy, banned items, and search processes, balancing individuals rights with safety.

Bob Mortimer (BM) commented that it was important that the Trust communicates the positive achievements of the Trust's services and staff to the press. IB commented that several services had been recognised externally for their contribution such as the excellent work of the Barnsley integrated community equipment service being featured on the BBC One Show, but we could always do more to promote the work of our services.

MC17/36 Integrated performance report Quarter 1 2017/18 (agenda item 6)

LC introduced the presentation on the Trust's performance in quarter 1, which highlighted areas from the detailed Integrated Performance Report (IPR) that went to the Trust Board meeting on 25 July 2017 and was available on the Trusts website.

TB highlighted the following in relation to Quality:

- Overall fill rates for majority of Trust inpatient areas remain above 90% for registered staff. Trustwide average fill rate of 110%.
- The overall fill rates show a reduction from the previous month but remain above threshold.
- When staffing fell below the escalation thresholds, safe services were maintained using the preferred guidance tool.
- 10 serious incidents reported in June, 3 of which were suicide or apparent suicide. 1 incident will become subject to external review.
- Within friends and family tests, 98% recommend community services and 86% mental health services.
- 2017/18 CQUIN area have been agreed and are now subject to close monitoring.

TB highlighted t in relation to NHS Improvement metrics that Improving Access to Psychological Therapies (IAPT) proportion of people moving to recovery had improved to 56.4% in June and 50% for Quarter 1.

Karen Taylor (KT) highlighted the following in relation to Locality:

- Increased use of adult acute beds by Child and Adolescent Mental Health Services (CAMHS) patients as alternatives unavailable.
- New model of care for CAMHS has been approved by NHS England – this should assist inpatient pressures.
- Out of area bed spend has reduced but pressures remain.
- Agency spend shows reduction as planned.
- Improving Access to Psychological Therapies (IAPT) performance positive with 50% threshold achieved by each BDU.
- New perinatal service is under development – plan to start in September
- Trinity ward receives Accreditation for Inpatient Mental Health Services (AIMS).

Salma Yasmeeen (SY) highlighted the six strategic priorities for 2017/18:

- Improving health - People at the centre.
- Improving health - Joined up care.
- Improving care - Quality counts, safety first.
- Improving care - Compassionate leadership.
- Improving resources - Operational excellence.
- Improving resources - Digital by default.

Rob Adamson (RA) highlighted the following in relation to Finance:

- Small surplus in each month.
- Improvements in agency spend compared to last year.
- Improvements in out of area bed spend compared to last year.
- Cash balance is reasonable.
- Cost improvements in line with plan.
- Risks include insufficient cost savings identified, services being tendered, out of area beds, CQUIN achievement.

AGD highlighted the following in relation to Workforce:

- Staffing summit took place at the beginning of June with a range of staff involved and reviewed a range of topics including reducing sickness, effective rostering and recruitment.
- Sickness rate remained at 4.9% in June.
- Mental Capacity Act and Mental Health Act training completion has increased to 78% and 70.5% respectively.
- Task group focused on reducing sickness has met and action agreed on rapid referrals for musculoskeletal (MSK) and risk.
- Areas below target on appraisal completion producing a trajectory.

Adrian Deakin (AD) asked what could be attributed to the significant reduction in agency spend. RA commented that the reduction had been obtained through no longer using admin and clerical agency staff and a shift in nursing agency through substantive appointments and staff bank. RA acknowledged that there was still work to do.

Claire Girvan (CG) asked what plans were in place to ensure staff can use the skills they have, linked to recruitment and retention. TB commented that some of this was included as part of the work through the transformation programme and work was now taking place around skill mix to assist with safer staffing requirements.

AC asked about the work taking place to address sickness absence rates. AGD commented in relation to other similar Trusts we have the second lowest absence rate with a large majority being musculoskeletal and stress related issues. The rate is currently above the target 4.5% but there are a lot of plans in process to help address this including the rapid referrals for MSK.

MC17/37 Annual report, accounts and Quality Account 2016/17 (agenda item 7)

LC as Chair of the Audit Committee introduced the presentation on the Annual Report and accounts for 2016/17. All submissions (annual report and accounts, quality account) were made on time with favourable audit options. The documents are now publicly available as they have been laid before Parliament and the details would be presented in more depth at the Annual Members' Meeting on 19 September 2017. The following was highlighted:

- Re-rated as 'Good' by the Care Quality Commission (CQC)
- Changes to the Trust Board
- Improved staff survey results
- Staff receiving the flu vaccination increased from 33% to 77%
- Wakefield and Pontefract Hubs opened
- National recognition for our services and initiatives
- Key issues being addressed are Child and Mental Health Services (CAMHS) access, out of area bed placements, Contract tendering, staff engagement given pressure and pace of change, and agency staffing costs.

JF as Chair of the Clinical Governance and Clinical Safety Committee introduced the presentation on the Quality Account for 2016/17. TB highlighted the following:

- We want to improve quality throughout our services and support service users to achieve positive outcomes and live life to the full.
- We deliver high quality services through strong clinical leadership, opportunities for innovation, and robust governance.
- Quality improvement is a priority at Board level and throughout the Trust.
- Continuously improving is embedding our mission and values.
- As a learning organisation we encourage all our staff and service users to help us improve.
- Each year a number of quality priorities are set to help drive quality forward with the Members' Council Quality Group assisting in their development. All governors are welcome to be members. In 2016/17, our performance against the priorities were RAG rated as 20 green, 6 amber, 3 red and 3 awaiting data. The Trust met 86% of its quality innovation goals.

IB commented that the Annual Report and accounts including the Quality Account could be found on the Trust website.

MC17/38 Incident management annual report 2016/17 (agenda item 8)

JF introduced the presentation on the incident management annual report for 2016/17. Tim Breedon (TB) highlighted the following:

- 13,126 incidents were reported in 2016/17 with a 5% increase in reporting on 2015/16.
- 89% of incidents resulted in no/low harm.
- 65 Serious Incidents (SI) were reported, SIs account for 0.4% of all incidents reported.
- There were no homicides and no Never Events.

- Reduction in apparent suicides in 2016/17 (28), compared to 2015/16 (41).
- High reporting rate with high proportion of no/low harm is indicative of a positive safety culture.
- Development and coordination of the Patient Safety Strategy and associated implementation plans eg Sign up to Safety, Suicide prevention strategy, national kitchen table event, Duty of Candour reporting.
- Introduced feedback option to reporters to aid closing the loop
- Continued development of serious incident processes.
- Continued support for BDU learning event forums.
- Worked closely with Mazars on learning from deaths.
- Developed processes and Datix to support mortality requirements.
- Work will continue on the Patient Safety Strategy and Suicide Prevention Programme, preparation for new mortality reviews.

CG asked if the suicide prevention training offered to staff could also be offered to carers as a way to assist people in crisis. TB commented that assistance to carers would be a big part of the suicide prevention strategy which is currently being developed and acknowledged that there were some good trainers within the Trust.

Bob Clayton (BC) asked if staff were supported to be involved in volunteer work such as with the Samaritans. TB confirmed that staff are supported to take part in volunteer work.

Jackie Craven (JC) commented that she had been involved in work as part of Future in Mind and there had been a big response from schools around that. TB commented that the Trusts staff had been part of work groups involved in prevention and self-harm talks at schools.

MC17/39 Customer services annual report 2016/17 (agenda item 9)

DS reported that in 2016/17 through Customer Services, there were 215 formal complaints and 647 compliments. In addition to formal complaints, 510 comments and concerns were raised and the Trust received 381 requests under the Freedom of Information Act. Most complaints contain a number of issues; the most frequently raised issues were communication, values and behaviours, care, access, treatment and admission and discharge. There had been a decrease in the total number of formal complaints compared to 2015/16 with more people being supported to resolve their issues at service level before they became a complaint.

Lin Harrison (LH) asked what process takes place if there is a delay in response. DS advised that through the process staff are in contact with the person who submitted the request and discuss any delays.

It was RESOLVED to RECEIVE the Customer Services Annual Report 2016/17 and NOTE the feedback received through Customer Services in the financial year 2016/17

MC17/40 Trust Board appointments (agenda item 10)

MC/17/40a Non-Executive Director appointments (agenda item 10.1)

IB reported that the appointment of two (2) Non-Executive Directors would replace Jonathan Jones who retired from the Trust Board on 31 December 2016 and Julie Fox who retires from the Trust Board on 31 July 2017. The Nominations Committee oversaw the process through the meetings held from December 2016 to 11 July 2017, with updates provided to the Members' Council meetings on 3 February 2017 and 28 April 2017.

Penna (through a procurement framework) was once again appointed to support the Trust in the recruitment process to provide a degree of independence and transparency through the use of an external recruitment consultant to assisting the front-end of the process. A total of 87 applications were received and 15 longlisted for initial interview by Penna. Following this, 6 candidates were shortlisted and supported by the Nominations Committee for the final interview process as outlined in the paper. The Nominations Committee then met on 11 July 2017 and discussed and supported the recommended candidates for appointment - Angela Monaghan and Kate Quail.

It was RESOLVED to APPROVE the recommendation from the Nominations Committee to appoint Angela Monaghan and Kate Quail as Non-Executive Directors from 1 August 2017.

MC/17/40b Deputy Chair / Senior Independent Director appointment (agenda item 10.2)

IB reported that the appointment of a Non-Executive Director as the Deputy Chair / Senior Independent Director would replace Julie Fox who retires from the Trust Board on 31 July 2017. Following the annual appraisal of all Non-Executive Directors, two (2) potential candidates were identified. The candidates were invited to have a discussion with IB and JF, Deputy Chair, regarding the role. The Nominations Committee then met on 11 July 2017 and considered a proposal from the Chair regarding the appointment and support the appointment of Charlotte Dyson.

It was RESOLVED to APPROVE the recommendation from the Chair, on behalf of the Nominations Committee, on the appointment of Charlotte Dyson as Deputy Chair / Senior Independent Director for a period of one (1) year from 1 August 2017 to 31 July 2018.

Ian Black left the meeting.

MC17/41 Members' Council business items (agenda item 11)

MC17/41a Chairs appraisal (agenda item 11.1)

JF reported that as previously agreed there were 5 (five) strands to the Chair's appraisal:

1. Facilitated by the Deputy Chair, governors were asked to assess the Chair's performance in an interactive session on 28 April 2017.
2. Trust Board and other Directors were asked to complete an online questionnaire.
3. Stakeholders were asked to complete an online questionnaire.
4. The Chair undertook a self-assessment in the form of an online questionnaire.
5. The Deputy Chair met with both Non-Executive Directors and support staff to elicit their views on the Chair's performance.

Overall it was shown that the Trust has an excellent Chair. A review of the objectives set for 2016/17 showed all achieved or partly achieved and the outcome of the appraisal has been in the setting of objectives for 2017/18 as outlined in the paper.

It was RESOLVED to RECEIVE the report on the Chair's appraisal.

Ian Black returned to the meeting.

MC17/41b Members' Council Coordination Group annual report 2016/17 (agenda item 11.2)
DS reported that the Members' Council Coordination Group was a key group with Governors working with the Lead Governor and Chair to shape the agenda of Members' Council meetings. The paper provides assurance to the Members' Council that the Group was fulfilling its remit and meeting its terms of reference.

IB commented that all Governors were welcome to raise discussion items for consideration and to advise if they would like to become members of the Group.

It was RESOLVED to RECEIVE the Annual Report from the Co-ordination Group for 2016/17.

MC17/41c Scheme of delegation update (agenda item 11.3)

DS reported that the detailed review of the last version of the Scheme of Delegation included Governors as part of the review of the Constitution and was approved by Trust Board in January 2017 and the Members' Council in February 2017. At that time the Executive Management Team requested that a further review of the Scheme of Delegation take place. The further amendments include areas of delegated authority that are in place are clearly stated, documents cross referenced and updated to reflect current guidance, and duplications removed to make it easier to read. The amendments have been considered by the Executive Management Team and Audit Committee and approved by the Trust Board on the 25 July 2017.

It was RESOLVED to APPROVE of the changes to the Scheme of Delegation.

MC17/42 Closing remarks and dates for 2017 (agenda item 12)

As part of his closing remarks, IB advised the Members' Council that he would be retiring from the Trust Board on 30 November 2017. He advised that he had been Acting Chair from January 2012 and formally appointed in April 2012 now coming to the end of his second three year team. He had discussed the timing of his retirement with Rob Webster and felt it would be an appropriate time in the Board cycle with the Chief Executive and Director of Finance both in post for over a year now, the appointment of a new Deputy Chair, and the appointment of two Non-Executive Directors at this meeting. The Nominations Committee have agreed a timetable and would have overview of the recruitment process with a recommendation for appointment of a new Chair to come to the next Members' Council meeting. He commented that one of the things he has been most proud of was the Members' Councils journey. The work the Members' Council does keeps the Trust on its toes, keeps us on track and significantly helps bring to our attention areas for increased monitoring.

IB asked the Members' Council to note the following future meeting dates for the Council:

- Annual Members' Meeting: Tuesday 19 September 2017, afternoon meeting at Huddersfield Town Hall, Huddersfield
- Member's Council: Friday 3 November 2017, morning meeting at the Elsie Whiteley Innovation Centre, Halifax



Signed

Date 3 November 2017