

Members' Council

Friday 2 November 2018

9:30am (with lunch provided at 12noon). This will be followed by the annual Joint Trust Board / Members' Council meeting from 12:30 to 2:30pm

Large conference room, Wellbeing & learning centre, Fieldhead, Ouchthorpe Lane, Wakefield, WF1 3SP

Item	Time	Subject Matter	Presented by		Action
	9:00am	<i>Arrival and networking</i>			
1.	9:30am	Chair's appraisal (Governors ONLY)	Charlotte Dyson, Deputy Chair	Paper and discussion	Interactive session
2.	10:15am	Welcome, introductions and apologies	Angela Monaghan, Chair	Verbal item	To receive
3.	-	Declaration of Interests	Angela Monaghan, Chair	Verbal item	To receive
4.	-	Minutes and actions of the previous meeting held on 3 August 2018	Angela Monaghan, Chair	Paper	To agree
5.	10:30am	Chair's report and feedback from Trust Board and Chief Executive's comments	Angela Monaghan, Chair Rob Webster, Chief Executive	Paper Verbal item	To receive
6.	10:50am	<u>Trust Board appointments</u> 6.1 Chair and Non-Executive Directors' remuneration	Jackie Craven, Lead Governor / Alan Davis, Director of HR, OD & Estates	Paper	To agree
7.	11:00am	<u>Members' Council business items</u> 7.1 Governor appointment to Members' Council groups and committee	Jackie Craven, Lead Governor / Angela Monaghan, Chair	Paper	To agree

Item	Time	Subject Matter	Presented by		Action
		7.2 Members' Council objectives	Jackie Craven, Lead Governor / Angela Monaghan, Chair	Paper	To agree
		7.3 Governor engagement feedback	Emma Jones, Company Secretary	Paper	To receive
8.	11:20am	Performance Report Quarter 2 2018/19. <i>There will be a presentation of the key issues. Full performance reports are available on the Trusts website under: About us > Our performance > Performance reports</i>	Laurence Campbell, Non-Executive Director / Mark Brooks, Director of Finance	Presentation	To receive
		- Focus on - Sickness absence	Alan Davis, Director of HR, OD & Estates	Presentation	To receive
		- Customer Services Annual Report 2017/18	Mike Doyle, Deputy Director of Nursing & Quality	Paper	To receive
9.	11:55am	<u>Closing remarks, work programme, and dates for 2019-20</u>	Angela Monaghan, Chair	Paper and verbal item	To receive
		- Work programme 2019 (attached)			
		- Friday 1 February 2019 (Barnsley) - Legends Suite, Barnsley Football Club, Grove Street, Barnsley S71 1ET - Times to be confirmed			
		- Friday 3 May 2019 (Kirklees) - Conference Room 1, Textile Centre of Excellence, 5 Red Doles Lane, Huddersfield, HD2 1YF - Times to be confirmed			
		- Friday 2 August 2019 (Calderdale) - Venue and times to be confirmed			
		- Monday 16 September 2019 - Annual Members' Meeting (Wakefield) - Large Conference Room, Fieldhead Hospital, Ouchthorpe Lane, Wakefield, WF1 3SP - Times to be confirmed			
		- Friday 1 November 2019 (Wakefield) - Large Conference Room, Fieldhead Hospital, Ouchthorpe Lane, Wakefield, WF1 3SP - Times to be confirmed			
		- Friday 31 January 2020 (Barnsley) - Legends Suite, Barnsley Football Club, Grove Street, Barnsley S71 1ET - Times to be confirmed			
	12:00pm	Lunch provided and networking			
	12:30pm	Joint Trust Board / Members' Council meeting (details in a separate programme)			
	2:30pm	Close			

**Minutes of the Members' Council meeting held on 3 August 2018
The Shay Stadium, Halifax**

Present:	Angela Monaghan (AM)	Chair
	Marios Adamou (MA)	Staff – Medicine and Pharmacy
	Neil Alexander (NA)	Public – Calderdale
	Bill Barkworth (BB)	Public – Barnsley
	Bob Clayden (BC)	Public – Wakefield
	Jackie Craven (JC)	Public – Wakefield
	Daz Dooler (DD)	Public – Wakefield
	Nasim Hasnie (NH)	Public – Kirklees
	Lisa Hogarth (LH)	Staff – Allied Healthcare Professionals
	Carol Irving (CI)	Public – Kirklees
	Ruth Mason (RM)	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Debika Minocha (DM)	Public – Wakefield
	Chris Pillai (CP)	Appointed – Calderdale Council
	Jeremy Smith (JS)	Public – Kirklees
	Debby Walker (DW)	Staff - Non-Clinical Support Staff
	Paul Williams (PW)	Public – Rest of South and West Yorkshire
In attendance:	Tim Breedon (TB)	Director of Nursing & Quality / Deputy Chief Executive
	Mark Brooks (MB)	Director of Finance & Resources
	Laurence Campbell (LC)	Non-Executive Director
	Rachel Court (RC)	Non-Executive Director
	Alan Davis (AGD)	Director of Human Resources, Organisational Development & Estates
	Emma Jones (EJ)	Company Secretary (author)
	Sean Rayner (SR)	BDU Director, Barnsley and Wakefield
	Karen Taylor (KT)	Director of Delivery
	Salma Yasmeen (SY)	Director of Strategy
	Paul Hewitson (PH)	Director, Deloitte
Apologies:	<u>Members' Council</u>	
	Kate Amaral	Public – Wakefield
	Michelle Smith	Appointed - Wakefield Council
	Andrew Crossley	Public – Barnsley
	Adrian Deakin	Staff – Nursing
	Stefanie Hampson	Appointed – Staff side organisations
	Lin Harrison	Staff – Psychological Therapies
	Tariq Khan	Public – Barnsley
	Jules Preston	Appointed – Mid Yorkshire Hospitals NHS Trust
	Caroline Saunders	Appointed – Barnsley Council
	Phil Shire	Public – Calderdale
	Richard Smith	Appointed – Kirklees Council
	Barry Tolchard	Appointed – University of Huddersfield
	Mike Walker	Public – Kirklees
	Gemma Wilson	Staff – Nursing Support
	David Woodhead	Public – Kirklees
	<u>Attendees</u>	
	Charlotte Dyson	Deputy Chair / Senior Independent Director
	Carol Harris	BDU Director, Calderdale, Kirklees, Forensic & Specialist Services
	Kate Quail	Non-Executive Director
	Dr Subha Thiyagesh	Medical Director
	Rob Webster	Chief Executive

MC/18/22 Welcome, introductions and apologies (agenda item 1)

Angela Monaghan (AM), Chair, welcomed everyone to the meeting, apologies as above were noted.

AM reminded those in attendance that the meeting was a meeting held in public and not a public meeting. There were three members of the public in attendance including Erfana Mahmood and Samantha Young, the recommended candidates for appointment as new Non-Executive Directors under agenda item 5.1. It was noted they would leave the room for this item.

AM welcomed new governors present: Daz Dooler (DD), Lisa Hogarth (LH), Debby Walker (DW), and Paul Williams (PW). Prior to the meeting, a brief informal meeting was held for new governors to meet members of the Board as part of their induction. Any feedback on the induction process would be welcome. AM also noted that Wakefield Council had appointed their new representative, Councillor Michelle Collins, who replaces Cllr David Jones.

AM had previously informed the Members' Council of the sad news of the passing of Tina Harrison, public governor for Kirklees. A condolence letter on behalf of the Members' Council had been sent to Tina's family. Those in attendance observed a minute's silence in memory of Tina Harrison.

MC/18/23 Declaration of Interests – Further declarations as part of annual exercise (agenda item 2)

AM advised that the paper provided the detail of further declarations received since the annual exercise at the Members' Council meeting on 27 April 2018.

Lisa Hogarth (LH) advised that her declaration should say Member governor for Salendine Nook High School Huddersfield. Register to be updated.

Action: Emma Jones

Chris Pillai (CP) declared that he was an Independent Hospital Manager. Register to be updated.

Action: Emma Jones

AM advised that when the Nominations Committee had considered the process for the review of the Chair and Non-Executive Director timescale to review under agenda item 5.2, the Committee felt she did not have a conflict of interest as it was about the process rather than the decision. The Members' Council confirmed that they did not feel there was a conflict.

There were no further declarations over and above those made in the annual return in April 2018 or subsequently.

It was RESOLVED to NOTE the individual declarations in addition to those declared at the meeting on 27 April 2018 and to CONFIRM the changes to the Register of Interests.

MC/18/24 Minutes of the previous meeting held on 27 April 2018 (agenda item 3)

Bob Clayden (BC) commented that he did not think the date or location of the Annual Members' Meeting was announced at the last meeting. AM would check the Chair's sheet and the Minutes amended if needed to reflect this.

Action: Emma Jones

It was RESOLVED to APPROVE the minutes from the meeting held on 27 April 2018.

The following action points were discussed:

- MC/18/15c Review of Audit Committee Terms of Reference (work programme) - Audit Committee work programme was circulated to the Members' Council. Laurence Campbell (LC) and Jackie Craven (JC) to discuss where governors may be invited to attend for certain items.
Action: Laurence Campbell/Jackie Craven
- MC/18/18 Strategy, transformation / priority programme update (sickness absence) - the Members' Council Coordination Group will consider the timing for a presentation to the Members' Council in relation to sickness absence.
Action: Emma Jones
- MC18/04 Chair's report and feedback from Trust Board and Chief Executive's comments (service user stories) - the Members' Council Quality Group will consider potential service user story topics for Trust Board meetings.
Action: Tim Breedon

MC/18/25 Chair's report and Deputy Chief Executive's comments (agenda item 4)

Chair's report and feedback form Trust Board

AM commented that a written report had been included in the meeting papers and highlighted the following:

- Chris Jones' term of office as a Non-Executive Director ended on 31 July 2018. The Trust acknowledged his valuable input and contribution to the Trust and thanked him for his service. The end of his term was one of the reasons for the appointment of a new Non-Executive Director, the other was to prepare for the end of Rachel Court's term.
- Trust Board met on 31 July 2018 with several governors in attendance which was really welcome. Thank you to Neil Alexander, Daz Dooler and Jackie Craven for attending. It was a business and risk meeting and included:
 - The Board Assurance Framework (BAF) which identifies the strategic risks to meeting the Trust's strategic objectives, what controls and assurance are in place, and any gaps to be addressed.
 - Corporate/organisational level risk register (ORR) looking at likelihood and impact of risks and controls and actions in place to mitigate them.
 - South Yorkshire & Bassetlaw (SYB) and West Yorkshire & Harrogate (WYH) integrated care systems, including a hospital services review taking place in SYB.
 - Integrated Performance Report and Out of Area Placements which will be updated under agenda item 7.
 - Estates strategy update, which highlighted the significant improvement of our estates and facilities over the past six years so that they are in good order for our staff and service users.
 - Agreed to change the Trust's policy on the use of e-cigarettes, to allow use on site for inpatients, following advice from Public Health England and feedback from service users and staff. The detail of the changes will be agreed by the Executive Management Team (EMT).
 - Equality and Diversity Annual Report.
 - Organisational Development Strategy action plan.
 - Agreement that a summary of items for discussion in the private section of the Board meeting will now be noted in the public Board meeting and at the Members' Council. We aim to put into the public session of Trust Board as much as possible. However there may be areas that are commercial in confidence or initially require discussion in private to allow free and frank conversation.

A process was agreed by Trust Board in January on the classification of items for discussion in private. At the meeting on 31 July 2018 in private session the Board discussed financial sustainability, agreed the Trust's Commercial Strategy, discussed developments in both the integrated care systems, and the disposal of property.

Neil Alexander (NA) commented that he attended the Trust Board meeting on 31 July 2018 and he felt providing and overview of items discussed in private was a really good innovation to increase transparency, which supports the Trust's values around being open and transparent and was an example of a small thing that makes a huge difference of how the Trust Board presents themselves in public.

Bill Barkworth (BB) asked what impact the proposal from Barnsley Clinical Commissioning Group (CCG) to have a single provider for mental health would have on the Trust. Mark Brooks (MB) commented that he felt it was a little early in the process to understand what the impact on the Trust could be, but he committed to keeping the members' council updated as the process develops and information becomes clearer.

Deputy Chief Executive's comments

Tim Breedon (TB) reported the following:

- Matt Hancock had been appointed the new secretary of state for health and social care and the Trust was keeping this in focus in terms of any impact. There had been no early indications.
- Celebrations have taken place in relation to NHS 70th Birthday in July 2018 with good coverage by the media, which is positive for the NHS.
- A big recruitment campaign nationally for the NHS is taking place which is positive as there are considerable pressures in the recruitment and retention of some clinical staff.
- Conversations with partners in each of our places continue regarding system arrangements and collaborative working.
- Marios Adamou, staff governor and Consultant Psychiatrist, was recently on the Look North TV programme, which is positive for the Trust as an example that our experts, leaders, and clinicians are being asked to talk about things that matter.
- The Trust received our final Care Quality Commission (CQC) inspection report which will be discussed under agenda item 8.
- SystmOne clinical records system is due to go live in January 2019 and a lot of work was taking place across the Trust to manage that change and improve processes.
- Staff Excellence Awards allows people in services to nominate each other and teams, services under various categories. An event will be held in November 2018 to present the awards.
- Demand on health services is increasing with a lot of people seeking services from the Trust who are more unwell than previously, which puts pressure on the system coupled with the level of demand.

AM commented that some of the above would be covered in further detail in the presentation items on the agenda.

Erfana Mahmood and Samantha Young left the room.

MC/18/26 Trust Board appointments (agenda item 5)

MC/18/26a Appointment of Non-Executive Directors (agenda item 5.1)

AM reported that the paper provided a recommendation from the Nominations' Committee for the appointment of two Non-Executive Directors, including background details on the two candidates recommended. The paper also provided a final update on the recruitment

process, which had been robust with significant engagement from governors as part of Nominations Committee, governor panel, and final interview panel. AM thanked governors for their involvement. The recruitment process had been run in-house to avoid the cost of using external recruitment consultants. Feedback from people who took part has been positive and the Nominations' Committee felt the process was an improvement on those undertaken previously.

Paul Williams (PW) commented that he took part in the governor discussion panel and he felt that both the recommended candidates stood out through that process. The panel had robust discussions and did not always agree but he felt the process was robust and fair. He felt the two strongest candidates had been recommended. AM commented that the final interview panel had drawn significantly on the feedback from the three discussion panels and had commented on how useful the process and feedback had been.

LH asked if applications had been received from a range of backgrounds or only legal. AM commented that applications had been sought from people who were financially qualified, plus those with a background in human resources, health and social care, legal and information technology. Initially, the aim was to appoint at least one candidate who was financially qualified, but this was not deemed essential.

Ruth Mason (RM) commented that the number of applications received was a compliment to the Trust and, as a member of the Nominations' Committee, she was impressed with the strong field of candidates. AM commented that 13 candidates were long listed and there was a strong field of candidates, with the exception of those with financial qualifications. It was noted that the Trust Board continues to have a financially qualified Non-Executive Director, Laurence Campbell, who is the Chair of the Audit Committee.

JC commented that the final candidates all commented that they had enjoyed the discussion panels and thought the recruitment process had been a good one.

NA commented that he felt the process was a good one and allowed interaction and involvement from staff, governors and service users. He felt the quality of the candidates on the whole was excellent. He asked if, as part of the final decision, whether it was candidates who displayed areas that were over and above others or was it their values base that distinguished particular candidates. AM commented that three candidates of the final five interviewed all stood out as being exceptionally strong and had strong values in line with the Trust. The final panel felt they could all be appointed and, after a difficult and long discussion, agreement was reached on the two candidates whose skills and background would be most complementary to the current Trust Board members. Values was a significant part of the process and she felt that the values-based recruitment principles that the Trust uses is one of the areas that sets the Trust apart from others.

It was RESOLVED to:

- **RECEIVE the update; and**
- **APPROVE the recommendation from the Nominations' Committee that the Trust appoints Samantha Young and Erfana Mahmood as Non-Executive Directors (NEDs) for an initial three (3) year term commencing 6 August 2018.**

MC/18/26b Chair and Non-Executive Directors' remuneration - process and timescales (agenda item 5.2)

AM reported that the paper provided a recommendation from the Nominations' Committee on the process for the review of the Chair's and Non-Executive Directors' (NEDs') remuneration. Alan Davis (AGD) commented that the Committee felt it was good to have one of each type of governor (public, staff, and appointed) to do the initial review and recommended that this

be Nasim Hasnie (public governor), Marios Adamou (staff governor), and Ruth Mason (appointed governor).

NA asked if the Committee approached governors to take part in the review or whether governors can approach the Committee. AM commented in this case it was a sub group of Nominations' Committee members who would then report to the full Committee to make the recommendation to the Members' Council.

It was RESOLVED to SUPPORT the establishment of a sub-group of the Nominations' Committee supported by the Director of Human Resources, Organisational Development and Estates to review the NHS Providers Remuneration Survey and to develop recommendations for the Members' Council on the remuneration of the Chair and Non-Executive Directors.

Erfana Mahmood and Samantha Young returned to the room.

AM congratulated Erfana Mahmood and Samantha Young on being appointed as new Non-Executive Directors.

MC/18/27 Members' Council business items (agenda item 6)

MC/18/27a Annual Report, accounts and Quality Account 2017/18 (agenda item 6.1)

MB reported that in 2017/18 the Trust met all of its financial targets and all submissions of the Annual report and accounts including the Quality Account were made on time to the regulators. A long process takes place internally including a review of the accounts by financially qualified NEDs (LC and previous Non-Executive Director Chris Jones) so their comments could be taken into account. Some of the documents from the final Annual Report, accounts and Quality Account were within the meeting papers, including the Annual Governance Statement, which the Chief Executive signs as assurance that the Trust has a sound set of controls in place. The Annual Report, accounts and Quality Account will be reported to the Annual Members' Meeting in September 2018 and are available on the Trust's website.

The key messages from the audit of the Annual Report and accounts including the Quality Account were presented by Paul Hewitson (PH).

Marios Adamou entered the meeting.

Nasim Hasnie (NH) asked why it was a limited assurance opinion and only satisfactory. PH commented that they are the highest ratings available based upon procedures specified by NHS Improvement guidance.

Marios Adamou (MA) commented that a deficit position had been discussed in 2017/18 and staff understand the deficit position for 2018/19, however in 2017/18 the budget was achieved and it may again in 2018/19. MB commented that the reason the control total (plan) for 2017/18 was achieved was due to non-recurrent measures, in particular the outcome of sale of surplus property at a higher amount than anticipated.

NA asked about the risk of management override of controls. PH commented that no incidences of any such overrides were identified and that it was an area reviewed in line with the audit standards which presumes that management are at a level of power where there would always be a risk that people may inappropriately influence the financial statements.

BC asked, in relation to data accuracy, whether discrepancies in dates within the RiO system were a system or user error. PH commented that it was user error as there were two areas that users can input the information. Most errors were user errors rather than systematic.

PH reminded governors that the Quality Account indicators for testing as part of the 2018/19 audit would be discussed with the Members' Council Quality Group.

It was RESOLVED to RECEIVE the Annual Report, accounts and Quality Account for 2017/18 including the auditor's report.

Paul Hewitson left the meeting.

MC/18/27b External auditors – continuation of contract (agenda item 6.2)

MB reported that it is a statutory responsibility of the Members' Council to appoint the external auditors, which they did in 2015. The contract signed was for five years, with the option to stop at three. The paper provides a recommendation from the Audit Committee for the Members' Council to confirm that the contract with Deloitte for external audit services continues for the further two years, during which time a procurement exercise will need to take place in mid-2019. LC, as Chair of the Audit Committee, commented that performance against the contract had been very good, including the robustness of their approach, challenge, and relationship with the Audit Committee. They have a very good understanding of the Trust and the Trust's business. It was the view of the Audit Committee that there was no reason not to continue through to the end of the five years.

NA asked about the cost of the contract and value for money. LC commented that the fee was fixed for the five years and they were providing value for money. MB added that typically in the current climate the big four audit firms don't make any money on NHS audits and they would most likely prefer to provide management consultancy, as that was where the profit margins typically were.

PW asked if a tender process took place. LC confirmed that a full tender exercise had taken place in 2015 which included governor involvement.

It was RESOLVED to CONFIRM that the contract with Deloitte for provision of external audit services continues for a further two (2) years, therefore until 30 September 2020.

MC/18/27c Members' Council Coordination Group Annual Report 2017/18 (agenda item 6.3)

AM reported that the annual report provided assurance to the Members' Council that the Coordination Group was meeting its terms of reference and outlined the work undertaken in 2017/18.

It was RESOLVED to RECEIVE the Members' Council Co-ordination Group Annual Report for 2017/18.

MC/18/27d Membership on Members' Council groups (agenda item 6.4)

AM advised that there were currently two groups of the Members' Council: the Quality Group, which looks at areas of quality and the Quality Account, and the Coordination Group, which sets the agenda for Members' Council meetings and looks at the development needs of the Members' Council. There is also a Nominations' Committee that ensures the right composition and balance of the Board and oversees the process for the appointment the Chair and Non-Executive Directors (NEDs), Deputy Chair / Senior Independent Director, and the Lead Governor. The Trust Board's Equality & Inclusion Forum recently also made a governor a member. At the last Coordination Group meeting it was discussed whether a formal process was needed to appoint governors as members to these groups, as currently the process is not detailed or clear, which was one of the areas raised by governors through their annual review meetings. A process was drafted following that discussion, which has been considered by Coordination Group members and agreed that it needed further discussion before any proposal was brought back to the Members' Council. It is the intention that having a formal process in place would make the process clearer and also further encourage involvement by governors.

Jackie Craven (JC) asked that when information is sent out about the Groups that it is clear what each Group does, as the quality accounts isn't about financial accounts, it is about areas of quality.

NA commented that it was important to stick to our values around being open and transparent and he would want to ensure that any formalised process did not exclude governors. He felt that while there was a need for formal members in a structured way, that this should be done in a light-hearted way and that all governors should be able to attend any meetings and represent the constituencies they serve. AM commented that these areas would be considered as part of the process and one of the aims was to make it more open by making the process clear. Previously the process of membership in Groups was by agreement of the Chair and she did not feel comfortable that it was solely her decision and would prefer that there was more openness.

LH commented that the times that the meetings take place could exclude people from attending. AM commented that the dates and times for meetings are set in advance and agreed in discussion by the members of the groups. Where possible, we try to accommodate the availability of governors to ensure maximum attendance.

NA commented that he felt there could be a formal membership that would technically be able to vote on things but that they should be open to all governors to attend. AM commented that, until an alternative process is established, all governors continue to be welcome to attend the Quality Group and the Coordination Group, although it was not mandatory unless they were formal members of the groups. Information on each of the groups is contained in the induction pack provided to all governors and the dates for the meetings will be circulated to all governors.

Action: Emma Jones

MC/18/27e Nominations' Committee Annual Report 2017/18 and Terms of Reference (agenda item 6.5)

AM reported that the annual report provides assurance to the Members' Council that the Committee was meeting its terms of reference and outlined the work undertaken in 2017/18. At its meeting on 20 June 2018, the Committee reviewed and made some minor changes to its Terms of Reference in relation to the names of members and job titles of those in attendance, which were agreed by the Committee on 20 June 2018 and attached for formal approval. AM thanked the governors who are members of the Committee for the large amount of work completed in 2017/18.

It was RESOLVED to:

- **RECEIVE the Nominations' Committee Annual Report for 2017/18; and**
- **APPROVE the updated Terms of Reference.**

MC/18/27f Governor engagement feedback (agenda item 6.6)

AM reported that the paper had been compiled from information provided by governors on events they have attended. The item would now be a standing item on the Members' Council agenda as an opportunity for governors to formally feedback on the events they have attended.

Carol Irving (CI) asked what opportunities were available for governors to be more visible within the Trust to be able to talk to staff, service users, carers, members and the public so that governors can develop their skills and bring back any areas of concern. AM commented that when information is received in relation to public engagement events these are circulated to governors, such as the Commitment to Carers events. EJ commented that other events also included the West Yorkshire & Harrogate Health and Care Partnership engagement event and West Yorkshire Mental Health Services Collaborative joint Governor /

Non-Executive Director event. This is an area that the Members' Council Coordination Group can consider as part of the development needs of governors.

Action: Emma Jones

TB commented that the Members' Council Quality Group would also be discussing governor attendance at quality visits to services.

Action: Tim Breedon

NA asked who compiles the agenda for the Members' Council Quality Group. TB advised that there is an annual work programme as well as items raised by the members. AM commented that governor attendance at Patient Led Assessment of the Care Environment (PLACE) visits had also been raised. AGD advised that PLACE visits generally run in the beginning of the calendar year following notification from the Department of Health. The Estates team would set up training events ahead of the visits and it was a great way for participants including service users and staff to see the environment and provide feedback on areas we can improve. Information will be circulated when available.

Action: Alan Davis

NA commented that he had not been on any service visits in Calderdale and that he has seen events on Twitter after they have happened that we would like to have attended. AM commented that the Trust's Communications team puts information on social media and when information is provided to the Membership office it is circulated to governors. TB commented that information on events is also included in The Brief monthly communication to staff, which is also circulated to governors and included in the public Trust Board papers.

BC asked if meetings could be held on a selection of different days and times of the week to allow for more governors to attend. AM commented that this would be considered when dates for 2019 are set for the two Members' Council groups.

Action: Emma Jones

It was RESOLVED to RECEIVE the details provided from governors on events attended.

MC/18/28 Integrated Performance Report Quarter 1 2018/19 (agenda item 7)

Integrated Performance Report

The key messages from the Integrated Performance Report were presented by Laurence Campbell (LC), TB in relation to quality, MB in relation to national metrics, AGD in relation to workforce, MB in relation to finance, and SY in relation to working in collaboration. Full performance reports are available in Trust Board papers and on the Trust's website.

LH asked if staff who raise an incident on DATIX receive a response back. TB commented that incidents are reviewed and when closed there should be information provided back to close the loop.

NA asked who was responsible for setting the access standards and outcomes thresholds. TB commented that they are set centrally by NHS Improvement.

RM asked about the target for staff appraisals and if there was a reason that this was for the completion of staff at Band 6 only. AGD advised that there were targets for two stages, the first is for the completion of appraisals for staff Band 6 and above by the end of quarter 1, then all staff.

LH asked if the percentage of exit interviews completed was measured. AGD commented that an element of that was part of the retention plan and a change in the exit interview process. An increase in completion has already been seen which is positive as it is an important source of information for the Trust to understand why staff have left the organisation. NA asked if it was known why there was a delay in staff completing appraisals. AGD advised that the updated percentage of completion was 84% at the end of July 2018. Sometimes the delay is recording the completion on the system rather than the appraisal taking place.

Carol Irving (CI) asked, in relation to the staff wellbeing survey, if there was a way to look at the reasons why some staff don't complete it. AGD commented that statistically the Trust receives a response from approximately 50% which is considered to be a good response rate. The survey is completely confidential and is one of the reasons the Trust uses an external provider. There are safeguards within the survey system where, if there are fewer than eight responses within an area, they cannot be broken down further. The Members' Council discussed the importance of reiterating to staff that responses are confidential.

NA asked about achievement of the Better Payment Practice Code. MB commented that it was in relation to paying at least 95% of invoices within the agreed terms unless there was a dispute.

Focus on: Out of Area Beds

The key messages from the work taking place on out of area placements were presented by Karen Taylor (KT).

CI commented that there were also non-clinical factors that can have an impact, such as emotional stress when companies go into liquidation. KT commented that some localities also have housing issues which can have an impact. DD asked if conversations were taking place in the system about service users who were inpatients due to housing not being available. KT commented that those conversations do take place and the Trust works to have people discharged as quickly as possible.

NA asked if there was an umbrella organisation nationally that could work with bed providers to come to an economic agreement. KT commented that a tender process takes place with the independent sector to ensure the best value for money and nationally there was some work taking place by the NHS to understand the beds available across the system.

AM commented that she hoped the presentation illustrated the huge amount of work taking place across the organisation, and the high level of priority being given to this issue.

MC/18/29 Care Quality Commission (CQC) inspection update (agenda item 8)

The item on the agenda in relation to the Customer Services Annual Report 2017/18 was deferred and the Serious Incidents Annual Report 2017/18 would be considered by the Members' Council Quality Group.

An update on the key messages from the Care Quality Commission (CQC) inspection were presented by TB. The Members' Council Quality Group would examine action plans in further detail. Full CQC inspection reports are available on the CQC's website (www.cqc.org.uk).

MC/18/30 Closing remarks and dates for 2018 (agenda item 9)

AM thanked the governors for their attendance and input. A hardcopy form was available for governors should they wish to provide feedback on the meeting, which would also be circulated electronically. AM reminded governors of the following dates for 2018:

- Monday 17 September 2018, Annual Members' Meeting, afternoon meeting, The Shay Stadium, Shaw Hill, Halifax, HX1 2YT. AM advised that the Members' Council Coordination Group had discussed and supported the suggestion that there is a governor stand as part of the showcase prior to the formal meeting. This is a way for governors to engage with members. If governors would like to be involved they can contact the Membership office.
- Friday 2 November 2018, morning meeting, Large conference room, Wellbeing & Learning centre, Fieldhead, Wakefield.

Signed:

Date:

MEMBERS' COUNCIL 3 AUGUST 2018 – ACTION POINTS

Actions from 3 August 2018

Minute ref	Action	Lead	Timescale	Progress
MC/18/23 Declaration of Interests – Further declarations as part of annual exercise	Lisa Hogarth (LH) advised that her declaration should say Member governor for Salendine Nook High School Huddersfield. Register to be updated.	EJ		Complete. Register updated.
	Chris Pillai (CP) declared that he was an Independent Hospital Manager. Register to be updated.	EJ		Complete. Register updated.
MC/18/24 Minutes of the previous meeting held on 27 April 2018	Bob Clayden (BC) commented that he did not think the date or location of the Annual Members' Meeting was announced at the last meeting. AM would check the Chair's sheet and the Minutes amended if needed to reflect this.	EJ		Complete.
MC/18/27d Membership on Members' Council groups	NA commented that he felt there could be a formal membership that would technically be able to vote on things but that they should be open to all governors to attend. AM commented that, until an alternative process is established, all governors continue to be welcome to attend the Quality Group and the Coordination Group, although it was not mandatory unless they were formal members of the groups. Information on each of the groups is contained in the induction pack provided to all governors and the dates for the meetings will be circulated to all governors.	EJ		Complete. Remaining dates for 2018 circulated to all governors. Dates for 2019 to be circulated once confirmed.

Minute ref	Action	Lead	Timescale	Progress
MC/18/27f Governor engagement feedback	Carol Irving (CI) asked what opportunities were available for governors to be more visible within the Trust to be able to talk to staff, service users, carers, members and the public so that governors can develop their skills and bring back any areas of concern. AM commented that when information is received in relation to public engagement events these are circulated to governors, such as the Commitment to Carers events. EJ commented that other events also included the West Yorkshire & Harrogate Health and Care Partnership engagement event and West Yorkshire Mental Health Services Collaborative joint Governor / Non-Executive Director event. This is an area that the Members' Council Coordination Group can consider as part of the development needs of governors.	EJ		Ongoing. Members' Council Co-ordination Group to consider opportunities for governors to be more visible within the Trust to be able to talk to staff, service users, carers, members and the public.
	TB commented that the Members' Council Quality Group would also be discussing governor attendance at quality visits to services.	TB		
	NA asked who compiles the agenda for the Members' Council Quality Group. TB advised that there is an annual work programme as well as items raised by the members. AM commented that governor attendance at Patient Led Assessment of the Care Environment (PLACE) visits had also been raised. AGD advised that PLACE visits generally run in the beginning of the calendar year following notification from the Department of Health. The Estates team would set up training events ahead of the visits and it was a great way for participants including service users and staff to see the environment and provide feedback on areas we can improve. Information will be circulated when available.	AGD		
	BC asked if meetings could be held on a selection of different days and times of the week to allow for more governors to attend. AM commented that this would be considered when dates for 2019 are set for the two Members' Council groups.	EJ		In progress. Governors asked for their preferences.

Outstanding actions from 27 April 2018

Minute ref	Action	Lead	Timescale	Progress
MC/18/15c Review of Audit Committee Terms of Reference	<p>Governor attendance at the Audit Committee was discussed. Laurence Campbell (LC) confirmed that governors had attended in the past and an example of this was to appoint the internal auditors. MB confirmed that all Audit Committee items are included in the public session of Board meetings. It was agreed to share the Audit Committee work programme with the governors and for the Committee Chair to discuss with the Lead Governor where governors may be invited to attend for certain items.</p> <p><i>3 August 2018 update:</i> Laurence Campbell (LC) and Jackie Craven (JC) to discuss where governors may be invited to attend for certain items.</p>	Emma Jones / Laurence Campbell / Jackie Craven		Audit Committee work programme circulated to governors on 22 June 2018. Committee Chair and Lead Governor to discuss where governors may be invited to attend for certain items.
MC/18/18 Strategy, transformation / priority programme update	<p>LH requested more information of sickness absence at a future meeting to fully understand the drivers and what can be done to address them.</p> <p><i>3 August 2018 update:</i> The Members' Council Coordination Group will consider the timing.</p>	Alan Davis		Complete. On the agenda for the Members' Council meeting on 2 November 2018.

Outstanding actions from 2 February 2018

Minute ref	Action	Lead	Timescale	Progress
MC18/04 Chair's report and feedback from Trust Board and Chief Executive's comments	<p>AM asked governors to advise if there were any service user stories that they think the Board should hear. Rob Webster (RW) added that the Members' Council Quality Group could potentially pick the stories in the future.</p> <p><i>Update 27 April 2018:</i> AM updated the meeting to advise that the Members' Council Quality Group would discuss future service user stories to be</p>	Governors / Tim Breedon		Complete. The Members' Council Quality Group was asked about potential service user stories and it was agreed that any examples would be brought to future meetings.

Minute ref	Action	Lead	Timescale	Progress
	<p>presented to the Trust Board...The role of the Members' Council Quality Group will be to discuss the best way to reflect service users' and carers' experiences at Board.</p> <p><i>3 August 2018 update:</i> The Members' Council Quality Group will consider potential service user story topics for Trust Board meetings.</p>			

Members' Council 2 November 2018

Chair's Report

The papers provided to the Members' Council, plus the monthly Brief now circulated to Governors, provide comprehensive and up-to-date information on Trust performance and activity. This Chair's report aims to supplement these by highlighting:

- feedback from Board meetings
- Chair activity
- other issues of relevance to Governors

1. Feedback from the Board

Since my last report, the Board has met three times:

- a. The **July** meeting took place in Wakefield and a verbal report on this meeting was given at the last Members' Council meeting. We opened the meeting with a service user story from someone in our forensic services who had benefited from the relaxation of restrictive practices, which enabled them to take an Open University course. This was a *business and risk* meeting, so discussions focussed on the Board Assurance Framework (BAF) and the corporate risk register. We also discussed the Care Quality Commission (CQC) inspection report, which was published in early July, and the actions we had taken and planned to take in response. As we do at all board meetings, we reviewed the monthly Integrated Performance Report (IPR), with a special report on the use of out of area placements, and discussed business developments in the two integrated care systems in which we operate – West Yorkshire & Harrogate and South Yorkshire & Bassetlaw. The Board also approved a proposal to allow the use of e-cigarettes on inpatient wards, received updates on our Estates Strategy and Organisational Development Strategy, and received our Equality and Diversity Annual Report,.

(NB: The Board does not meet in August)

- b. The **September** meeting, held in Halifax, was opened with a service user story given in person by elected Governor and volunteer, Daz Dooler – we are very grateful to Daz for bringing to the Board this very powerful, personal testimony. As this was a *performance and monitoring* meeting, our focus was on the IPR, which we discussed in detail. We also discussed our quarter one serious incident report, our Sustainability Annual Report, our Health & Safety Annual Report, and our Medical Appraisal & Revalidation Annual Report. In relation to developments in our two integrated care systems, we formally approved the new Memorandum of Understanding agreed between all the partners to the West Yorkshire & Harrogate Health and Care Partnership.

As part of our commitment to equality and diversity, we are once again taking part in the Insight Programme, which mentors and supports black and minority ethnic people to gain experience of NHS boards. This board meeting was attended by Ranjit Das, who we are currently mentoring under this initiative.

The **October** Board meeting, which is a *business and risk* meeting, is taking place just prior to the Members' Council (on 30 October in Huddersfield) and I will be able provide a verbal update at the Members' Council meeting.

The Board also met earlier in September for a development day, which took place at Barnsley Recovery College, The Exchange. The Board is committed to improving the way it operates and will be undertaking further development work on an ongoing basis.

Please note that Governors are welcome to attend all public Board meetings and that papers are available on our website a week before at www.southwestyorkshire.nhs.uk/about-us/how-we-are-run/trust-board/meeting.

2. Chair activity

To help governors understand the range of activities undertaken by Non Executive Directors (NEDs) and to support governors in their role of holding the NEDs to account, this section highlights the range of activity I have been engaged in as Chair since the last Members' Council meeting:

- engagement with staff, governors, volunteers and service users, including:
 - induction meetings with newly elected and appointed Governors, plus regular contact with Lead Governor Jackie Craven
 - induction meeting with candidate on the Insight programme, Ranjit Das
 - monthly Trust Welcome Events for new staff
 - Hospital Manager annual reviews
 - Staff side committee Annual General Meeting (AGM)
 - Newhaven ward Macmillan coffee afternoon
 - visit to the newly opened Unity Centre, Fieldhead
 - excellence award judging
 - Consultant interview panel
 - induction meetings with new Non executive directors
- attendance at a range of governance meetings, including
 - Annual Members' Meeting
 - Members' Council Coordination Group
 - West Yorkshire Mental Health Services Collaborative Committees in Common
 - Barnsley Integrated Care Partnership Group (formerly Provider Alliance)
 - Equality and Inclusion Forum
 - Charitable Funds Committee
 - Clinical Governance and Clinical Safety Committee
 - Extended Executive Management Team (EMT)
- attendance at a range of external events, including:
 - Yorkshire Chairs' network meeting
 - NHS Providers Chairs' and CEOs' network meeting

I would be happy to answer questions or provide further information on any of the above.

3. Other

- a. In July, we reported to Governors that Barnsley Clinical Commissioning Group (CCG) had announced their intention to change the way that health and care services across the Borough, potentially through procuring a single provider called an Integrated Care Organisation (ICO). The proposal was that this single provider would include the community services, mental health and learning disability services we currently provide in Barnsley.

Earlier this month, the CCG wrote to NHS England to outline their current position, which is to not proceed with procurement of a single provider at this time, and to support the partnership working taking place between providers in Barnsley to deliver integrated care. This position will be reviewed again in April 2019.

We remain committed to working in partnership in Barnsley to develop joined up services and we will remain engaged across all services with our partners to ensure that the right services are in place.

- b. Governors may have seen reports on the news about a clinical waste management company called Healthcare Environmental Service (HES). It was recently uncovered that they have been stockpiling waste, and that these stockpiles far exceeded the amounts they were allowed to store at their waste management sites. One of these sites is at Normanton in Wakefield.

The Trust was part of the NHS consortium that contracted with HES. This contract has now been terminated and arrangements with a new contractor agreed. The Trust has a business continuity plan for the management and storage of waste which to date we have not had to deploy.

- c. Team EyUpBen visited Fieldhead in Wakefield on Friday 5 October to reveal the total amount of money raised for our charity after they took on the challenging Yorkshire Three Peaks in honour of their friend.



EyUpBen is a fundraising charity event in memory of Ben Rowntree who sadly took his own life in 2017. On 23 June 2018, Ben's team mates and friends from Kettlethorpe Rugby League team completed a sponsored walk of the Yorkshire Three Peaks carrying 14 stone in weight between them to signify carrying his burdens.

The team raised a massive £11,130 for our charity EyUp!, which provides funding for facilities, sport and activities for mental health service users and carers across Yorkshire. They also attended a private memorial in the hospital's 'Caring Garden' where they planted a tree and sited a plaque as a lasting memorial for Ben.

I'm sure Governors would join me in congratulating and thanking Team EyUpBen for their fantastic fundraising and awareness-raising effort.

Angela Monaghan
Chair

**Members' Council
2 November 2018**

Agenda item:	6.1
Report Title:	Chair and Non-Executive Director remuneration
Report By:	Director of HR, OD and Estates on behalf of the Nominations Committee
Action:	To agree

EXECUTIVE SUMMARY

Purpose and format

The purpose of this item is to enable the Members' Council to agree the Chair and Non-Executive Directors' (NED) remuneration following a review by the Nominations Committee.

Recommendation

The Members' Council is asked to AGREE the recommendations of the Nominations Committee in relation to the remuneration of the Chair and Non-Executive Directors.

Background

The Members' Council is responsible for determining and reviewing the remuneration arrangements for the Chair and Non-Executive Directors. The Members' Council agreed to establish a sub-group of the Nominations Committee, supported by the Director of Human Resources, Organisational Development and Estates to review the remuneration arrangements for the Chair and Non-Executive directors, using the NHS Providers Remuneration Survey. The members of the group were: Jackie Craven, Lead Governor; Marios Adamou, Staff Governor, Ruth Mason, Appointed Governor; and Nasim Hasnie, Public Governor.

The Trust was a participant of the NHS Providers Remuneration Survey for 2017. The survey covered both Executive and Non-Executive Directors (NEDs) (including the Chair and Chief Executive) remuneration. The results of the survey were published in January 2018 and this was used as part of a table top review by the group, which took place on the 28 September 2018.

Non-Executive Directors

The table top review identified that the current remuneration arrangements for a NED of £13,838pa is broadly consistent with the average remuneration for Foundation Trusts NEDs. The conclusion of the Nominations Committee, following the review

was that the 2017 remuneration level for NEDs is in line with national and regional averages. However, the Committee felt that there was scope for an inflation uplift of 1.5% with effect from 1 April 2018, which is broadly similar to the national award for NHS staff. This increase would still keep the rate consistent with regional and national averages and below the maximum remuneration levels.

Chair

The current remuneration arrangements for the Chair is an incremental scale of £42,420pa - £45,450pa - £47,975pa - £50,500pa - £53,025pa. The Chair is currently on the bottom incremental point of £42,420p.a. This incremental scale was based on an independent review undertaken by CAPITA. The CAPITA report stated that the remuneration of Chairs was more complex and variable than remuneration arrangements for NEDs. Progression up the incremental scale is dependent on performance. The table top review identified that the current incremental scale for the Chair remains consistent with national and regional remuneration levels. The conclusion following the review is that the current incremental scale is in line with national and regional pay ranges and therefore would not suggest any change is required. The Committee noted that the Chair's remuneration includes progression along the payscale based on the outcome of the annual appraisal, which will be completed in February 2019. The Committee, therefore, felt that given there is opportunity for progression up the scale, the incremental points should not be subject to an inflation uplift this year.

Outcome

The Nominations Committee noted that the current remuneration levels remain appropriate for NEDs, however, recommend to the Members' Council an inflation uplift of 1.5% in line with the national pay award for staff from 1 April 2018. In relation to the Chair, they noted that the remuneration arrangement remains appropriate and that given there is opportunity for progression along the incremental scale, based on performance, no inflation uplift should be made for this year.

**Members' Council
2 November 2018**

Agenda item:	7.1
Report Title:	Governor appointment to Members' Council groups and committee
Report By:	Chair of the Trust / Company Secretary on behalf of the Members' Council Co-ordination Group
Action:	For approval

EXECUTIVE SUMMARY

Purpose

The purpose of this paper is to propose a process to the Members' Council for approval regarding how governors become members of its sub-groups. The paper also proposes the establishment of consistent member numbers across the Members' Council Co-ordination Group and Members' Council Quality Group, with all governors still welcome to be in attendance and participate even if they are not a 'formal' member of these two groups. The objectives of the changes are to address the current lack of clarity about appointment to the groups, to make the appointment process more transparent, and to ensure effective operation of the groups, whilst maintaining a commitment to openness and inclusion.

Recommendation

The Members' Council is asked to APPROVE the recommendation from the Members' Council Co-ordination Group on the process for the appointment of governors onto the sub-groups and committee and changes to the membership numbers on the sub-groups.

Background

There are two-sub groups and one committee of the Members' Council as follows:

- **Members' Council Co-ordination Group** - which supports the Chair in setting the agenda for Members' Council meetings, and the induction and development of governors.
- **Members' Council Quality Group** - which looks at the Trust's quality performance report, patient experience, Quality Accounts and other quality issues.
- **Nominations' Committee** - which ensures the right composition and balance of the Board and oversees the process for the appointment the Chair and Non-Executive Directors (NEDs), Deputy Chair / Senior Independent Director, and the Lead Governor.

In addition, there is also an Equality & Inclusion Forum of the Trust Board which has a governor member.

The attached paper outlines a proposed process for appointment of governors to the groups and committee and recommends changes to the current number of governor members on the Co-ordination Group and Quality Group.

Governor appointment to Members' Council groups and committee

Previously there has been no formal process for appointing governors to the Members' Council sub-groups. To assist with establishing an open and transparent process to encourage membership and attendance, a proposal was discussed by the Members' Council Co-ordination Group meeting on 6 June 2018 and 3 September 2018 and is outlined below for approval by the Members' Council.

Proposed process for appointment

When vacancies arise, the proposed process for appointment recommended is a shortened version of the process for the appointment of the Lead Governor, which has been in place since 2009.

Step 1	When a vacancy arises, governors are invited to self-nominate, supported by a brief verbal or written statement about why they are putting themselves forward. If only one self-nomination is received, they will automatically fill the vacancy, otherwise the process will move to Step 2.
Step 2	If more than one self-nomination is received for a vacancy, the Members' Council Co-ordination Group will discuss the self-nominations supported by input from the Chair and make a recommendation to the full Members' Council.

The recommended term of membership on a group for any new members will be for three (3) years to allow for consistency of membership. If a governor wishes to stand down from a group, or is not re-elected / re-appointed as a governor on the Members' Council during the three years, the above process would take place to fill the vacancy.

It is expected that governors are a member of only one group to allow opportunities for more governors to be involved, however if sufficient membership is not reached through the self-nomination process this would be extended to two.

Current members on all groups would remain until the end of their governor term or until they step down.

All governors continue to be welcome to attend and participate at the Members' Council Co-ordination Group and Members' Council Quality Group even if they are not 'formal' members. Non-members would not normally attend the Nominations' Committee, for reasons of confidentiality, unless invited by the Chair.

Membership numbers

Members' Council Co-ordination Group

The current membership is 7 x governors. There are no specific skills required to be a member. The current breakdown of governor membership is as follows:

- Lead Governor. *Note, this is a requirement of the Lead Governor role.*
- 4 x Public governors (1 x vacancy)
- 1 x Staff governor (1 x vacancy)
- 1 Appointed governor

It is recommended that the membership be increased by 1 x Public governor for the Rest of South and West Yorkshire so there is a member from each of the five public constituencies (Barnsley, Calderdale, Kirklees, Wakefield, Rest of South and West Yorkshire).

All governors continue to be welcome to attend the Members' Council Co-ordination Group even if they are not 'formal' members.

Members' Council Quality Group

The current membership is 9 x governors. There are no specific skills required to be a member of the Group. The current breakdown of governor membership is as follows:

- Lead Governor. *Note, this is a requirement of the Lead Governor role.*
- 5 x Public governors
- 2 x Staff governors (1 x vacancy)
- 1 x Appointed governor (1 x vacancy)

It is recommended that when vacancies arise for Public governors that they are re-aligned to one member from each of the five public constituencies (Barnsley, Calderdale, Kirklees, Wakefield, Rest of South and West Yorkshire) and 1 x Staff governor to be consistent with the Co-ordination Group.

All governors continue to be welcome to attend the Members' Council Quality Group even if they are not 'formal' members.

Nominations Committee

There are a set number of governor members which is consistent with national guidance, therefore no change to the number of members is proposed. It is a requirement for the governor members of the Committee to undertake recruitment training, which is provided by the Trust. The Committee membership of governors is as follows:

- Lead Governor. *Note, this is a requirement of the Lead Governor role.*
- 1 x Public governor
- 1 x Staff governor
- 1 x Appointed governor

Equality & Inclusion Forum

This is a forum of the Trust Board and the Board is responsible for appointing members. Membership on Trust Board committees and forums is reviewed annually in April as part of the annual review of their Terms of Reference. There is currently 1 x Public governor member on the Forum whose term ends in April 2020.

In the event of a vacancy, the same appointment process outlined above for the Groups and Committee could be followed, with the difference being that the final decision would be made by Trust Board rather than the Members' Council. It is desirable for the governor member of the Forum to have knowledge/experience/interest in equality and inclusion matters, but not essential.

**Members' Council
2 November 2018**

Agenda item:	7.2
Report Title:	Members' Council objectives
Report By:	Company Secretary on behalf of the Members' Council Co-ordination Group
Action:	To review / approve

EXECUTIVE SUMMARY

Purpose and format

The purpose of this paper is to review the progress against the Members' Council objectives in 2016-2018 and consider if any changes are needed to the objectives through to November 2020.

Recommendation

The Members' Council is asked to REVIEW the progress against their objectives in 2016-2018 and APPROVE their objectives through to November 2020. Subject to any changes agreed through discussion at the Members' Council meeting.

Underpinning actions will be included in the development actions which are reviewed by the Members' Council Co-ordination Group and updated annually to the Members' Council.

Background

The Members' Council last reviewed their objectives in November 2016 and approved them through until November 2018. These objectives are now due for review.

A number of objectives are statutory duties and are a given, others originated from Members' Council meetings and development sessions. The attached paper outlines the progress against the objectives for 2016-2018.

Current objectives

1. Fulfil and comply with statutory duties (see below).
2. Contribute to the induction of new members.
3. Use connections to promote the Trust and its services.
4. Provide support to improve the engagement and involvement of members.
5. Contribute to the Trust's governance and assurance processes to improve the quality of its services.
6. Promote the role of the Members' Council to staff and ensure the view / feelings of staff are communicated.
7. Inform the preparation of the Trust's forward plan.

Statutory duties

- To appoint and, if appropriate, remove the chair.
- To appoint and, if appropriate, remove the other non-executive directors.
- To decide the remuneration and allowances and other terms and conditions of office of the chair and other non-executive directors.
- To approve (or not) any new appointment of a chief executive.
- To appoint and, if appropriate, remove the NHS foundation trust's auditor.
- To receive the NHS foundation trust's annual accounts, any report of the auditor on them, and the annual report at a general meeting of the council of governors.
- To hold the non-executive directors, individually and collectively, to account for the performance of the board of directors.
- To represent the interests of the members of the trust as a whole and the interests of the public.
- To approve "significant transactions".
- To approve an application by the trust to enter into a merger, acquisition, separation or dissolution.
- To decide whether the trust's non-NHS work would significantly interfere with its principal purpose, which is to provide goods and services for the health service in England, or performing its other functions.
- To approve amendments to the trust's constitution.

Members' Council 2 November 2018

Members' Council Objectives

Purpose of the report

This report provides the Members' Council with an update on the progress made against their objectives in 2016-2018. The Members' Council should then consider if any changes are needed to their objectives for 2018-2020.

Background

Good practice suggests that the Members' Council should develop and work to a set of objectives to measure and evaluate its effectiveness. A number of objectives are statutory duties and are a given, others originated from Members' Council meetings and development sessions since objectives were first agreed by the Members' Council in 2010.

The Members' Council last reviewed their objectives in November 2016 and approved them through until 2018. This report provides progress against the objectives.

Progress against objectives in 2016-2018

The activities from November 2016 to date have been cross-referenced to the objectives and statutory duties below:

Current objectives	Progress
1. Fulfil and comply with statutory duties (see below).	See below.
2. Contribute to the induction of new members.	Induction programme in place for new governors. In 2018, further work took place to formalise the process including the creation of a Governor Induction Pack provided to all governors.
3. Use connections to promote the Trust and its services.	Governors should use their connections to promote the Trust and its services as part of their role as a governor. Ways the Trust can further support governors in engagement with members and the public is being discussed by the Members' Council Co-ordination Group as part of the development plan and actions to support the Membership Strategy.
4. Provide support to improve the engagement and involvement of members.	Governors represent the interests of the members of the trust as a whole and the interests of the public as part of their role as a governor. Ways the Trust can further support governors in engagement with members and the public is being discussed by the Members' Council Co-ordination Group as part

Current objectives	Progress
	of the development plan and actions to support the Membership Strategy.
5. Contribute to the Trust's governance and assurance processes to improve the quality of its services.	A performance report forms a standing agenda item at each Members' Council meeting. Update reports regarding CQC inspections were received on November 2016, April 2017, November 2017, April 2018, August 2018.
6. Promote the role of the Members' Council to staff and ensure the view / feelings of staff are communicated.	Staff governors should promote the role of Members' Council to staff and ensure the view / feelings of staff are communicated as part of their role as a staff governor. Ways the Trust can further support governors in engagement with members is being discussed by the Members' Council Co-ordination Group as part of the development plan and actions to support the Membership Strategy.
7. Inform the preparation of the Trust's forward plan.	Annual joint Members' Council / Trust Board meeting held in November 2016, November 2017 and November 2018 to discuss and inform the Trust's forward plan.

Statutory duties	Progress
To appoint and, if appropriate, remove the chair.	New Chair appointed November 2017.
To appoint and, if appropriate, remove the other non-executive directors.	New Non-Executive Directors appointed in July 2017 and August 2018. Non-Executive Directors reappointed in April 2018.
To decide the remuneration and allowances and other terms and conditions of office of the chair and other non-executive directors.	Chair and Non-Executive Directors remuneration reviewed in April 2017 and November 2018.
<i>To approve (or not) any new appointment of a chief executive.</i>	<i>Not applicable between November 2016-November 2018.</i>
<i>To appoint and, if appropriate, remove the NHS foundation trust's auditor.</i>	<i>Not applicable between November 2016-November 2018.</i>
To receive the NHS foundation trust's annual accounts, any report of the auditor on them, and the annual report at a general meeting of the council of governors.	Reports received in November 2017, August 2018.
To hold the non-executive directors, individually and collectively, to account for the performance of the board of directors.	Specific holding Non-Executive Director to account sessions held in April 2017, April 2018.
To represent the interests of the members of the trust as a whole and the interests of the public.	Governors represent the interests of the members of the trust as a whole and the interests of the public as part of their role as a governor. Ways the Trust can further support governors in engagement with members and the public is being discussed by the Members' Council Co-ordination Group as part of the development plan and actions to support the Membership Strategy.
<i>To approve "significant transactions".</i>	<i>Not applicable between November 2016-November 2018.</i>
<i>To approve an application by the trust to enter into a merger, acquisition, separation or dissolution.</i>	<i>Not applicable between November 2016-November 2018.</i>

Statutory duties	Progress
<i>To decide whether the trust's non-NHS work would significantly interfere with its principal purpose, which is to provide goods and services for the health service in England, or performing its other functions.</i>	<i>Not applicable between November 2016-November 2018.</i>
To approve amendments to the trust's constitution.	Amendments to the Trust's Constitution and Scheme of Delegation were approved in February 2017 and further amendment to Scheme of Delegation in July 2017.

Recommendation

The Members' Council is asked to review the progress against their objectives in 2016-2018 and approve their objectives for 2018-2020. Subject to any changes agreed through discussion / debate at the Members' Council meeting.

Underpinning actions will be included in the development actions which are reviewed by the Members' Council Co-ordination Group and updated annually to the Members' Council.

**Members' Council
2 November 2018**

Agenda item:	7.3
Report Title:	Governor engagement feedback
Report By:	Company Secretary on behalf of governors
Action:	To receive

The following feedback was received from governors on events attended since the last Members' Council meeting on 3 August 2018 up to 15 October 2018 (note, this does not include Members' Council meetings of the Annual Members' meeting):

Name	Role	Events attended / feedback provided
Marios Adamou	Staff Governor - Medicine & Pharmacy	➤ Nominations Committee meeting 28 September 2018.
Neil Alexander	Public Governor - Calderdale	➤ Members' Council Co-ordination Group 3 September 2018.
Bill Barkworth	Public Governor - Barnsley	➤ Members' Council Co-ordination Group 3 September 2018. ➤ Excellence Awards judging 10 September 2018.
Bob Clayden	Public Governor - Wakefield	➤ Members' Council Quality Group 16 August 2018.
Jackie Craven	Lead Governor (Public Governor - Wakefield)	➤ Members' Council Co-ordination Group 3 September 2018: <ul style="list-style-type: none"> • Annual Members' Meeting planning update. • Membership Strategy update. • Membership on Members' Council groups. • Development action update and training plan. • Members' Council objectives. • Members' Council agenda items for 2 November 2018 and future meetings. ➤ Nominations Committee meeting 28 September 2018: <ul style="list-style-type: none"> • Chair and Non-Executive Director remuneration.
Adrian Deakin	Staff Governor - Nursing	➤ Members' Council Quality Group 16 August 2018.
Daz Dooler	Public Governor - Wakefield	➤ Members' Council Quality Group 16 August 2018. ➤ Members' Council Co-ordination Group 3 September 2018.
Nasim Hasnie	Public Governor - Kirklees	➤ Members' Council Quality Group 16 August 2018. ➤ Nominations Committee meeting 28 September 2018.
Carol Irving	Public Governor - Kirklees	➤ Members' Council Quality Group 16 August 2018.

Name	Role	Events attended / feedback provided
Ruth Mason	Appointed Governor - Calderdale and Huddersfield NHS Foundation Trust	➤ Nominations Committee meeting 28 September 2018.
Debika Minocha	Public Governor - Wakefield	➤ Excellence Awards judging 10 September 2018.
Phil Shire	Public Governor - Calderdale	➤ Excellence Awards judging 10 September 2018. ➤ 16.08.18 Members' Council Quality Group
Jeremy Smith	Public Governor - Kirklees	➤ Members' Council Co-ordination Group 3 September 2018. ➤ Excellence Awards judging 10 September 2018.
Paul Williams	Public Governor - Rest of South and West Yorkshire	➤ Members' Council Co-ordination Group 3 September 2018.

There was one email received for governors via the governor email address (Governors@swyt.nhs.uk) on the following matter which was circulated to all governors:

- Research & Development opportunities - COPe-support - Carers fOr People with Psychosis e-support.

**Members' Council
2 November 2018**

Agenda item:	8
Report Title:	Performance Report - Customers Services Annual Report 2017/18
Report by:	Director of Nursing & Quality / Deputy Chief Executive
Action:	To receive

EXECUTIVE SUMMARY

Purpose

The purpose of this paper is to receive and note feedback on experience of using Trust services received via the Customer Services function during 2017/18, the themes arising, learning, and action taken in response to feedback. To note also the summary Friends and Family Test results and comments and the number and types of requests received by the Trust under the Freedom of Information (FOI) Act.

Recommendation

The Members' Council is asked to RECEIVE the Customer Services Annual Report 2017/18 and NOTE the feedback received through Customer Services in the financial year 2017/18.

Background

This report provides information on feedback received through Customer Services, the themes indicated, lessons learned and action taken in response to feedback. There were 185 formal complaints in the year and 430 compliments. 578 comments and concerns were raised in addition to formal complaints and the Trust received 348 requests under the FOI Act. Most complaints contain a number of issues; access to treatment or drugs was identified as the most frequently raised negative issue. This was followed by values and behaviours (staff), communication, patient care, and admission and discharge.

This report has been considered by the Members Council Quality Group and the Group will continue to review quarterly reports for themes and action.

Key areas to note:

- There was a decrease in feedback compared to the previous year.
- The number of formal complaints decreased by 23% compared to 2016/17, with people being supported to resolve their issues at service level.

- There was an increase in comments and concerns compared to the previous year as a consequence of complaints being dealt with at service level.
- 430 compliments were shared with Customer Services from across services; less than the previous year. The team is promoting the importance of submitting compliments so that they can be formally acknowledged and best practice shared.
- Work is required to improve the timeliness of complaint responses. This is subject to on-going monitoring. The revised toolkit is supporting quality investigations to enable the preparation of detailed and complete responses for director sign-off. There is no national target for local resolution of complaint responses but timely response is important in line with Trust values.
- In 2017-18, 8/185 (4%) complainants asked the Parliamentary and Health Service Ombudsman (PHSO) to review their complaint following contact with the Trust.
- Friends & Family Test (FFT) -The Trust received 5367 responses, an average of 447 responses per month (mean – mental health and community).
- The Trust results for the FFT in 2017/18 showed 84% of people using mental health services who completed the Test would recommend them, with 97% recommending community health services. Business Delivery Units (BDUs) respond to feedback.
- The Trust responded to 348 requests for information under the FOI Act. Requesters are directly to the publication scheme where possible, complex requests are responded to with information owners and exemptions applied where applicable.

This information is shared with BDUs for review. Responding to feedback and ensuring changes in practice is monitored through BDU governance processes. This report is also shared with commissioners and Healthwatch.



**South West
Yorkshire Partnership**
NHS Foundation Trust

A large circular graphic composed of numerous blue brushstrokes of varying lengths and directions, arranged in a circular pattern around a central white circle.

Customer Services – Annual Report 2017 - 2018

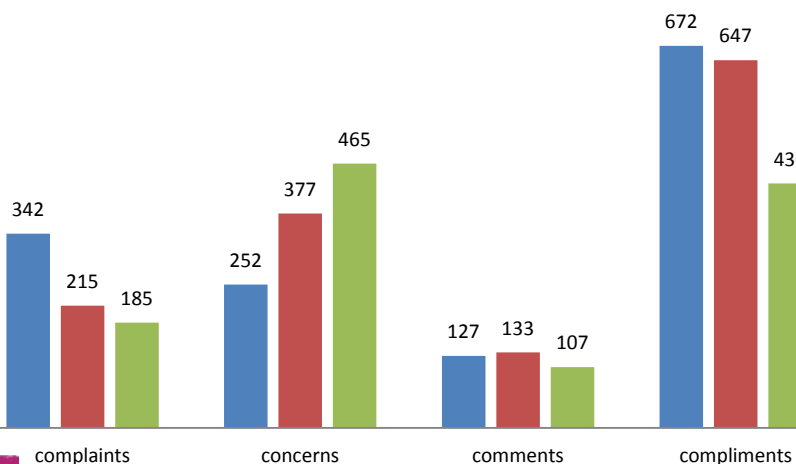
With all of us in mind.

Summary:

- Feedback received through complaints, concerns, comments and compliments totalled **1187 in 2017/ 18**, a decrease on the previous year's figure of 1372.
- **185** formal complaints were received, a decrease on the previous year's total of 215. **186** formal complaints were closed.
- **578** comments/concerns were received. This is an increase on the previous year's total of **510**.
- **430** compliments were received (647 in 2016/17).
- **755** general enquires were responded to in the year in addition to 4C's management. Sign-posting to Trust services was the most frequent enquiry. **751** staff contacts were recorded.
- **Access to treatment or drugs** was identified as the most frequently raised negative issue (138). This was followed by **values and behaviours (staff)** (133), **communication** (101), **patient care** (89) , and **admission and discharge** (58). [Most complaints contained a number of themes].
- **84%** of people using mental health services across the Trust who completed the Friends and Family Test said they would recommend them, **97%** would recommend community health services.

Trust wide issues

■ 2015 - 16 ■ 2016 - 17 ■ 2017 - 18

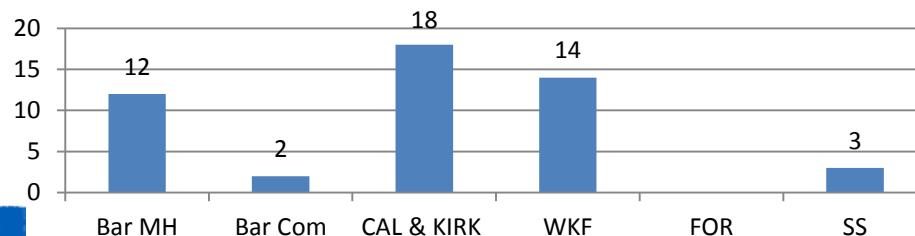


Values and Behaviours (staff)

The Trust received 49 complaints in 2017-18 that included staff attitude as a factor.

Across staff groups this related to 13 Community Psychiatric nurses, 9 Consultants, 8 nurses, other allied health professionals 19.

A further 84 comments and concerns were received which referenced staff attitude but were resolved by the service line to the individual's satisfaction.



Joint Working

National guidance emphasises the importance of organisations working together where a complaint spans more than one health and social care organisation, including providing a single point of contact and a single response.

The Trust works with partners to ensure the complaints process is as simple and straight forward to access as possible and to ensure a joined up approach to responding to feedback about health and social care services.

The Customer Services function also makes connection to local Healthwatch to promote positive dialogue and respond to any requests for information. Healthwatch are provided with copies of quarterly reports, request additional information from the Trust on occasion and signpost local people to the team to share feedback.

	complaint	concern	comment
Barnsley Hospital NHS Foundation Trust	2	1	0
Calderdale and Huddersfield NHS Foundation NHS Trust	0	1	2
Calderdale Metropolitan Borough Council	0	1	0
Health Watch	2	0	1
Kirklees Council	0	1	0
Mid Yorkshire Hospital NHS Trust	2	0	0
NHS Calderdale CCG	3	0	0
NHS England	2	0	0
NHS Greater Huddersfield CCG	1	0	0
NHS Wakefield CCG	1	0	0
Other	1	0	0
Other Local Authority	1	0	0
Sheffield Teaching Hospital	0	1	0
Wakefield Metropolitan District Council	0	1	0
Care Quality Commission	0	3	0
Member of Parliament	20	38	15

NHS Choices

The Trust has introduced measures to attempt to drive traffic to NHS Choices, in recognition that this site is an external source of information about the Trust. Survey materials promote NHS Choices as an additional means to offer feedback about the Trust and its services. The website is monitored to ensure timely response to feedback is posted.

46 individuals posted comments on NHS Choices and Patient Opinion in 2017-18.
10 positive experiences were recorded which were related to Ashdale Ward, CMHT Wakefield, Stroke Unit, Poplars Unit, Tissue Viability Service and 5 compliments did not identify the service.

36 negative comments were noted, these were in relation to the care and treatment received from Elmdale Ward, the Core Team – Barnsley, IHBBT – Kirklees, Stroke Unit – Barnsley, Memory Service Kirklees, 30 comments did not identify the service.
1 comment was received via Facebook.

Feedback is acknowledged with customer services contact details provided should the author wish to discuss their concerns directly with the Trust.

PHSO

At the start of the financial year, 6 cases were with the Parliamentary and Health Service Ombudsman (PHSO) for consideration. In 2017-18, 8/185 (4%) complainants asked the PHSO to review their complaint following contact with the Trust. Such cases are subject to rigorous scrutiny by the Ombudsman, including a review of all documentation and the Trust's complaints management processes. Information requested by the Ombudsman in relation to the above was provided within the prescribed timeframe.

During 2017-18, the Trust received feedback from the PHSO regarding 8 cases. Four cases were closed with no further action required. Four cases - Wakefield, adult community mental health services and Kirklees Older People Acute Services and Kirklees Acute mental health services (2) were reviewed and partially upheld. Action plans for these cases have subsequently been completed with learning shared across the services and where appropriate Trust wide.

These include the need to ensure a full and comprehensive assessment is offered once in receipt of referral and that services will also consider alternative treatments for Post-traumatic Stress Disorder (Diagnosis and failure to treat) and the PHSO awarded financial redress in the sum of £750. One complaint was partially upheld and an action plan was developed to ensure that a Mental Health Act Assessment is undertaken as appropriate on admission to hospital and that the outcome of assessment is shared with family members (Communication).

Recommendations included in one report requested improvements to the current complaint handling process and that staff are reminded of the importance of the Trust's Safeguarding issues/processes (Risk assessment and safety). The PHSO awarded financial redress in the sum of £500. Action plans were shared with the complainant. In addition a following complaint that was reviewed recommended Calderdale and Kirklees Acute Inpatients services regarding inappropriate discharge between services (Inappropriate discharge and provision of aftercare). Action plan has been shared to evidence improvements made as a result of the recommendations provided. The Trust has also invited the complainant into meet with Trust representatives to discuss these changes. The Trust currently has 5 cases pending with the PHSO. It can take a number of months before the PHSO is in a position to advise the Trust on its decisions (due to the volume of referrals received by PHSO).

Mental Health Act

There were no complaints regarding the MHA in 2017-18.

Information on the numbers of complaints regarding application of the Act is routinely reported to the Mental Health Act Sub Committee of the Trust Board.

NB: There were only 6 concerns raised which included issues with the MHA.

CQC/ ICO

During 2017/18 the Trust received 3 requests for information from **the CQC** – 3 relating to Calderdale and Kirklees acute mental health services. All issues were subject to an internal investigation and responses provided to the CQC. All cases are closed.

At the start of the financial year, the **Information Commissioner** was reviewing the Trust's response to two separate FOI requests made in April 2016 in relation to the provision of Art Therapy in Calderdale. In 2017-18, 1/348 (0.2%) requestors asked the ICO to review their response following information requested from the Trust. This request was in relation to the Trust withholding parts of the information provided (exemption 40, regulation 13) and related to staff redundancies over the past 5 years.

During 2017-18, the Trust received 2 decisions from the ICO. 1 of the ICO's decision was that the Trust should have shared redacted extracts from a staff supervision record within 20 days of the request. The Trust has complied with this. No further action was required by the Trust and no penalty has been applied. The outcome of the second review is still awaited. An ICO decision made during this period which found no further action required of the Trust was appealed by the requester. This is currently subject to further review by HM Courts and Tribunal Service in line with ICO appeal procedures.

Equality Data

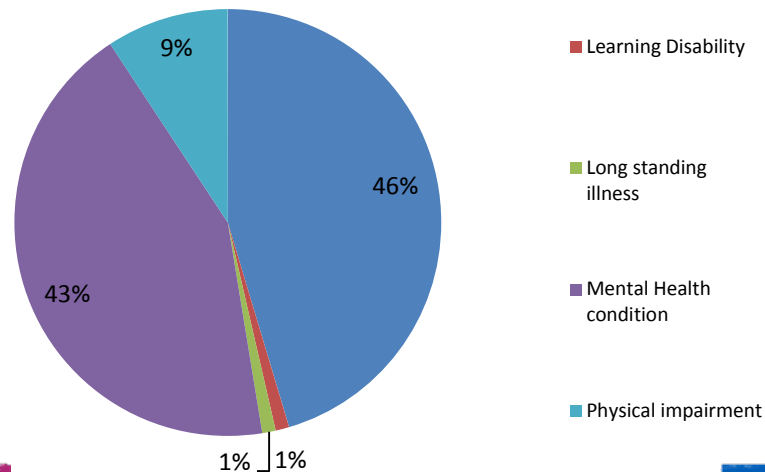
Equality data is an indicator of who accesses the complaints process. It is about the person raising the issue, who is not necessarily the person receiving services. Data is captured, where possible, at the time a formal complaint is made, or as soon as telephone contact is made following receipt of any written concerns. Information is shared with the complainant explaining why collection of this data is important to the Trust to measure equality of access to the complaints process. We offer assurance that providing data has no impact on care and treatment or on the progression of a complaint.

186 complaints were closed. Complaints were raised by service users (85), carers/ and or family members (74) and third party's including MPs (27). Equality data was collected for 137 contacts. 49 complainants declined to provide equality data and data is not collected about 3rd party agents.

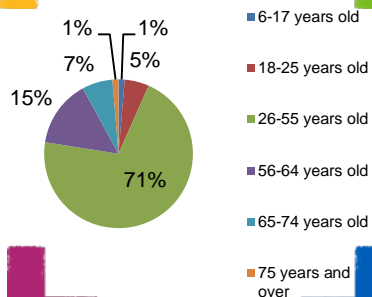
The Team continues to explore best practice in equality data capture, both internally with teams and externally with partner organisations and networks, and incorporates any learning into routine processes.

The charts show, where information was provided, the breakdown in respect of ethnicity, gender, disability, age and sexual orientation. Equality data is collated Trust wide.

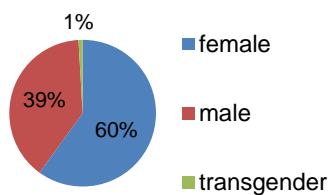
Disability



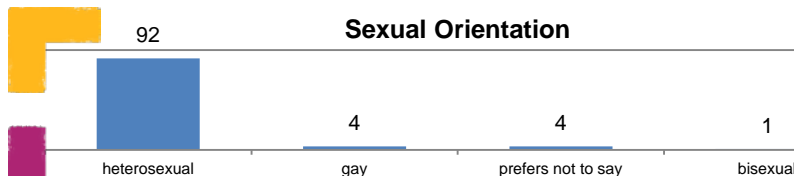
Age



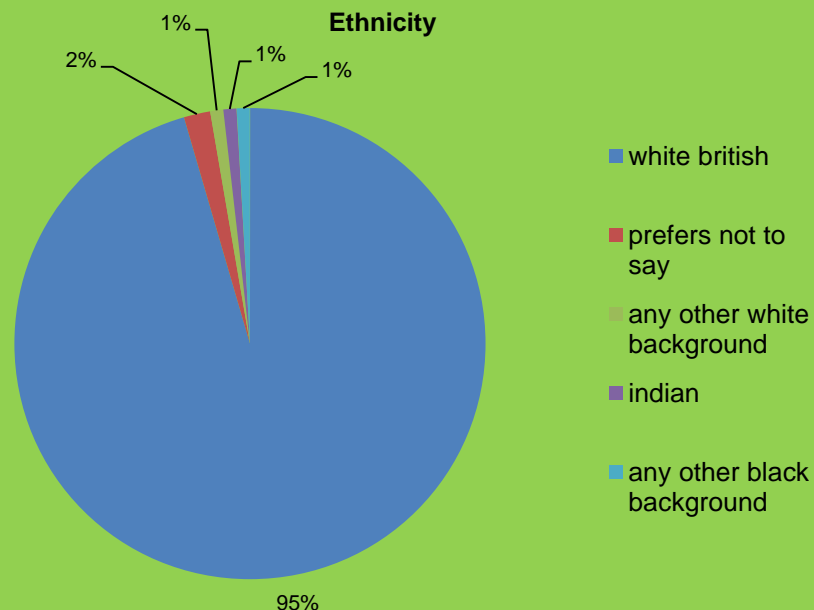
Gender



Sexual Orientation

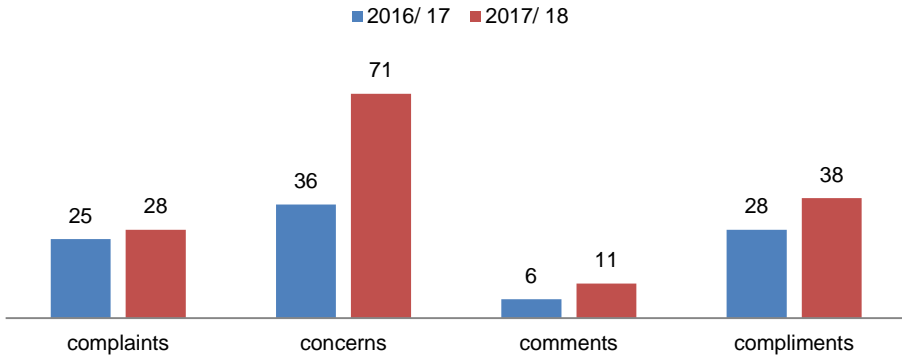


Ethnicity

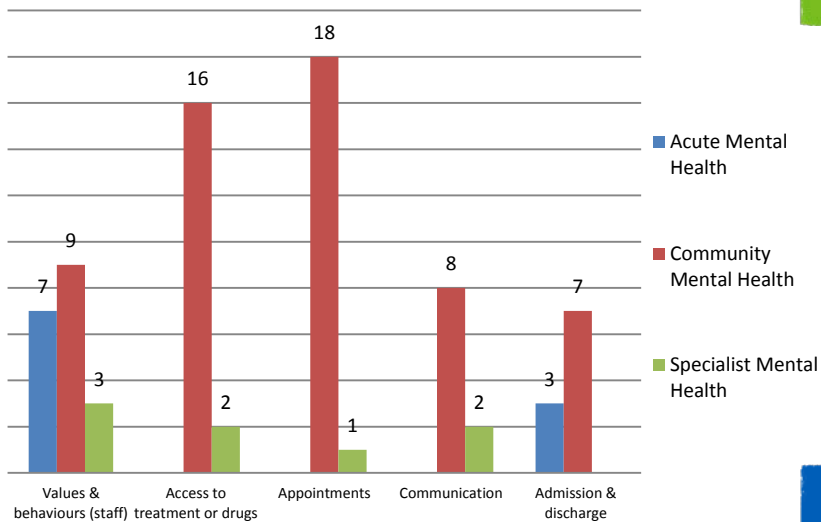


Barnsley Business Delivery Unit Mental Health Services

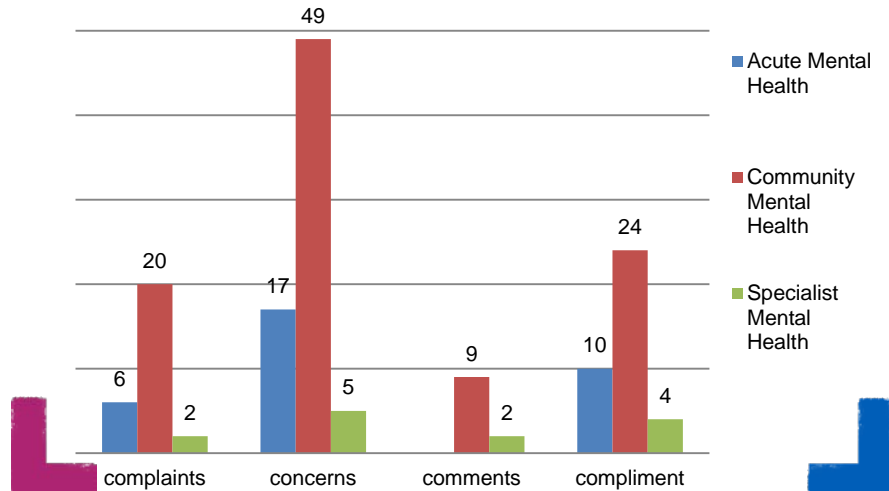
number of issues



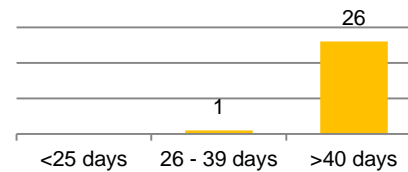
top 5 themes of formal complaints



issues by service line

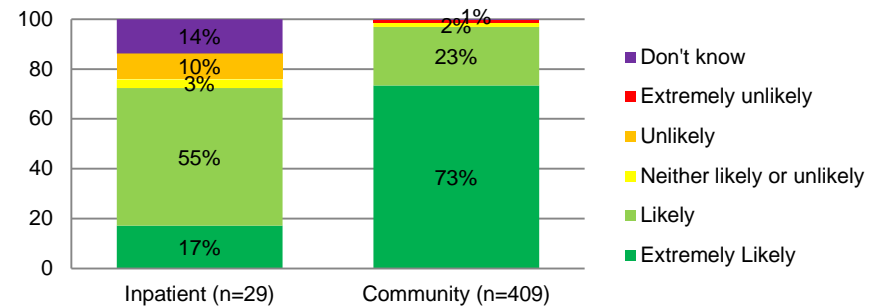


response rate



Scrutiny of issues and responses has added to delays in responding to complainants. Fortnightly reporting to BDUs, which is shared with district directors, deputies and 'Trios', identifies areas of concerns which require action and identify any lessons learned to inform governance processes.

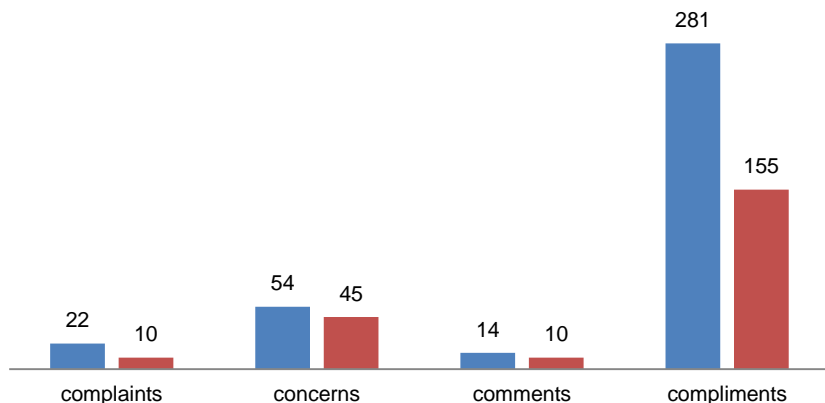
The NHS Friends and Family Test



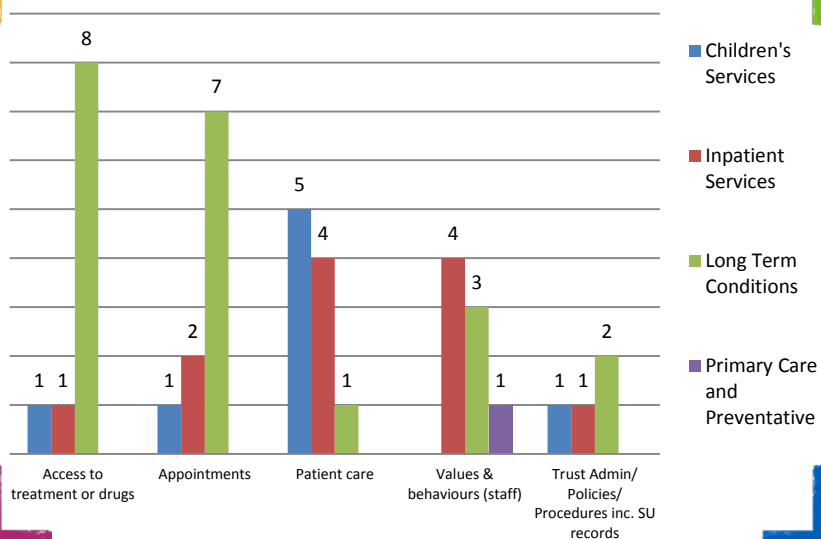
Barnsley Business Delivery Unit General Community Services

number of issues

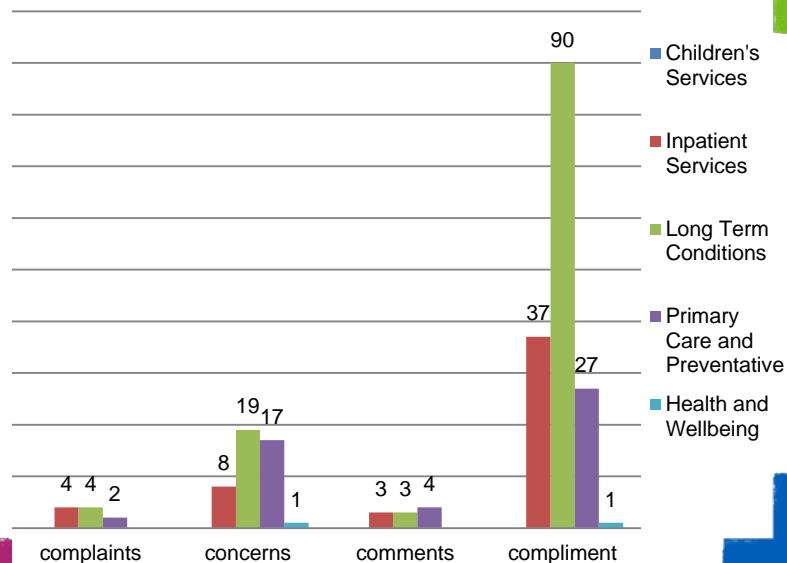
■ 2016/ 17 ■ 2017/ 18



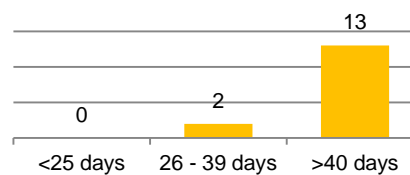
top 5 themes of formal complaints



issues by service line

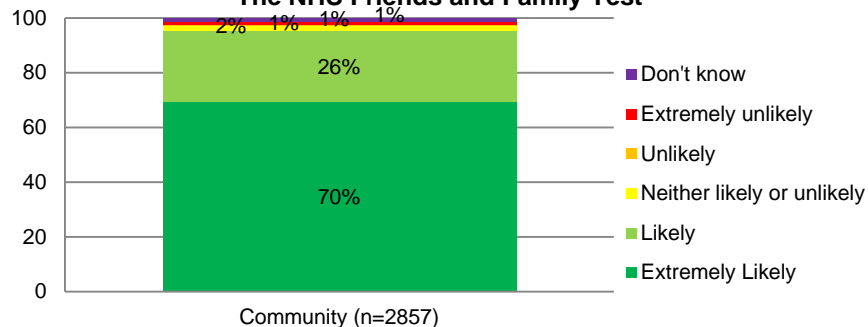


response rate



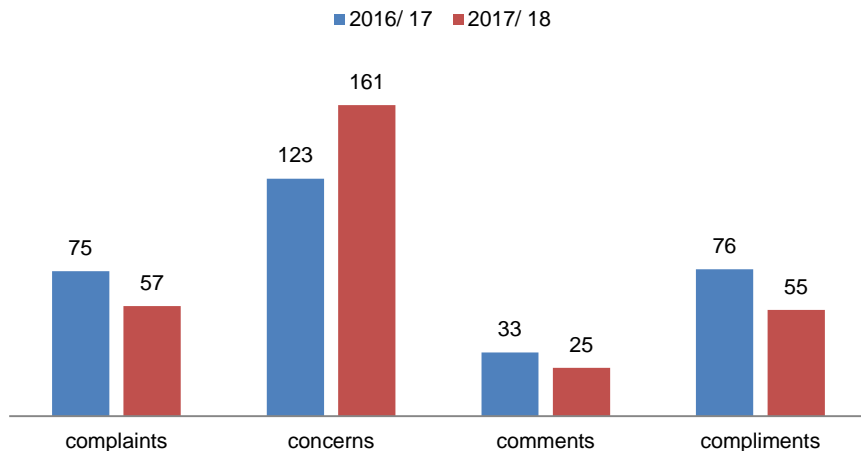
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The NHS Friends and Family Test

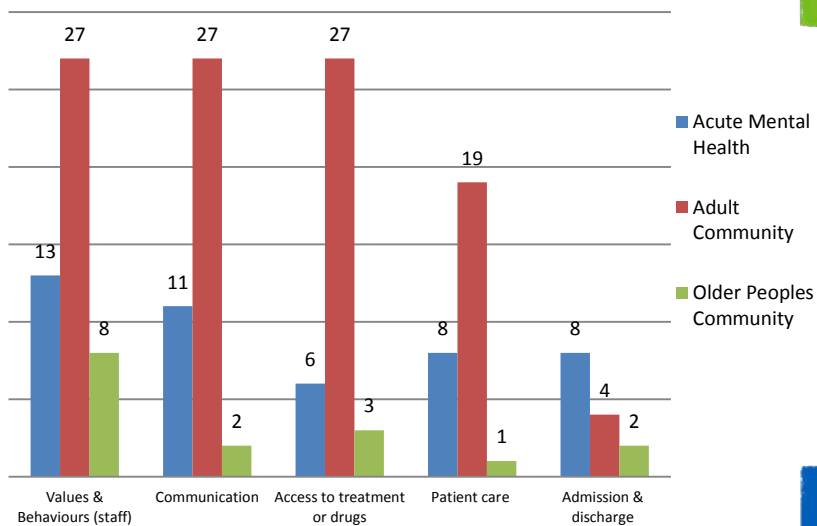


Calderdale & Kirklees Business Delivery Unit

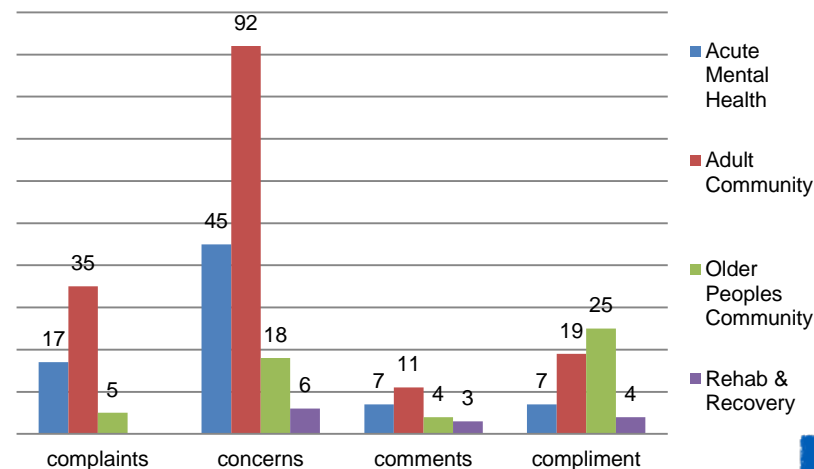
number of issues



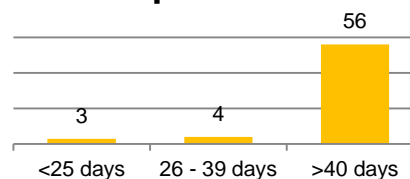
top 5 themes of formal complaints



issues by service line

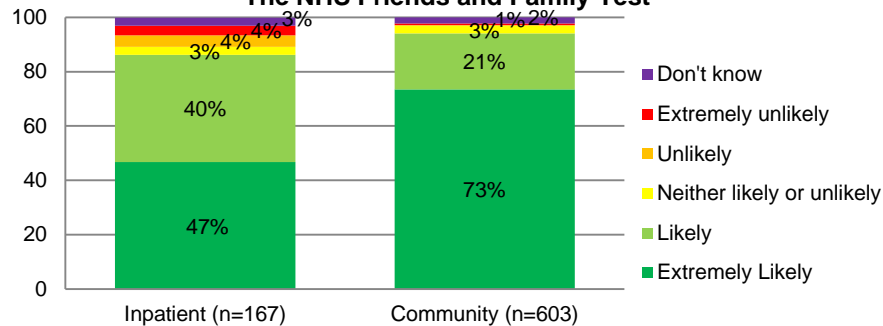


response rate



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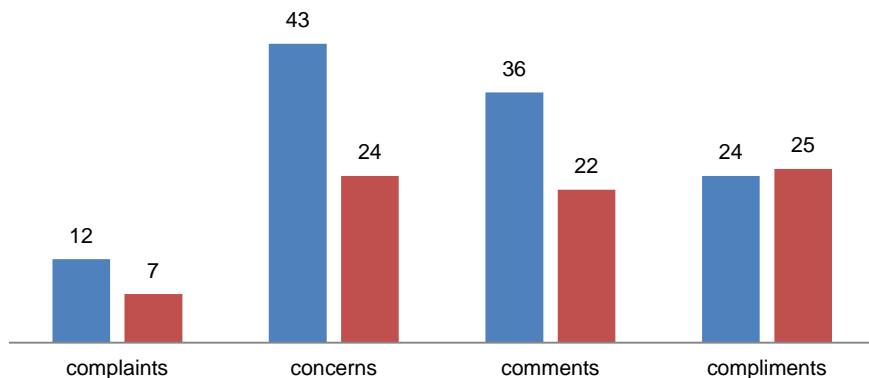
The NHS Friends and Family Test



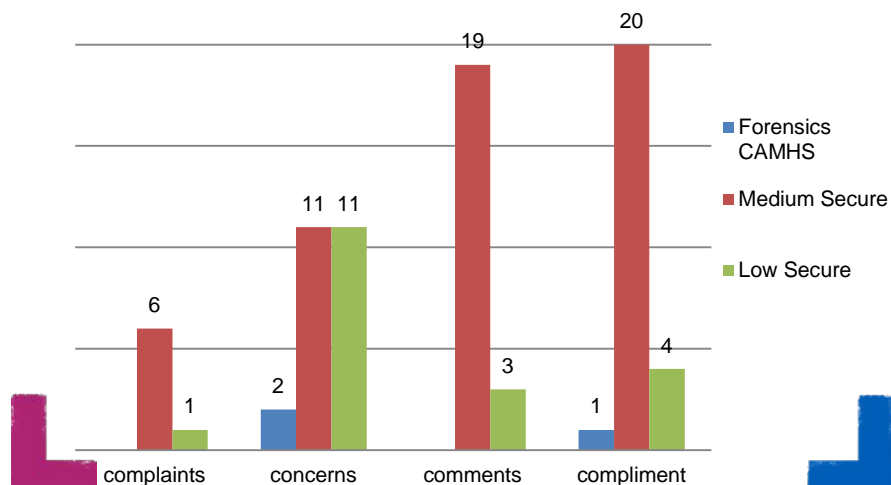
Forensic Business Delivery Unit

number of issues

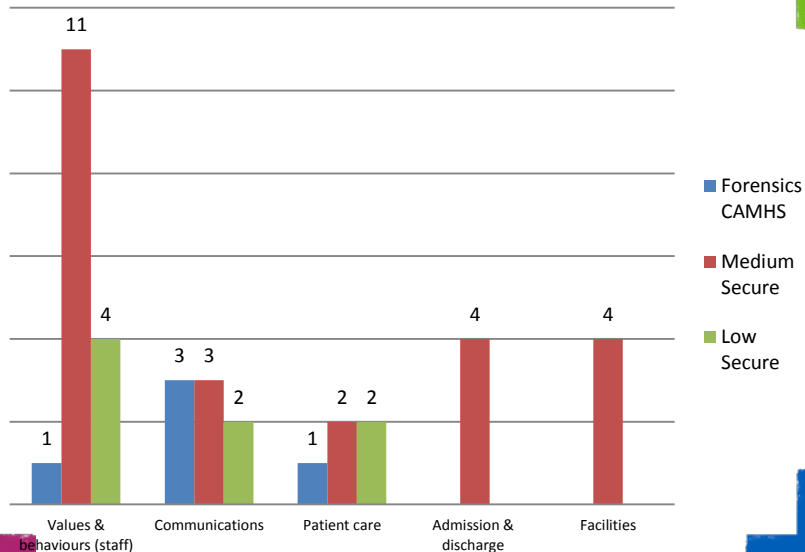
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issues by service line



top 5 themes of formal complaints

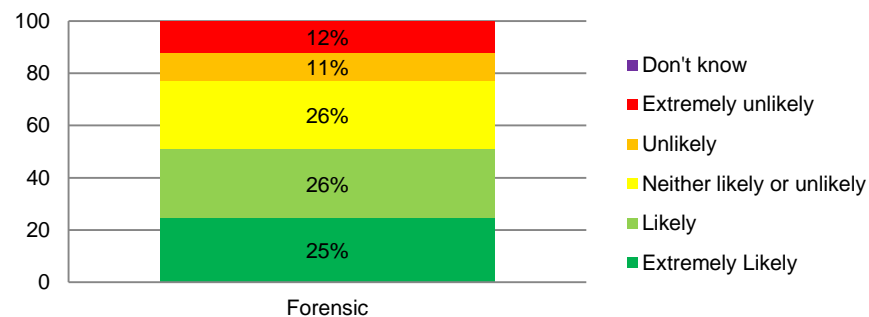


response rate



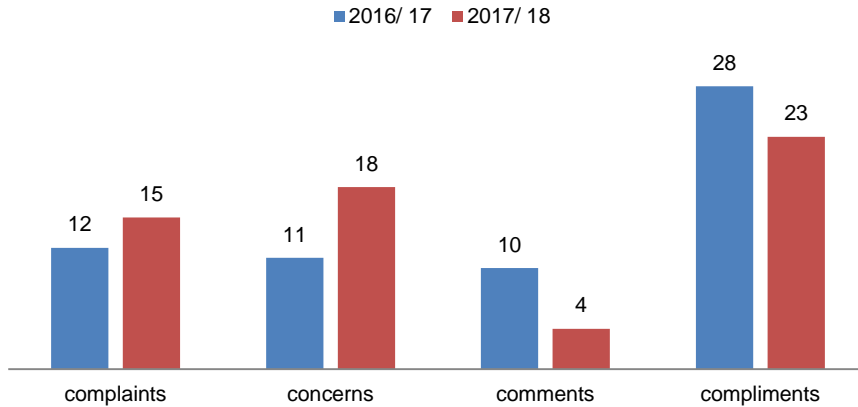
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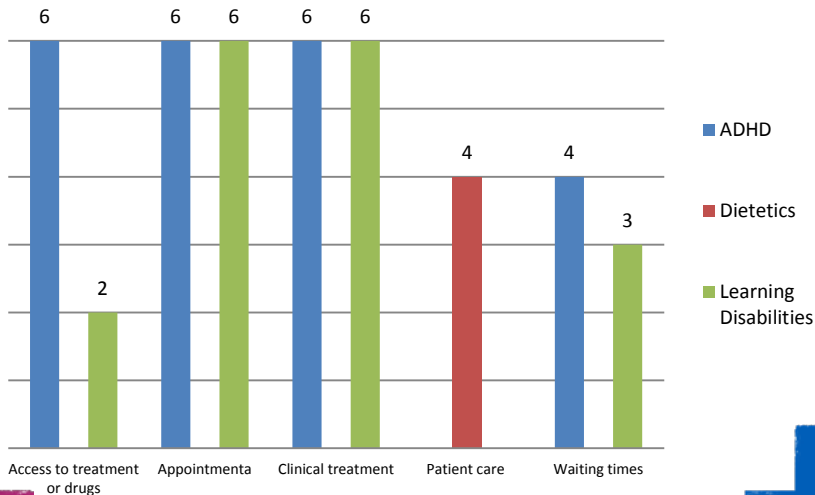


Specialist Services Business Delivery Unit excluding CAMHS

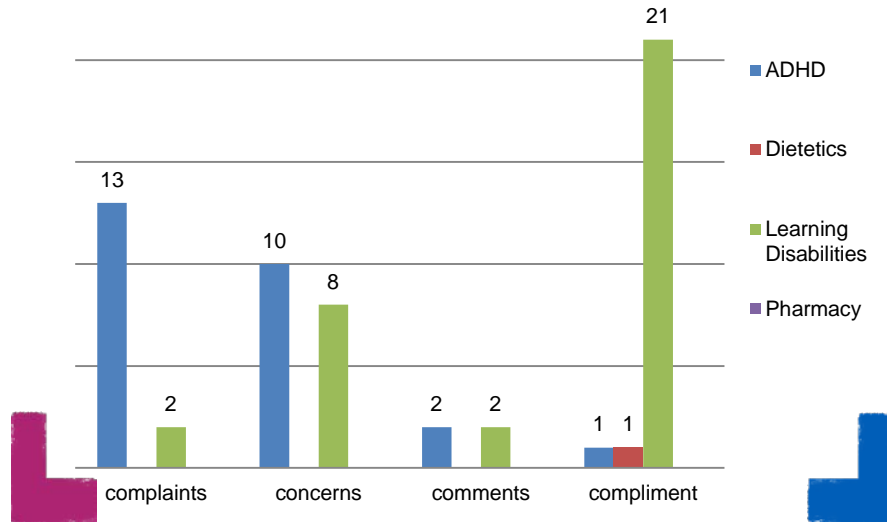
number of issues



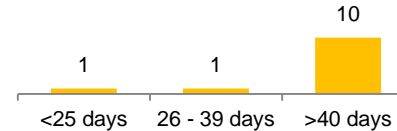
top 5 themes of formal complaints



issues by service line

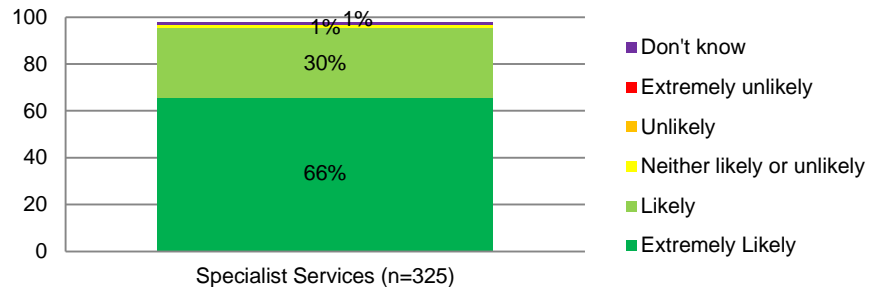


SS - response rate



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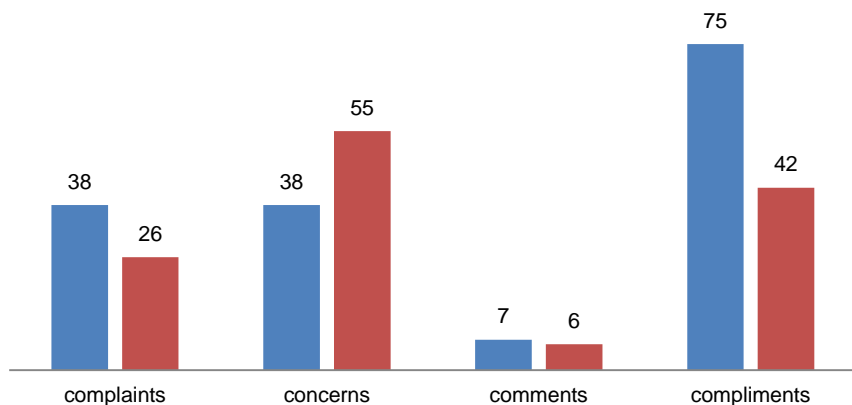
The NHS Friends and Family Test



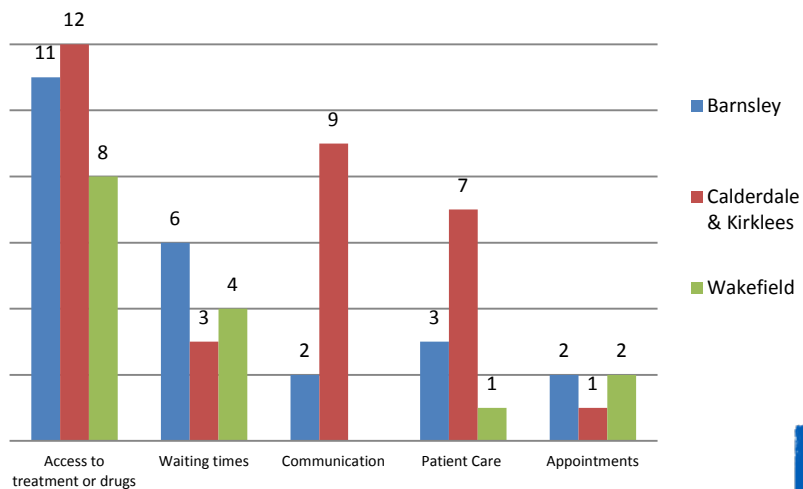
Child and Adolescent Mental Health Services

number of issues

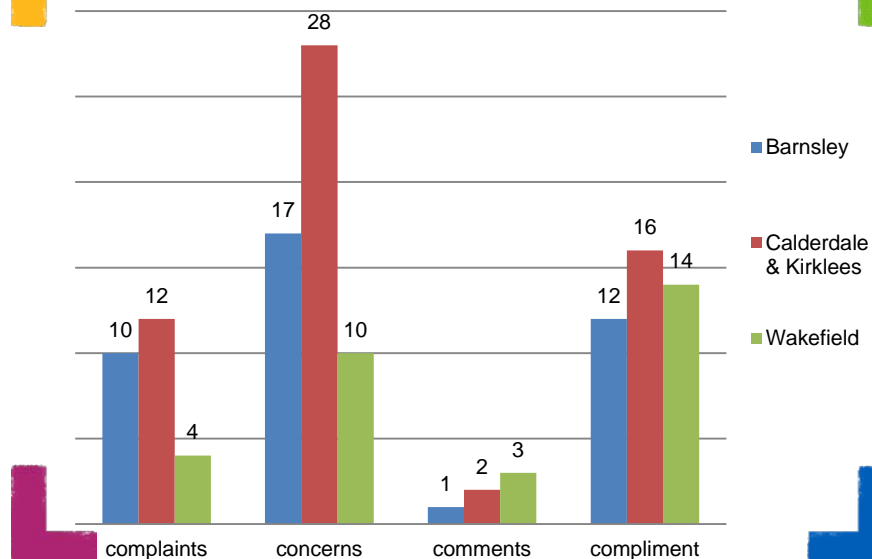
■ 2016/ 17 ■ 2017/ 18



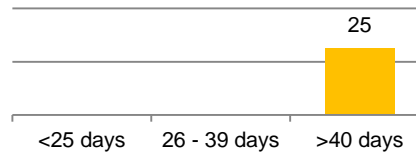
top 5 themes of formal complaints



issues by service

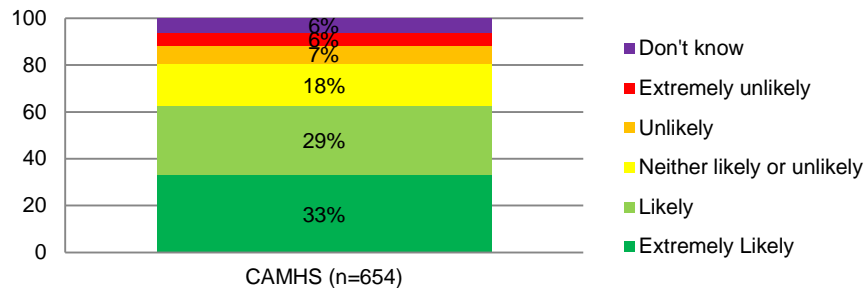


response rate



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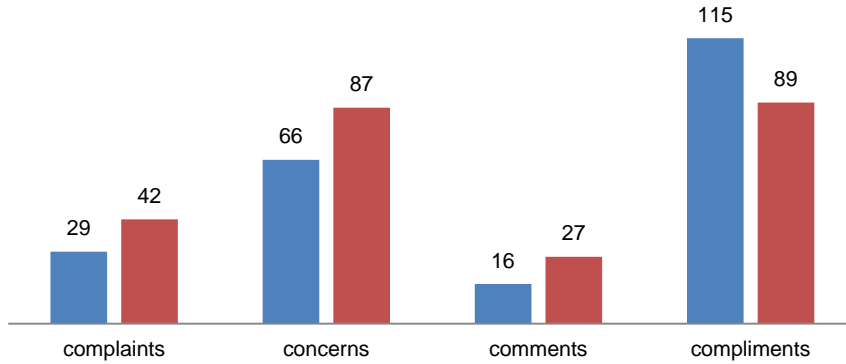
The NHS Friends and Family Test



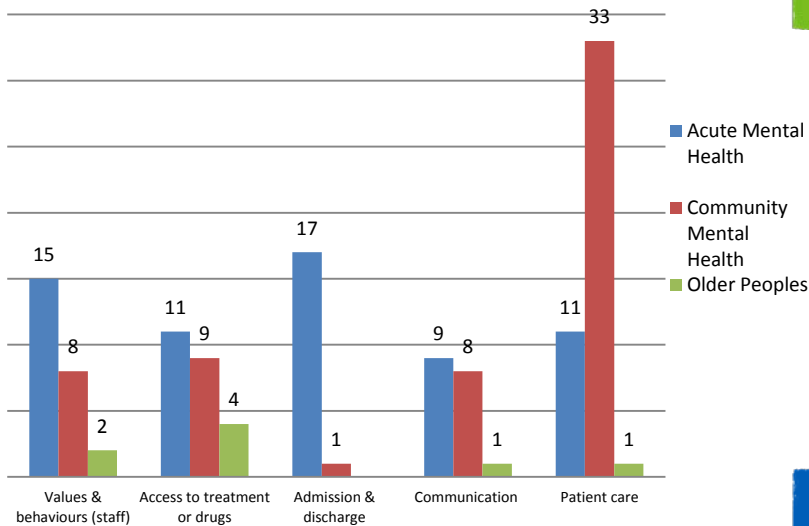
Wakefield Business Delivery Unit

number of issues

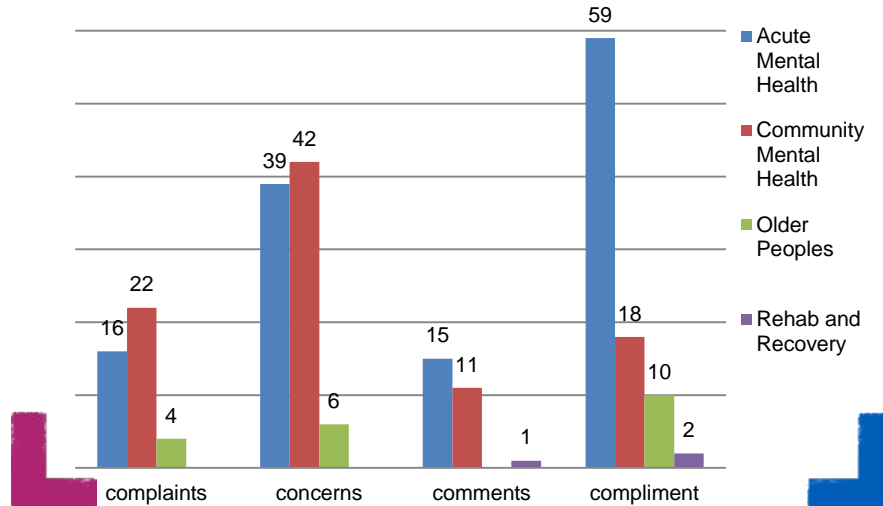
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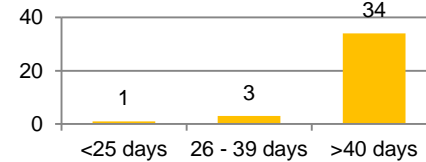
top 5 themes of formal complaints



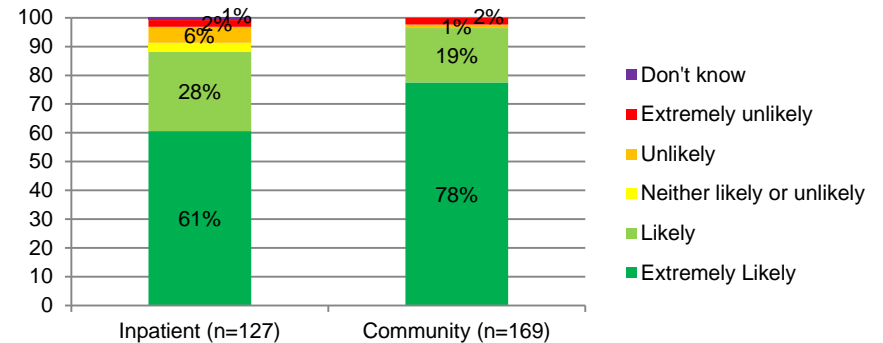
issues by service line



response rate



Scrutiny of issues and responses has added to delays in responding to complainants. Fortnightly reporting to BDUs, which is shared with district directors, deputies and 'Trios', identifies areas of concerns which require action and identify any lessons learned to inform governance processes.



Some of the lessons learned include:

Barnsley BDU Mental Health

- Staff will ensure that clear information is provided to service users and carers regarding any side effects of prescribed medication. – **CMHT – Dearne**
- Administrative procedures have been changed to ensure that service users are offered regular update whilst on the waiting list. – **IAPT**
- Staff have been reminded of the importance of formulating care plans with service users and offering clear explanations – **Clarke Ward**
- Staff have been reminded of the need to be proactive and responsive to ensure that people's needs are met – **Memory Service**
- The team have been reminded to contact people waiting for services to explain the wait time and to offer a point of contact in the interim – **CMHT (North)**
- Staff have been reminded of the importance of clearly explaining why any refused requests for additional support is not clinically appropriate or beneficial. – **IAPT**
- Explanation provided as to why service users presentation was deemed to meet criteria for detention under Mental Health Act and apology provided to family that they were not made aware that detention was a consideration. – **Beamshaw Ward**
- Explanation provided regarding why service user was encouraged to attend appointments in clinic as part of the treatment for anxiety. Apology also provided regarding why appointments with care coordinator needed to be cancelled at short notice due to staff being on call. – **Core Team**
- Staff to ensure that all conversations with service users and family members regarding diagnosis should be documented. The Trust will also review the use of the term "discharge planning" when a person is simply moving between teams as this can cause unnecessary distress. – **Enhanced Pathway**

Barnsley BDU Community Services

- Staff will ensure that the aims of rehabilitation are fully explained to service users at the initial assessment. – **Ward 5, Mount Vernon.**
- The service has reviewed the information it makes available to support therapy and the process for sharing same. – **Physiotherapy services**
- Service have confirmed that bigger and better placed signage will be displayed in reception areas . This follows feedback that small handwritten signs were difficult to see – **Podiatry Service**
- Explanation provided regarding the aims of rehabilitation offered by intermediate care service – **Long Term Condition Services**
- The team have been reminded to update any information and share amongst team. Team to also ensure that families are aware of information in the welcome pack – **Stroke Unit.**
- It has been reiterated to all staff that any errors on health care records are to be reported to the service manager as soon as possible so that the appropriate action can be taken to resolve the issue – **Long Term Conditions (Diabetes)**

- Explanation provided as to why oxygen and carbon dioxide were required and reassurance given that physical health monitoring was completed and due to deterioration in service user health a transfer to hospital was indicated. – **Ward 5, Mount Vernon**
- Service acknowledge that complainant has experienced difficulties with clear communication from care home and Trust services. Staff reminded of the importance of clear communication with service users and their carers and to check understanding – **District Nursing**

Calderdale and Kirklees BDU

- The need to work in partnership with service users when formulating risk plans has been reiterated to all staff – **Elmdale Ward**
- Staff will work with service users to minimise the risk of appointments being missed. – **IAPT**
- Service users who are being cared for out of area will be provided with regular updates regarding the provision of a local bed – **Elmdale Ward**
- All staff have been reminded of the importance of clearly explaining and documenting the rationale for any decisions regarding leave entitlement – **Elmdale Ward**
- Staff reminded of the importance of sharing information with families, where appropriate, regarding leave and arrangements for same. – **Elmdale Ward**
- Apologies provided regarding the attitude of the member of staff. The team manager will share the service user experience with staff for reflection – **CMHT (Lower Valley)**
- Explanation provided as to why ongoing psychology support was not indicated. Apology given regarding contacts not being followed up in a timely manner – **Community Therapies (North Kirklees)**
- Apology provided by service regarding the absence of communication when appointments need to be cancelled or rearranged. Feedback regarding individual staff members will be discussed during their clinical supervision – **CMHT Care Management (North Kirklees)**
- Staff have been reminded of the need to ensure that their work contact details are continually updated – **Core Team (Calderdale)**
- Services to check when rescheduling appointments that the new appointment times are convenient for the service user. – **Calderdale IAPTS**
- Service agreed to a 3 month transition period for another member of staff to support service user and for service to clearly communicate this to family – **CMHT (North Kirklees)**

Forensics

- Staff will ensure that leave arrangements and process for accessing leave are fully explained to service users and will check understanding of same. – **Learning Disabilities, Newhaven.**
- Staff have been reminded to ensure clear information regarding discharge and personal property is provided – **Appleton Ward**
- Staff will endeavour to minimise the disturbance for service users as they continue observations in line with service users care plans – **Johnson Ward**
- Staff to ensure that all service users have access to a copy of the personal property procedure and to check understanding of this – **Bronte Ward**

Specialist Services – excluding CAMHS

- All staff have been reminded of the importance of clearly explaining the rationale for any decisions made regarding care and treatment and checking understanding of same - **Wakefield Community Learning Disability Team**
- Staff to ensure that clear explanation is provided regarding service changes that have resulted in improvements to the way in which referrals are now processed – **Wakefield Community Learning Disability Team**
- Service to look at all referrals and caseload management systems to ensure that delays are mitigated, with support through staff supervision - **Children's Learning Disability Team – Calderdale**
- Staff to ensure any concerns are promptly brought to the attention of the team leader so that action can be taken in a timely manner - **Children's Learning Disability Team – Calderdale**
- Procedures to monitor and report dispensing errors have been reviewed and revised - **Pharmacy Services, North Kirklees**
- Staff have been reminded of the importance of checking service user understanding of information shared – **ADHD service**
- Staff reminded to provide clear explanation about the service offer and about access to services – **ADHD Service**
- Service have undertaken a review of service users' needs and as a result of this have expedited a further assessment – **ADHD Specialist service.**
- Service to ensure that a full explanation of the purpose of health records and standards professionals have to adhere to when completing entries is provided to service users. Also to ensure that details are provided for making an addendum if service user is unhappy with information recorded – **ADHD service.**

CAMHS

- Staff will ensure that calls are returned in a timely manner. – **CAMHS Barnsley**
- Staff have been reminded of the importance of checking parents understanding of information provided. – **CAMHS Barnsley**
- Service to ensure that benefits of coordinated working with schools is clearly explained so carers and parents have required information to make informed decisions – **CAMHS Barnsley**
- Staff have been reminded of the importance of ensuring parents clearly understand any information provided– **CAMHS Barnsley**
- The importance of clearly communicating the rationale for assessment or follow up appointments has been reiterated to staff. – **CAMHS Calderdale**
- All staff have been reminded of the importance of clearly recording in healthcare records any instructions received from service users and their families – **CAMHS Calderdale**
- The service has introduced clinically led rather than medically led screening clinics in an effort to reduce waiting times for assessments – **CAMHS Calderdale.**
- Explanation provided by staff to parent regarding the delay being experienced in accessing services – **CAMHS Kirklees**
- Apology provided by service regarding absence of allocating a regular care coordinator which resulted in some inconsistencies in care. Explanation also provided regarding service user's contact with a specialist service during this interim period in order to further assess needs – **CAMHS Kirklees**

- Staff reminded to provide clear explanation regarding waiting times and support accessible during this time – **CAMHS Kirklees**
- Staff reminded of the importance of clearly communicating with service users and carers any decisions made – **CAMHS Kirklees.**
- The service is currently reviewing the assessment process to ensure waiting times are kept to a minimum. – **CAMHS Kirklees**
- Staff will ensure that people who are accessing the service are informed from the outset of waiting times to minimise additional frustration. – **CAMHS Kirklees**
- Information will be routinely shared about alternative sources of support that can be accessed whilst waiting to be seen. – **CAMHS Kirklees**

Wakefield

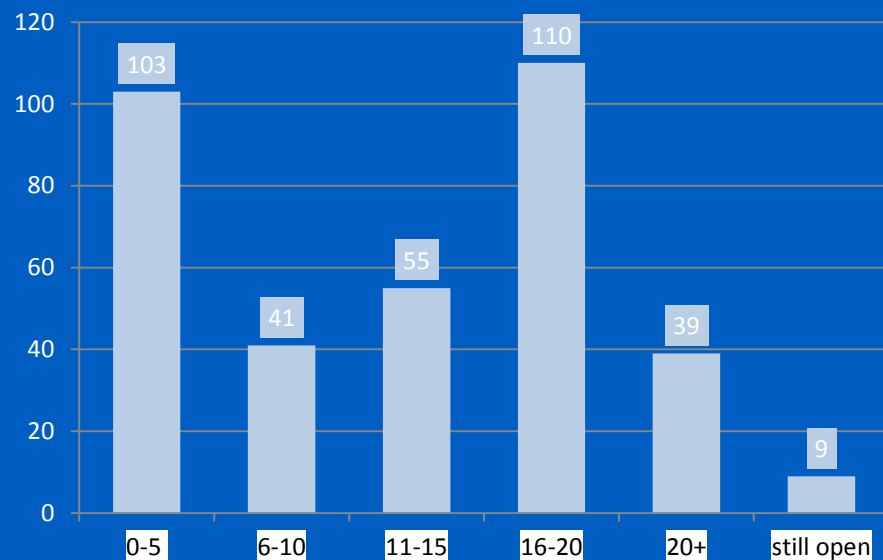
- Service users will now also be advised in writing when they are discharged from secondary community mental health services. – **CMHT 1**
- Staff will ensure that service users are provided with a clear and full explanation when they are subject to a community treatment order, including circumstances for recall – **AOT**
- Clear information and explanation will be offered about inpatient services and the process for ensuring a local bed as soon as possible if an out of area bed is initially required – **Priory 2, Acute Inpatients.**
- Approved Mental Health Practitioner Team, IHBTT and Single Point of Access Team will meet and review the issues regarding capacity to consent. Staff will also be reminded of the importance of ensuring that carers and family members are provided with the rationale and understand why decisions have been made – **Intensive Home Based Treatment Team (IHBTT)**
- All emails relating to service user appointments are now passed to the Team Leader or Duty Worker to review and acted on as soon as possible. Reassurance provided that the Trust is exploring several options to enable email contact in the future as it is acknowledged that email is a preferred method of contact for many people – **Core Team East**
- The team have reviewed their postal system and in future if a service user is requesting a specific item to be returned from the service the individual will be asked to collect the item in person. Alternatively the team will endeavour to hand deliver where possible – **Enhanced Team West**
- Staff to clearly explain to service users regarding the role of the team and information relating to the service the individual has been referred to and why this was considered appropriate at the time – **A&E Liaison Service**
- Clear explanation provided by service regarding national funding issues in terms of provision specialist eating disorder services – **CAMHS Crisis Team**

Freedom of Information requests

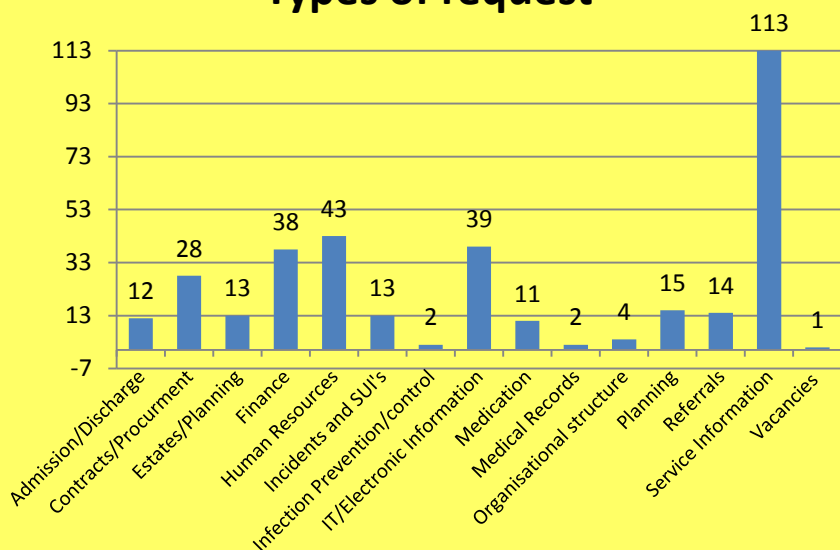
348 requests to access information under the Freedom of Information Act were processed in 2017/18, a decrease on the previous year when 381 requests were processed. Most requests were detailed and complex in nature and required significant time to collate an appropriate response working with services and quality academy functions.

During the year the following exemption was applied –
 3 x Personal information (section 40, regulation 13)
 Information already accessible (Exemption 21)
 Prejudice to law enforcement (Exemption 31)
 7 x Prejudice to commercial interest (Exemption 43)
 4x The cost of complying would exceed the appropriate limit (Exemption 13(1))

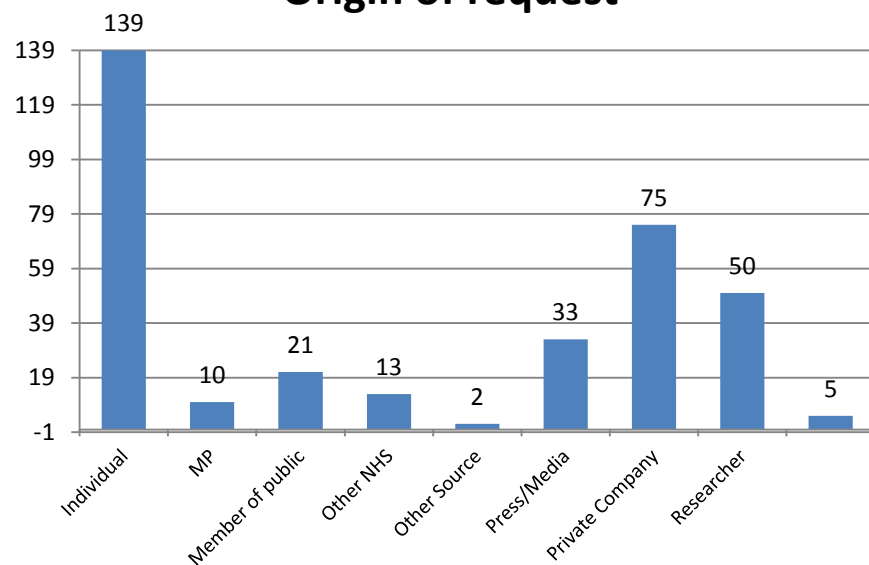
Number of days to respond



Types of request

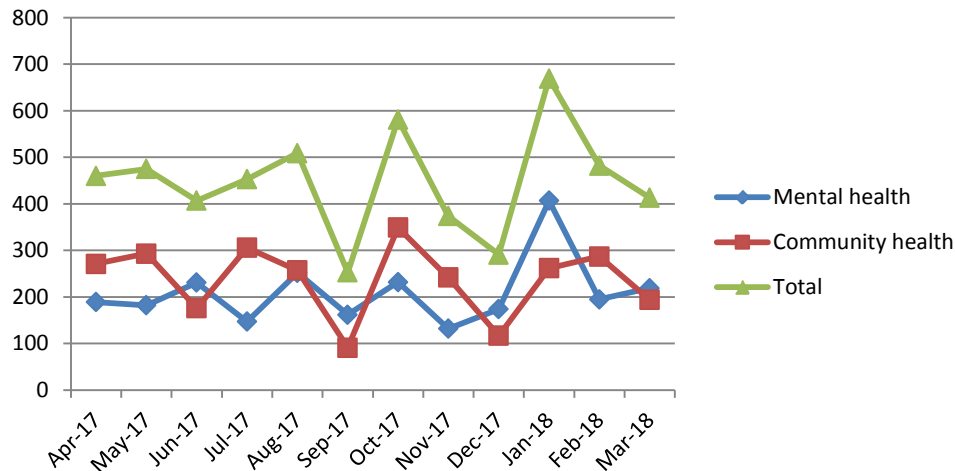


Origin of request



The NHS Friends and Family Test 17/18

In 2017/18 the Trust received 5367 responses, an average of 447 responses per month (mean – mental health and community).



92%

Would recommend

6%

Neither / Don't know

3%

Would not recommend

Top responding teams

1. Children's Speech and Language therapy
2. Podiatry
3. Calderdale CAMHS

Comment Themes

Top positive theme:
Staff

Top negative theme:
Speed of access to services

Example 'you said, we did' poster:

You Said, We Did

Priory 2
September 2017

"I sometimes find it difficult to talk to the Doctor in ward reviews"

We understand it can be difficult to speak to new people. With this in mind we have designed 'My Ward Review' – a paper template for you to complete in your own time and take into your ward review. They are optional and will be available from the service user information notice board. Staff will be happy to help you with this too 😊

"A huge thank you from all the family. You all have done such an amazing job making my mum better"

We really appreciate your lovely feedback. Thank you! If you have any feedback, be this positive or negative, please let us know – we are always looking for ways to improve our service 😊

If you require any further information please contact:

Claire
Ward Manager

"We would like a hot Sunday dinner served at lunchtime and buffet at tea time"

We are now serving a buffet at teatime. The feedback has been great! If you have any other suggestions for mealtimes please let us know

"The laundry room can be messy at times with clothes piled up"

We have devised a laundry rota to minimise the amount of clothes in the laundry room at one time. We ask that you approach the office if you want to do any washing and we will allocate you a time slot for the day. The rota will be done on a daily basis

With all of us in mind.