

**Minutes of the Members' Council meeting held on 2 August 2019
The Shay Stadium, Halifax**

Present:	Angela Monaghan (AM)	Chair
	Neil Alexander (NA)	Public – Calderdale
	Bill Armer (BA)	Appointed - Kirklees Council
	Bill Barkworth (BB)	Public – Barnsley
	Bob Clayden (BC)	Public – Wakefield
	Jackie Craven (JC)	Public – Wakefield
	Andrew Crossley (AC)	Public – Barnsley
	Adrian Deakin (AD)	Staff - Nursing
	Daz Dooler (DD)	Public – Wakefield
	Stefanie Hampson (SH)	Appointed – Staff side organisations
	Lin Harrison (LHa)	Staff – Psychological Therapies
	Dr Nasim Hasnie OBE (NH)	Public – Kirklees (from agenda item 4.2)
	Lisa Hogarth (LHo)	Staff – Allied Healthcare Professionals
	Carol Irving (CI)	Public – Kirklees
	Ros Lund (RL)	Appointed - Wakefield Council
	Adam Jhugroo (AJ)	Public – Calderdale
	Trevor Lake (TL)	Appointed – Barnsley Hospital NHS Foundation Trust
	John Laville (JL)	Public – Kirklees
	Ruth Mason (RM)	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Phil Shire (PS)	Public - Calderdale
	Jeremy Smith (JS)	Public – Kirklees
	Keith Stuart-Clarke (KSC)	Public – Barnsley
	Debs Teale (DT)	Staff – Nursing support
	Paul Williams (PW)	Public – Rest of South and West Yorkshire
In attendance:	Laurence Campbell (LC)	Non-Executive Director
	Alan Davis (AGD)	Director of Human Resources, Organisational Development & Estates
	Mike Doyle (MD)	Deputy Director Nursing & Quality (for Tim Breedon)
	Emma Jones (EJ)	Company Secretary (author)
	Erfana Mahmood (EM)	Non-Executive Director
	Kate Quail (KQ)	Non-Executive Director
	Sean Rayner (SR)	Director of Provider Development
	Salma Yasmeen (SY)	Director of Strategy
	Mark Brooks (MB)	Director of Finance & Resources
	Carol Harris (CH)	Director of Operations
	Charlotte Dyson (CD)	Deputy Chair / Senior Independent Director
	Sam Young (SYo)	Non-Executive Director
	Caroline Jamieson (CJa)	Manager Audit & Risk Advisory, Deloitte (for agenda item 7.2)
Apologies:	<u>Members' Council</u>	
	Marios Adamou (MA)	Staff – Medicine and Pharmacy
	Kate Amaral (KA)	Public – Wakefield
	Paul Batty (PB)	Staff - Social care staff working in integrated teams
	Hannah Jackson (HJ)	Public – Kirklees
	Debika Minocha (DM)	Public – Wakefield
	Debbie Newton (DN)	Appointed – Mid Yorkshire Hospitals NHS Trust
	Chris Pillai (CP)	Appointed – Calderdale Council
	Nicola Sumner (NS)	Appointed - Barnsley Council
	Barry Tolchard (BT)	Appointed – University of Huddersfield
	Debby Walker (DW)	Staff - Non-Clinical Support Staff
	Mike Walker (MW)	Public – Kirklees
	<u>Attendees</u>	
	Tim Breedon (TB)	Director of Nursing & Quality / Deputy Chief Executive
	Dr Subha Thiyagesh (SThi)	Medical Director
	Rob Webster (RW)	Chief Executive

MC/19/19 Welcome, introductions and apologies (agenda item 1)

Angela Monaghan (AM), Chair, welcomed everyone to the meeting including newly appointed governors from partner organisations Cllr Bill Armer replacing Cllr Richard Smith as the appointed governor representing Kirklees Council, Cllr Ros Lund replacing Cllr Faith Heptinstall as the appointed governor representing Wakefield Council, and Cllr Nicola Sumner who was not in attendance replacing Cllr Caroline Saunders as the appointed governor representing Barnsley Council. The apologies as above were noted. There were two members of the public in attendance including one staff member.

Jackie Craven (JC) declared an interest in the following agenda item.

Jackie Craven left the room.

MC/19/20 Members' Council business items (agenda item 2)

MC/19/20a Appointment of Lead Governor (agenda item 2.1)

AM reported that the paper outlined the process that had taken place and recommendation from the Nominations' Committee on the appointment.

NA commented that as JC was the only nomination received he was concerned that there was not the structure in place where anyone who does not have the appropriate spare time would be able to put themselves forward. The Trust contributes financially to the West Yorkshire & Harrogate Health & Care Partnership (WY&HH&CP) where they have paid lay members who represent the public. He felt the role of Lead Governor was sufficiently important and should not be down to a procedure where it was down to the person who had the spare time, which is nothing against JC. He asked whether within NHS requirements if there was a possibility of enhancing the role. AM noted the comments which could be raised in discussion of the future process. Trevor Lake (TL) commented that, within Monitor's guidelines, governors cannot be remunerated for the role.

PS asked that as JC's current term of office as a governor was only until 30 April 2020, would another process need to take place for a Lead Governor after that date. AM commented that the recommendation was to appoint to that time and prior to that the next process would be discussed. NA asked if JC would be able to re-stand. AM commented that the process for future appointments would be discussed through the Nominations' Committee. NA asked if JC was re-elected as a governor would she be able to put herself forward again. AM commented that she could not be re-appointed as Lead Governor before re-election.

AM requested that the recommendation be put to a vote. A vote took place of the governors present and the recommendation was supported.

It was RESOLVED to CONSIDER and AGREE the recommendation from the Nominations Committee to appoint of Jackie Craven as Lead Governor until the end of her current governor term on 30 April 2020.

Jackie Craven returned to the room.

The Chair advised JC that the recommendation was supported.

MC/19/21 Declaration of Interests (agenda item 3)

AM reported that the paper provided information regarding additional declarations made by governors on their interests since the Members' Council meeting held on 3 May 2019. Two additional declarations were received since the paper was distributed from the following:

- Bill Armer (BA) - No interests declared.

- Ros Lund (RL) - Councillor for Wakefield Council.

Jeremy Smith (JS) asked if there were circumstances where an entry can be updated. AM commented that if any declarations changed, notification needs to be provided.

It was RESOLVED to NOTE the individual declarations from governors and to CONFIRM the changes to the Register of Interests.

MC/19/22 Minutes and actions of the previous meeting held on 3 May 2019 (agenda item 4)

The following amendments were requested to the draft Minutes of the Members' Council meeting held on 3 May 2019

- Carol Irving (CI) - page 4 update the wording of her comment that she would like the communication pathway looked at in relation to services users who do not attend appointments and reassurance that service users won't be told via a letter that they are being discharged from Trust services. CI commented that she would raise further comments under agenda item 8i as she thinks it should be set in stone that these letters are not sent out before the person is spoken to face to face.
- Lin Harrison (LHa) - page 9-10 should be LHa in first paragraph and then Lisa Hogarth (LHo).
- LHo - Page 9 add the word financial to her question regarding whether there was any impact from Interserve on the Trust.
- Stefanie Hampson (SH) - page 5 update to the wording of her comment to say that you wouldn't be able to re-appoint someone who left the organisation into their previous role.

Action: Emma Jones / Angela Monaghan

AM commented that the draft Minutes would be revised and brought back to the next meeting for consideration.

NA asked if the re-appointment of Non-Executive Director (NED) should be updated to an appointment. AM commented that the Minutes accurately reflected the item that was discussed. The paper from the last meeting was recommending a re-appointment and when asked to clarify at that meeting it was re-confirmed. NA commented that he had written a separate letter requesting clarification regarding the NED appointment and was hopeful that he would get a response.

Adrian Deakin left the room.

AM clarified a point raised in previous meeting feedback, that when Trust Board attendees were using their iPads during the meetings it was to view the meeting papers electronically.

The following matters arising were discussed:

- MC/19/11 Minutes of and matters arising 1 February 2019 (MC/18/34 regarding governor service visits) & MC/18/27f Governor engagement feedback (service visits) - AM commented there was a paper under agenda item 4.2 regarding opportunities available for governors to visit services. In relation to Patient Led Assessment of the Care Environment (PLACE) inspection, governors had been invited to attend training and an additional date to those in the paper had been scheduled for Monday 2 September 9.30am-11.30am. In relation to Quality Monitoring Visits (QMV) which followed Care Quality Commission (CQC) inspection, they would commence once a new action plan is agreed and governors will be required to get a Disclosure & Barring Service (DBS) check to take part. Governors may also request bespoke visits to services in their constituency and the Trust would seek to arrange these. If there was scope for

more than one governor to attend bespoke visits the information would be circulated. If governors could please send their requests to the Membership Office to then pass on to the relevant team.

NA commented that he thought governors were not supposed to take a clinical role and if the inspection included making a judgement on clinical aspects it seemed not really within the remit of governors. Carol Harris (CH) commented that as part of QMV it would be useful to have a non-clinical view and participants who were not clinicians would not be asked to give a clinical opinion.

PS commented that he thought it was a great step forward and thanked the Trust for getting them set up. He felt it would give governors a role in the quality monitoring of the services and the role needs to be determined by what participants could bring, noting that governors who did not have clinical expertise would not be asked to give a clinical opinion.

LHa commented as a member of staff she appreciated the Trust making it happen and also the governors willing to give their time, as it was important to keep the floor to board connection.

Bob Clayden (BC) commented that he already had a DBS check that was linked to the Trust. AM commented that if it was already linked to the electronic renewal service the Trust should be able to access the details.

NA provided an example if he went to The Dales and looking at how service users are treated in a certain way he might think that it was not right even if they were appropriately treated as he did not have any formal training to understand whether there is or isn't a formal process in place that was appropriate. CH commented that an example might be during a conversation with a service user they said that they did not know what their care plan was. That feedback would be useful for the Trust to know as it might be that they have the appropriate care plan in place, however it hadn't been sufficiently communicated and non-clinical feedback in that perspective would be good.

Debs Teale (DT) commented that if participants saw something that they were not sure about it would be an opportunity to ask and learn. If she went into a service she would ask both the service users and staff members.

- MC/19/12 Chair's report and feedback from Trust Board and Chief Executive's comments (discharge letters) - Mike Doyle (MD) commented that concerns arose through the investigation of a service incident where sadly a service user took their own life following a letter regarding their discharge. MD assured governors that the staff always attempt to have face to face contact before discharge to explain the options available to keep the door open on an individual basis. A detailed investigation was completed and from that modification will be made to some of the templates used and the approach taken. MD will meet with CI to look at this further. Daz Dooler (DD) commented that it might be the intention of the Trust that all service users have face to face contact, however it was not happening and service users were getting letters regularly being discharged. CI commented that the communication needed to be more robust using different means of technology and understanding of how to best communicate with people in crisis.

Action: Mike Doyle/Carol Irving

Adrian Deakin returned to the room.

AM commented that the concerns had been heard and would be followed up and any feedback from that to come to a future meeting. MD commented that he would be keen to hear any feedback. LH commented that staff knew that letters should always be used

as an absolute last resort, and when used they try to word it so that it leaves the door open.

- MC/19/14g Governor engagement feedback (governor only pre-meetings) - AM commented that this was considered by the Members' Council Co-ordination Group and a question was included on the Members' Council meeting feedback form to allow all governors to indicate if they would be interested in the scheduling of governor only pre-meetings prior to Members' Council meetings. If it was requested, the Trust would facilitate the scheduling of governor only pre-meetings.

MC/19/21a Governor representation on the Trust Board Equality and Inclusion Committee (agenda item 4.1)

AM reported that a paper had been prepared following a matter arising at the last meeting (MC/19/14f Update of the Scheme of Delegation) regarding how a governor had been originally appointed to the previous Trust Board Equality & Inclusion Forum and whether that should go through a further process now that the Forum has changed to a Committee. AM outlined the information within the paper.

NA commented that it was an important point of principle as there were a lot of governors who had an interest and lived experience in respect of equality and inclusion. He commented that he had nothing against Dr Nasim Hasnie (NH), however none of the other governors had the opportunity to put themselves forward. NH has been appointed all the way through and he felt there were a lot of governors who were interested and would like the opportunity to present themselves for consideration in that respect. He felt it would be entirely appropriate to open it to all and not just have the same person appointed by someone who was not a governor, who had chosen them from the very start, and have not gone through any process. He noted that NH was also on the Nominations' Committee and if the aim was to try to get as many governors as possible to join as many of their groups as possible he felt it set a bad precedent and that he felt the Nominations Committee' tended to support their own members.

AM commented that the item was not in relation to the Nominations' Committee. In the past there had been no formal process for appointing governors and as part of the new process, agreed by the Members' Council in November 2018, existing governor members on groups were able to stay until the end of their current term. NA commented that he raised the issue that there should be some ability of governors to put themselves forward, rather than one governor being there all along. He felt that governors should agree and go with the process that it be open to all governors to nominate themselves to be appointed.

SH asked for clarification that if NH remained as the governor attendee to the end of his current governor term in April 2020, that even if he was re-elected as a governor, all governors would still have the opportunity to then put themselves forward. AM confirmed this was correct.

AM commented that the comments were acknowledged and requested that the recommendation be put to a vote. A vote took place of the governors present and the recommendation was supported.

It was RESOLVED to CONFIRM that, in order to provide continuity, Dr Nasim Hasnie remains in attendance at the Trust Board Equality & Inclusion Committee until the end of his governor term of office on 30 April 2020, and that a process to appoint a representative to the committee be undertaken prior to 30 April 2020, in accordance with the agreed procedure for appointing governors to sub-groups and committees.

Dr Nasim Hasnie entered the meeting.

MC/19/21b Governor visits to services (agenda item 4.2)

This paper outlined the opportunities available for governors to visit services and was discussed under matters arising.

MC/19/23 Chair's report and feedback from Trust Board and Executive Director comments (on behalf of Chief Executive)

Chair's report and feedback from Trust Board

AM commented that a written report had been included in the meeting papers. The report covered items discussed at Board meetings as well as meetings attended by the Non-Executive Directors (NEDs) to recognise the work taking place. The report highlighted that the Trust's Constitution was due for review and would include the review of associated documents including the Code of Conduct for Governors. A facilitated workshop would be set up to provide all governors with the opportunity to feed into the review.

Action: Emma Jones

An update was provided on the Trust Board meeting held on 30 July 2019 with governors JL and KSC in attendance. The meeting was a business and risk meeting where the following were discussed:

- Board Assurance Framework (BAF) and Corporate / Organisational level Risk Register (ORR) were reviewed to ensure the right mitigations were in place and also some areas realigned to the fourth strategic objective to 'Make SWYPFT a great place to work'.
- Updates were given on the two Integrated Care Systems (ICSs), with a lot of collaborative work taking place in the West Yorkshire & Harrogate Health & Care Partnership (WYHHCP).
- The Integrated Performance Report (IPR) with an update provided under agenda item 8 and the full report available on the Trust website.
- An update was provided on the Estate Strategy which was due to run to 2022, however the good news was that all planned projects had been completed with the opening of the Unity Centre so that Strategy would be reviewed and updated, including an environmental sustainability strategy.
- An annual update on progress against the Equality Strategy.
- In the private session of Trust Board, the Board discussed areas that were considered commercial in confidence in relation to risk, financial position and performance, serious incidents, an update on care closer to home work to reduce the number of out of area beds and improve the whole pathway, business developments in each ICS, and receive the minutes of any private partnership boards.
- There was also a Corporate Trustee for charitable funds meeting.

AM commented that the governor development session on understanding NHS Finance, which was originally scheduled for this meeting, would be rearranged to a later date.

Action: Emma Jones / Angela Monaghan

LHo asked if there would be staff involvement in the update to the Estate Strategy. AGD commented that it would involve service users, carers and staff which was how the current Strategy was developed. SH commented that staff side were quite heavily involved.

DT commented in relation to the opening of the Unity Centre, she had been involved in coordination of the decoration with involvement from service users.

PS commented that under the items discussed in the private session of Trust Board on 25 June 2019, it included the approval to progress an application to lead a provider collaborative for a forensic new care model and asked if this was the main way business development would be taking place rather than through tender processes. MB commented that it was one way and there would still be tenders for specific services. However where there are opportunities to collaborate these would be explored and in relation to the forensic new care model it was a national process where providers were asked to form a collaborative rather than manage the services individually.

NA asked, in relation to the review of Trust Constitution and the facilitated workshop, if there would be a limit to how many could attend. AM confirmed that there would be no restriction. NA asked if there was a Code of Conduct for Directors and if it was on the website. EJ commented that, as part of the appointment and then annually, there were declarations that were reported to Trust Board which included a Declaration of Interests, Fit and Proper Persons, and for NEDs there was an additional Declaration of Independence, however there was not a specific document called the Code of Conduct for Directors. AGD commented that there was a national Standard of Business Conduct that has been in place for a long time and it was in all senior manager and executive directors' contracts. The CQC looked at Fit and Proper Persons and the skills and composition of the Board as part of their well-led element of their inspection. Erfana Mahmood (EM) commented as a NED that there were several elements, including legislation, the requirements of Monitor (now NHS Improvement), the service contract, and the Nolan Principles. NA commented that governors did not get to see NEDs' service contracts. AM commented that those points would be taken on board and the information would be made available to be viewed by governors.

Action: Angela Monaghan/Emma Jones

Executive Director's comments

AGD commented that the Chief Executive's report was included in the public papers for the Trust Board meeting held on 30 July 2019 and highlighted the following:

- There was a new Prime Minister and cabinet changes taking place, however Matt Hancock had remained the Secretary of State.
- There was a ramping up around a potential 'no deal' Brexit to ensure nationally that stock was in place and to provide assurance to staff and service users in relation to plans.
- The NHS interim people plan was published with the full plan to be agreed later in the year. There are five key areas which are consistent with the Trust's workforce plan and engagement and listening events had been taking place with staff around improving leadership culture, addressing workforce shortages including nursing, delivering 21st century care, and developing a new operating model for workforce planning.
- The CQC had provided their draft inspection report and a factual accuracy check was taking place.
- A lot of work was taking place in relation to bidding for contracts, with an example being the Barnsley Stop Smoking service where the Trust was the provider. It went out to tender, a bid was put in and the Trust was successfully awarded the new contract. AM commented that work was taking place to look at how governors could be kept more up to date with contracts and tenders. MB commented, in terms of contract opportunities, there had been some additional funding nationally which all trusts have to bid for in order to receive a share. LHo asked if the Trust would need to radically change the Barnsley Stop Smoking service under the new contract. MB commented that there were some changes but not particularly radical. AM commented that this was a good point as sometimes when the Trust was successful in a bid to retain a service it did not mean that there were not changes requested under a new contract.

Angela Monaghan asked the Lead Governor to preside over the meeting as the chair for the next two items. Jackie Craven took the chair.

MC/19/24 Trust Board appointments (agenda item 6)

MC/19/24a Review of Chair and Non-Executive Directors' remuneration - process and timescales (agenda item 6.1)

AGD reported that the paper outlined the current process which is used every year. The Trust is a participant in the NHS Providers' Annual Remuneration Survey as part of national benchmarking. The results of this would be used as the basis of reviewing whether the current remuneration was appropriate and an analysis and comparison is done by the Nominations'

Committee, who would then make a recommendation to the full Members' Council on any changes.

NH commented that he supported the established procedure as it currently exists as the annual review was considered in line with national salaries. Any recommendation would be based on this annual review for a decision to then be made.

NA asked what difference was there to the process used before the Nominations' Committee used the survey as a basis of a review. AGD commented that the Trust had previously used external consultants, as there was not any benchmarking data available at the time. When external consultants are used there is a cost, which is one of the reasons why NHS Providers ask the trusts to submit their data so judgements can be made and external consultants were not needed. It was an objective process which was evidence based, justifiable, fair and appropriate. NA asked if the benchmarking information was subjective. AGD commented the benchmarking information comes from what Chair and NEDs are actually paid by NHS Organisations and broken down by region, speciality, and whether the organisations were a trust or a foundation trust. The Nominations' Committee might look at the average nationwide, then compared to northern trusts, and what it looked like compared to trust of a similar speciality.

JC requested that the recommendation be put to a vote. A vote took place of the governors present and the recommendation was supported.

It was RESOLVED to REVIEW and SUPPORT the process for the review of the Chair and NED remuneration.

MC/19/24b Non-Executive Director appointment (agenda item 6.2)

The paper provided an update on the Non-Executive Director (NED) recruitment and recommendation from the Nominations' Committee on the appointment.

BC asked, if the recommended candidate was successful, if they would be starting their terms of office again as a new Director. AGD commented that the recommendation for appointment was additionally for three years and then there could potentially be a second three years subject to the agreement of the Members' Council.

NA commented that following on from the previous Members' Council meeting he had written specific questions to various directors in relation to probity in relation to the previous process of appointing a NED. He advised that the reason he wrote those questions, which were very specific, was to ensure governors have confidence in the process of appointment and the Nominations' Committee and that governors also have the reputation of the Trust enhanced in respect of other bodies. He felt every single one of those six questions was left unanswered, was not responded to by the appropriate people and they were given plenty of time. He advised that it will be nine weeks when the Chief Executive returns from leave since he requested a meeting with him in respect of concerns of not having specific questions answered. He also wrote to EJ to say it was inappropriate to appoint a person when governors hadn't received answers in relation to questions and have not had an opportunity to discuss these with the Chief Executive. He felt it was unfair to the recommended candidate and that anyone involved in this including the executive should rethink their handling of this. He commented that he wrote specific questions that were not accusatory and wanted to demonstrate probity and he did not think that that the lack of response was appropriate and therefore he requested that the recommendation be put back to the next Members' Council meeting. He commented that it was nothing to do with the recommended candidate's ability.

Charlotte Dyson (CD) commented that the communications to which NA was referring were not on the agenda for discussion in the meeting. She advised that she had received a letter from NA and, as Senior Independent Director, had replied. NA commented that CD had not responded and he had replied back and underlined the questions and anyone reading would understand

that. He commented that it was disingenuous of CD to respond to that and all CD did was get MB to issue a general context response, which he felt was poor.

SH asked, in relation to the paper, whether there has been a recruitment process that the recommended candidate had been through. JC confirmed that the recommended candidate did apply and has gone all the way through the recruitment process. AGD added that the role was open to national advert and subject to applicants having a financial qualification. It went through the full recruitment process as used previously.

LHa commented that there had been a healthy and robust debate at the last Members' Council meeting where it was felt that the recommendation to re-appoint wasn't robust. Now that she knows it has been through a robust process that she and other governors were a part of she felt really encouraged and reassured as a member of the Members' Council.

TL commented that this was a good example of how governors can challenge back when not comfortable with a process and consequently a good process has been gone through. He felt the Trust should be assured and that he would be comfortable to move to approval on those grounds.

NA commented that he 100% agreed with LHa and TL that the process this time has been absolutely correct and how it should be and that governors can be confident in that respect. The update however did not reflect an acceptance that there were things worthy of review of how it was handled before. He commented that he was happy with the recommended candidate who was an excellent choice, however he just wanted to expect that this should not happen again.

JC requested that the recommendation be put to a vote. A vote took place of the governors present and the recommendation was supported.

It was RESOLVED to RECEIVE the update and APPROVE the recommendation from the Nominations' Committee to appoint Chris Jones as a Non-Executive Director for a period of 3 years, with effect from 5 August 2019.

Angela Monaghan resumed the chair.

MC/19/25 Members' Council business items (continued) (agenda item 7)

MC/19/25a Governor appointment to Members' Council groups (agenda item 7.1)

AM reported that the paper outlined the process that had taken place and recommendation from the Members' Council Co-ordination Group on the appointment.

AM requested that the recommendation be put to a vote. A vote took place of the governors present and the recommendation was supported.

It was RESOLVED to CONSIDER and AGREE the recommendation from the Members' Council Co-ordination Group to appoint Phil Shire to the Members' Council Quality Group.

Jackie Craven left the room.

Debs Teale left the room.

MC/19/25b Annual Report and accounts 2018/19 and Quality Account 2018/19 (agenda item 7.2)

MB reported that in 2018/19 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 detailed process takes place internally including a review of the accounts by the financially qualified Non-Executive Director and chair of the Audit Committee, Laurence Campbell, with comments 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 2019 and are available on the Trust's website.

Jackie Craven returned to the room.

Debs Teale returned to the room.

The key messages from the audit of the Annual Report and accounts including the Quality Account were presented by Caroline Jamieson (CJa).

Lisa Hogarth left the room.

PS asked in relation to the benchmarking data if it was only in comparison to other organisations that Deloitte was auditing. An example was in relation to profitability compared to other benchmarked mental health trusts, which showed that the Trust was not profitable. MB commented that historically mental health providers had typically performed better and it was in some acute providers where there were deficits. In the last few years, the Trust had moved from a very healthy financial position to being less healthy. Some of this is due to the fact that the Trust operates on a block contract and needed to absorb annual cost increases on a declining income base, as well as incurring higher costs for out of area bed placements. Particularly notable is that income which has been lost was from the loss of services which were profitable and this has a higher impact on the Trust's margins.

Lisa Hogarth returned to the room.

PS asked how bad the deficit would need to be before the auditor said the Trust was not sustainable and not doing enough in relation to its finances. MB noted that the Trust has a healthy cash balance and is generating a surplus once provider sustainability funding (PSF) is taken into account. MB commented that in the first instance the responsibility sits with the Trust Board and NHS Improvement as the Trust's regulator. A lot of work was taking place with the regulators to agree what the financial sustainability plan will be.

NH asked, in relation to the block contract, if there were elements that were not profitable. MB confirmed there were. NH asked if this placed the Trust at risk. MB commented that when the national PSF money is included the Trust was profitable.

NH commented that within the audit report on the Quality Account there were areas that were rated as 'satisfactory' and asked if that meant they required improvement. CJa commented that the reason they are coloured in blue within the report is that a difference had been identified, although it was one or two differences which were very minor and did not change the overall position, otherwise they would all have been green. The areas that are rated as 'N/A' for not applicable are where the auditors are not required to give an opinion. NH suggested it be changed to not required rather than not applicable.

NA asked, in relation to the significant risk traffic lights, what benchmark was placed on the template which shows that everything is perfect, and how was it estimated that everything was overly prudent or perfect. CJa commented that the external audit process was more to do with looking at the overall control environment and identifying any errors. When doing testing there were some areas that the Trust had over provided and therefore it was not rated as green. Judgements were on the prudent side and the green circle is part of the audit report template used by Deloitte and knowledge gained over the years. Through the audit it was found that there were not really any errors and the judgement is taken on the management as a whole.

JL asked if the savings were in this financial year or cumulative. MB commented that in summary every year the Trust has to make a level of saving in order to achieve its financial target and there may be an increase in costs such as pay. Some areas of saving may be non-recurrent and the recurrent and non-recurrent are separated. An example of non-recurrent may be in relation to training where the Trust may decide to hold off on spending for a period of time as a one off saving to meet the target. An ongoing area where the Trust is focussing on is in relation to the use of out of area beds which cost a lot of money and might not be good for service users and carers. The Trust would not re-report savings made in other years. He will cover this off in more detail at the finance training session.

AM reminded governors that the development session on understanding NHS finance would be re-arranged.

It was RESOLVED to RECEIVE the Annual Report, accounts and Quality Account for 2018/19 including the auditor's report.

MC/19/25c Governor engagement feedback (agenda item 7.3)

AM reported that the paper had been compiled from information provided by governors on events they have attended. The item continues to be a standing item on the Members' Council agenda as an opportunity for governors to formally feedback on the events they have attended and for other governors to ask them questions. In addition, LHo and PW had requested to provide feedback on the national governor conference they attended.

The key messages from the national governor conference were presented by LHo and PW, highlighting that a lot of good work was taking place by the Trust to support the Members' Council and membership, with potential future areas for focus being the BAME community and young members as well as governor networking.

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

MC/19/26 Integrated Performance Report Quarter 1 2019/20 and Focus on suicide prevention (agenda item 8)

MC/19/26i Focus on - suicide prevention (agenda item 8i)

The key messages from the work taking place in the region were presented by MD and LHa. This was an area identified at a previous Members' Council meeting requiring further information.

CI commented, in relation to her recent comments around letters dismissing service users from services, that the communication pathway needed to be reviewed as some people did not always know how to communicate their feelings. She would like it to be set in stone that letters are not sent out and that staff try to communicate and find out what it is that people need, as it can help save lives.

NA commented that he thought the strategy was very good and covers what needs to be focussed on. However the figures on prevention only went up to 2017 and that was because the figures since then are very disappointing and the strategy has not had an impact on the suicide rate. NA asked, in relation to North Bridge, what the improvements were. LHa commented that the improvements were not finished. Highways England had to have full engineering assessments and to ensure that any changes are effective and based on research. NA commented that the work did not appear to be joined up as notices can attract some people. LHa commented that this was why the 'messages of hope' was a contentious issue. NA commented that they needed to be mindful as they could be displaced and go to other areas. LHa commented that assurance has been provided by Highways England that they are looking at other areas.

SH commented that she heard on the news about potentially making first aid in mental health training more widely available and asked if it was part of the strategy. MD commented that this was one of the areas that would be looked at as part of a learning needs analysis. It was provided locally within the Trust. LHa commented that, as part of a meeting with Yorkshire Ambulance staff, the Trust identified some bespoke training may be needed. SH asked if the Trust would be able to provide their training to external agencies. MD commented that it may be possible as part of the collaborative partnerships.

DD commented that he did not feel the installation of nets would stop suicide and the reasons behind why people take their own life needed to be looked at such as access to or the cost of access to services. Nationally the Trust needed to get together with other trusts. MD commented that it formed part of a presentation by the Debt Support Service.

AM suggested that governors could continue the conversation during the break.

MC/19/26 Integrated Performance Report Quarter 1 2019/20 (agenda item 8)

The key messages from the Integrated Performance Report were presented by Laurence Campbell (LC), Mike Doyle (MD) in relation to quality, Mark Brooks (MB) in relation to finance, and Alan Davis (AGD) in relation to workforce. Governors were reminded that full Integrated Performance Reports (IPRs) are available in Trust Board papers and on the Trust's website.

PS commented, in relation to CAMHS, it appears that less than a third of children referred are seen within 18 weeks and asked if there were problems in the service such as capacity or if it was masking a much larger problem, such as services in schools. CH commented that it was all of those issues. In Calderdale and Kirklees there was less of a wait, however in Barnsley and Wakefield it was significantly greater. In Calderdale and Kirklees the Trust works with voluntary providers and referrals are triaged and where support can be provided outside of specialist CAMHS, people will be signposted. A specific change programme has been identified in CAMHS and will focus on Barnsley and Wakefield first. It includes looking at the combination of pathways which are not currently where they should be both within our services and others, that some jobs are challenging to recruit to, and there are some issues where the demand is higher than the Trust service is currently commissioned to provide. AM commented that it was an area that could be looked at in further detail by the Quality Group.

Action: Tim Breedon

LHo commented in relation to the collection of data for the Friends and Family Test (F&FT) whether different technology could be used such as a text message so that people can answer the question later. MD commented that other media and devices could be looked at.

Action: Tim Breedon

AJ asked how many people responded to the F&FT from the percentage given. AM commented that the detail was in the full IPR and would be included in the future presentations to the Members' Council.

Action: Tim Breedon

LHo asked who looked at the information within staff appraisals. AGD commented that, for the performance indicator, managers are asked for a return of when it was completed, and other information should be fed up through management arrangements such as training needs analysis. The Trust would be piloting an e-appraisal system which may provide further analysis.

NA commented that inappropriate out of area bed days had steadily decreased but is still RAG rated red and asked why the level was set so low and why other statistics weren't. MB commented that, in relation to out of area beds, there was a three-year trajectory and the reason the target was so challenging in comparison to some others is that it was a significant financial and quality risk to the Trust. Some other targets are set nationally.

JL commented that the agency cost did not bear any relation to the inefficiency of having those staff. MB agreed but added that a lot of the Trusts agency staff were longer term as they were roles that the Trust couldn't easily recruit to. AM noted that there was a quality element as well as financial.

AJ asked in relation to the use of restraint and admissions under the Mental Health Act, whether they were monitored in relation to BAME service users. He asked if the number could be represented differently as it did not reflect how many people it included and what proportion from those communities were detained. AM commented that it was an area that could be looked at in further detail by the Quality Group, including what metrics should be presented as part of the performance update at Members' Council meetings.

Action: Tim Breedon

MC/19/27 Holding Non-Executive Directors to account - annual session (agenda item 10)

The governors held an interactive 'speed-dating' session with the Non-Executive Directors to hold them to account in their role on the Trust Board.

MC/19/28 Customer Services and Serious Incidents Annual Reports 2018/19 (agenda item 9)

Due to time constraints this item was not presented. Hardcopies of the presentation were provided to governors prior to the meeting.

MC/19/29 Closing remarks, work programme, and dates for 2019/20 (agenda item 11)

AM thanked the governors for their attendance and input.

Meeting feedback

A hardcopy form was available for governors should they wish to provide feedback on the meeting, which would also be circulated electronically.

Work programme

The work programme for 2019 was included with meeting papers for noting.

Dates for 2019/20

The dates for the Members' Council meetings in 2019-20 held in public were noted as follows:

- Monday 16 September 2019, Annual Members' Meeting (Wakefield) - afternoon meeting, Large Conference Room, Fieldhead Hospital, Ouchthorpe Lane, Wakefield, WF1 3SP.
- Friday 1 November 2019 (Wakefield) - 9.30am-2.30pm, Large Conference Room, Fieldhead Hospital, Ouchthorpe Lane, Wakefield, WF1 3SP.
- Friday 31 January 2020 (Barnsley) - 9.30am-2.00pm, Legends Suite, Barnsley Football Club, Grove St, Barnsley S71 1ET.

Signed:



Date: 1 November 2019