

Minutes of the Members' Council meeting held on 31 July 2020
Meeting Held Virtually by Microsoft Teams

Present:	Angela Monaghan (AM)	Chair
	Bill Barkworth (BB)	Public – Barnsley (Deputy Lead Governor)
	Paul Batty (PB)	Staff – Social care staff working in integrated teams
	Evelyn Beckley (EB)	Appointed – Staff side organisations
	Bob Clayden (BC)	Public – Wakefield
	Adrian Deakin (AD)	Staff – Nursing
	Dylan Degman (DDe)	Public – Wakefield
	Daz Dooler (DDo)	Public – Wakefield
	Lisa Hogarth (LH)	Staff – Allied Healthcare Professionals
	Carol Irving (CI)	Public – Kirklees
	Tony Jackson (TJ)	Staff – Non-Clinical Support Services
	Adam Jhugroo (AJ)	Public – Calderdale
	Trevor Lake (TL)	Appointed – Barnsley Hospital NHS Foundation Trust
	John Laville (JL)	Public – Kirklees (Lead Governor)
	Ruth Mason (RM)	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Debbie Newton (DN)	Appointed – Mid Yorkshire Hospitals NHS Trust
	Tom Sheard (TS)	Public – Barnsley
	Keith Stuart-Clarke (KSC)	Public – Barnsley
	Cllr Nicola Sumner (NS)	Appointed – Barnsley Council
	Debs Teale (DT)	Staff – Nursing Support
	Tony Wilkinson (TW)	Public – Calderdale

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
	Alan Davis (AGD)	Director of Human Resources, Organisational Development & Estates
	Charlotte Dyson (CD)	Deputy Chair / Senior Independent Director
	Chris Jones (CJ)	Non-Executive Director
	Carol Harris (CH)	Director of Operations
	Kate Quail (KQ)	Non-Executive Director
	Sam Young (SYo)	Non-Executive Director
	Laura Arnold (LA)	Administrative Support (observer)
	Paul Hewitson (PH)	Director, Deloitte LLP (for item 7.6 only)
	Andy Lister (AL)	Head of Corporate Governance (Company Secretary) (author)

Apologies:

Members' Council

Marios Adamou (MA)	Staff – Medicine and Pharmacy
Kate Amaral (KA)	Public – Wakefield
Cllr Bill Armer (BA)	Appointed – Kirklees Council
Jackie Craven (JC)	Public – Wakefield
Cllr Ros Lund (RL)	Appointed – Wakefield Council
Cllr Chris Pillai (CP)	Appointed – Calderdale Council
Phil Shire (PS)	Public – Calderdale
Jeremy Smith (JS)	Public – Kirklees
Barry Tolchard (BT)	Appointed – University of Huddersfield

Attendees

Erfana Mahmood (EM)	Non-Executive Director
Sean Rayner (SR)	Director of Provider Development
Subha Thiyagesh (ST)	Medical Director
Rob Webster (RW)	Chief Executive
Salma Yasmeen (SYa)	Director of Strategy

MC/20/21 Chairs re-appraisal (to be held in private) (agenda item 1)

For confidentiality purposes the minutes relating to this item have been recorded separately.

It was **RESOLVED** to **APPROVE** the Chair's interim appraisal. Based on the interim appraisal and approval of the Chair's reappointment, a recommendation for progression along the remuneration range identified by NHS Improvement will be made at the next Nominations' Committee. A recommendation will then be made to the Members' Council for approval in October 2020.

MC/20/22 Welcome, introductions and apologies (agenda item 2)

The Chair, Angela Monaghan (AM) welcomed everyone to the meeting, apologies were noted as above. The meeting was quorate and could proceed.

AM noted it was Eid and this was the reason why some apologies had been received. Steps would be taken in future to try and avoid Members' Council meetings being held on dates of major religious festivals.

AM explained the logistics of how the meeting would be run due to it being conducted virtually through Microsoft Teams.

AM informed attendees that the meeting was being recorded for administration purposes, to support minute taking, and once the minutes had been completed the recording would be destroyed. Attendees of the meeting were advised they should not record the meeting unless they had been granted authority by the Trust prior to the meeting taking place.

MC/20/23 Declarations of Interests (agenda item 3)

The following declarations were considered by the Members' Council for Bill Barkworth (BB) publicly elected governor for Barnsley and Deputy Lead Governor, and Adam Jhugroo (AJ) publicly elected governor for Calderdale.

Name	Declaration
BARKWORTH, Bill Publicly elected – Barnsley	Director, Barkworth Associates Limited. Senior Associate with Campbell Tickell, a management consultancy partnership specialising in social housing. The partnership does not work with the NHS but may do so at some stage in the future. Member – Healthwatch Barnsley.
JHUGROO, Adam Publicly elected – Calderdale	<u>Self:</u> Employed in Primary Care Diabetes Team, NAPP Pharmaceuticals. Currently in the process of joining Cygnet Healthcare as a Bank Registered Mental Health Nurse.

Name	Declaration
	<p>Recently joined NHS Professionals as a Registered Mental Health Nurse in relation to the Coronavirus outbreak.</p> <p>Clinical Contact Caseworker (Tier 2 – Call Handler) within the NHS Track and Trace Program (NHS Professionals).</p> <p><u>Daughter</u>: Student Nurse / Staff Bank, South West Yorkshire Partnership NHS Foundation Trust.</p>

No further declarations were raised in addition to those noted above.

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

MC/20/24 Poem to be read by Carol Irving (agenda item 4)

AM introduced the item. Carol Irving (CI) reported that she helped run a charity called Serendipity which included writing groups to help people's wellbeing.

CI stated the poem reflected a moment in time and stepped into another world and reminded the group that mental health touches everyone.

A copy of the poem is appended to the minutes.

It was RESOLVED to NOTE the poem read by Carol Irving and thank Carol for her contribution.

MC/20/25 Minutes and actions of previous meetings held on 1 May 2020 (agenda item 5)

No amendments or corrections were noted.

It was RESOLVED to AGREE the minutes of the Members' Council meeting held on 1 May 2020 as a true and accurate record.

AM pointed out that some of the action points had been deferred due to the Covid-19 pandemic and this had taken place to reduce the burden on the executive team.

MC/20/16 – AM reported the topic of recording meetings had been looked at in detail. This meeting was being recorded and the reasons had been explained. Any member wishing to record the meeting for inclusion purposes could contact the Trust to seek permission to record the meeting. This would be formalised within the Constitution review in October 2020.

Action: Andy Lister

MC/20/17 – This action involved discussions around recovery and restoration. There would be detailed discussion in Strategic Board in September. Governors should contact Salma Yasmeen or Dawn Pearson if they had anything to contribute. Bob Clayden (BC) and Debs Teale (DT) stated they had asked to be involved and hadn't heard anything. The communications team would be asked to confirm that governors had been offered inclusion in this process.

Action: Salma Yasmeen

MC/20/18a – This action related to elections and was on the agenda for this meeting.

MC/20/19b – This action related to the appointment of a new Deputy Chair and Senior Independent Director as Charlotte Dyson's (CD) term would be coming to an end in January 2021. This process was dependant on the appointment of a new Non-Executive Director which was on today's meeting agenda.

MC/20/03 – Action relating to monitoring visits and quality monitoring visits. These matters were ongoing.

MC/20/10 – Safer staffing had featured at the last quality group meeting and would be discussed further at the next quality group meeting. To remain on the action log.

MC/19/34 – This action was in today's meeting agenda at item 8.3

MC/20/26 Chair's / Chief Executive's Update to include feedback from the Trust Board meeting held on 28 July (agenda item 6)

- AM reported she and the other Non-Executive Directors (NEDs) had been working predominantly from home during Covid-19 and this had restricted them in terms of visibility i.e. going to meet teams, services and attending events. They had however maintained contact by attending meetings virtually.
- AM responded to a query and updated that the NEDs had not been part of the formal command structure meetings but had been kept updated in relation to actions and decisions taken through silver command. Initially this had been on a daily basis and then moved to three times a week and was currently twice weekly. There had also been a weekly meeting between the NEDs and Mark Brooks (MB) and Rob Webster (RW) to review risks and decisions taken during command meetings and identify if any required Trust Board sign off.
- Some of the NEDs had attended silver command meetings as observers.
- AM gave a breakdown of what had been to Tuesday's Board meeting, updated on the content of the private board meeting agenda and explained the context of the private meeting.
- AM advised members were able to view all public papers taken to the Trust Board on the Trust website.

No queries or questions were raised.

- Tim Breedon (TB) was representing Rob Webster (RW) in his role of Deputy Chief Executive in RW's absence.
- The Trust was currently spending a significant amount of time interpreting and acting on national guidance through the gold, silver and bronze command structure. This structure had proven to be a strong way of communicating through the Trust on new and emerging guidance.
- Outbreak management was being closely monitored by the Trust. Over 2000 swab tests had now been carried out for staff and their households, 1800 members of staff had received direct swab tests. The Infection Prevention and Control team had been analysing the test results to monitor the virus and its impact upon the organisation.
- Positive Covid-19 tests were very low for the Trust's inpatients.
- 130 staff members were either working at home or absent from work as a result of testing positive for the virus. These staff members were getting additional health and wellbeing support.
- The Trust had ensured the right level of risk assessment was being used for staff, especially those identified to be within vulnerable or high-risk groups.
- TB identified that currently the Trust was monitoring and staying alert to the virus but was also ensuring planning was in place for the stabilisation and recovery work that would follow.
- Learning from the response stage was being coordinated through quality impact assessments and planning in relation to staffing and changes that may follow.

AM reported that governors should be receiving the daily Covid-19 updates, *The Headlines* every Monday, *The View* on a Friday and *The Brief* every month, and these should be keeping them informed on Trust business. Wellbeing packs were being distributed and should be on their way to governors soon.

- Alan Davis (AGD) responded to a query about the timing of Covid-19 risk assessments. He reported the Trust had just completed its return.
- This was being monitored nationally as a high priority. The Trust had been very proactive in completing risk assessments for high risk groups.
- BAME colleagues had all completed risk assessments in July. The risk assessments had then been rolled out to further 'at risk' groups.
- 83% of all staff across the Trust had now completed a risk assessment. In reference to at risk' groups (which included all males) 84% had completed a risk assessment.
- Regionally and nationally this put the Trust in a very strong position compared to other Trusts. Risk assessments were to be reviewed fortnightly or if any significant changes were identified.
- The correct percentages were probably higher than these figures as when the risk assessments began there was no requirement to record them, they were taking place between managers and staff.
- A self-assessment risk tool had also been developed and 3100 staff members had completed this.

BC reported it was good to receive the communications from the Trust, but a lot of the information was embedded on the intranet which governors didn't have access to.

AM reported that *The Headlines* in particular were aimed at staff. Should governors require particular access to an item they could request it through the membership office. Dawn Pearson was looking at a potential 'governor intranet' as part of her inclusion work and AM would check what, if any progress had been made on this given the current situation with Covid-19.

Action: Angela Monaghan

Lisa Hogarth (LH) queried the testing numbers as there were two swabs per person. TB clarified that both swabs counted as one test per person. LH went on to query information governance in relation to testing. When she had been tested, she had provided personal information to a private company and asked what control the Trust had over the information staff were providing.

TB reported that contracts had been set up nationally and any company being involved in track and trace work would need to meet the same information governance standards as any NHS organisation. LH suggested it may be useful to let staff know this as it had been anxiety provoking at the time of the drive-through test.

Tony Wilkinson (TW) asked when the Trust had been made aware of recent developments in Kirklees i.e. the localised lockdown.

TB reported that the Trust was notified early that morning. A Gold Command meeting had taken place at 8:30am to review the information and the information had been circulated Trust-wide in the Covid-19 update briefing that day. A further review would take place on Monday 3rd August.

It was RESOLVED to NOTE the Chair's and Chief Executive's remarks.

MC/20/27 Members' Council Business Items (agenda item 7)

MC/20/27a Governor Appointment to Members' Council and Trust Board Groups and committees (agenda item 7.1)

- AM updated that the paper explained the process by which people are nominated to groups and committees.

- The Members' Council Coordination Group (MCCG) manages the process and had received a number of self-nominations.
- The MCCG had made recommendations that Keith Stuart-Clarke (KSC) should be appointed as the Barnsley representative to the MCCG and Daz Dooler (DDo) should be appointed as the representative governor on the Trust Board Equality and Inclusion Committee.
- AM confirmed these appointments were for three years.

It was RESOLVED to APPROVE the recommendations as outlined in the paper.

MC/20/27b Governor Feedback (agenda item 7.2)

- John Laville (JL) presented two slides reporting that himself and BB had now met (virtually) with over half of the governors, 13/14 public governors, 3/6 staff governors, 0/8 appointed governors, and Members' Council currently held 5 vacancies.
- These meetings were aimed at JL and BB getting to know the governors but also what it meant to be a governor and each governor's thoughts and feelings on the Members' Council.
- Some key themes from public governors were that they would like to be more involved in local community groups. Some had already good established networks.
- Some members wanted to know more about Trust work in their local area. Many had also stated that they felt isolated due to only meeting once every three months and queried whether there were other opportunities to meet more regularly, possibly on a more local level.
- All staff governors agreed it would be of benefit to meet their fellow staff governors, especially through virtual means given their different work locations and disciplines.
- All governors agreed that becoming a new governor was not an easy process and perhaps a buddy system could be utilised to make this process easier.
- JL asked those governors who had not spoken to JL or BB to get in touch and also check the junk folders of their e-mails for correspondence from JL and BB.
- As part of the inclusion strategy a geographical map was being produced including key community groups for governor involvement. Governors would then get to know the key issues and good practice being shared within these meetings.
- Mechanisms for governors to witness the Trust at work, this would only be from an observational perspective to aid understanding of operational practice.

An improved process was required for governors to feedback issues and good practice.

Action: Members Council Co-ordination Group

- Public governors and staff governors reflected that it would be of great benefit to meet more locally outside of Members' Council. Virtual meetings could be a very efficient way of achieving this.
- JL reiterated he and BB were happy to speak to governors about progressing these items and they should get in touch by whatever means possible.
- A query was raised in relation to the extra meetings and restrictions to those governors who worked full time. JL stated that everything would be done to accommodate governors who wanted to be involved wherever possible.
- DDe reported he had not been cited in the feedback paper and asked if he could be included next time. It was noted that he had attended Nominations' Committee, Trust Board and governor Q and A sessions.

Action: Laura Arnold

It was RESOLVED to NOTE the Governor Feedback

MC/20/27c Assurance from Members' Council groups and Nominations Committee (agenda item 7.3)

AM reported she intended to take the item as read. AM reported that in future, for this item, a brief summary of each group would be provided to aid governor understanding.

Action: Laura Arnold

These items were not for focussed discussion but awareness and an opportunity to ask any questions. AM asked for any questions in relation to the Members' Council Groups or Nominations Committee. No questions were received.

BC noted that his name was spelt incorrectly in the Members' Council Coordination Group minutes. It was noted that this would be rectified in the notes.

Action: Laura Arnold

It was RESOLVED to RECEIVE the assurance from Members' Council groups and Nominations Committee.

MC/20/27d Nominations Committee annual report 2019/20, including update to terms of reference (agenda item 7.4)

AM explained that committees and groups should produce an annual report and review their terms of reference each year. AM reported this was to assure the Members' Council that the Nominations' Committee was performing its role effectively. The report was against each of the objectives set out in the terms of reference.

AM summarised the report contained the duties of the Committee, the work the Committee had completed over the previous year, the attendance of members followed by renewed terms of reference. The only changes were to the membership.

DDe, JL and BB had all been added to the group following approval at May's Members' Council meeting.

No comments or questions were raised.

It was RESOLVED to RECEIVE the annual report for 2019/20 and APPROVE the updated Terms of Reference for the Nominations Committee.

MC/20/27e Members' Council Co-ordination Group Terms of reference (agenda item 7.5)

AM reported the changes to the terms of reference were minor and related to membership. JL was now the chair, BB was a member as deputy lead governor, AJ had been appointed as a public member from Calderdale.

It was RESOLVED to APPROVE the updated Terms of Reference for the Members' Council Co-ordination Group.

MC/20/27f South West Yorkshire Partnership NHS Foundation Trust Annual Report and Accounts 2019/20 (agenda item 7.6)

MB introduced the item by explaining that the recommendation was to inform the Members' Council of what had been done this year as it had been slightly different due the impact of Covid-19. The annual report and accounts would be formally received at the Annual Members' Meeting in September. MB summarised the following points:

- The Trust had achieved all of its year-end targets.
- The Trust had a duty to submit an annual report, annual accounts and quality account.
- The Trust was the first in the country to lay its annual report and accounts before parliament.
- The quality account deadline had been extended and the account would not be subject to audit this year.
- The salient points of the annual report had been audited as required.
- The Members' Council was obliged to receive the annual report from the external auditor Deloitte.

Paul Hewitson (PH) from Deloitte:

- PH started by explaining as an external auditor he was answerable to the governing body of the Trust, the Members' Council.

- This was an annual presentation to the governing body of the Trust and the conclusions that the external auditors have reached about the Trust.
- This year it had only been an annual report and accounts audit, due to the quality account deadline being amended nationally and not requiring audit.
- PH explained that his responsibility was to perform an audit on the annual report and accounts to look at the key risk areas and test those risks to make sure the financial arrangements were true and fairly stated. There was also a review on whether the Trust was demonstrating value for money
- The audit also reviewed if the Trust was a 'going concern' and this could have been difficult due to the uncertainty around financial planning, but due to the financial position of the trust there were no issues in relation to this.
- Some initial work was carried out before the quality account audit was suspended. Some limited testing of early intervention in psychosis and inappropriate out of area placements had taken place, and, while this work was not concluded, no issues were identified in either.
- PH stated Deloitte submitted reports to the Department of Health & Social Care and the National Audit Office as all NHS Trust figures got added together nationally for the government accounts.
- PH explained that the statement "All opinions were unmodified" meant that no issues were identified, and this was the best possible outcome from an external audit.
- The external auditor had to identify the areas most likely to give rise to a material misstatement in the financial statement. The ISO 260 report that had been circulated covered this in detail, but PH stated he would give an overview summary.
- The first thing of note was the 'modern equivalent asset design' which meant had the Trust valued its estate correctly. The perspective on this was not looking at what a Trust had but what it would cost to replace it to get the same level of service using current building methods. The controls were deemed satisfactory. There was a 'material uncertainty' identified but this was in relation to the valuations having taken place 31st March 2020 and the Royal Institute of Chartered Surveyors reporting that any valuations at that time had a material uncertainty due to Covid-19. This has applied to every other trust across the board.
- The other identified risk was in relation to the management override of controls. This refers to management being in a strong position to influence the financial statements to their own gains or to hide issues.
- PH reported they had found a weakness in the journals review mechanism. There had been one in place previously but because it had never highlighted any issues it had been replaced with other controls, which the external auditor was not totally satisfied with, but there was no evidence of management influence or nefarious activity in any way.
- PH summarised the audit findings. The draft report and accounts had been submitted to parliament within timescales.
- The Trust finance team had done an excellent job of preparing the accounts and engaging with the audit.
- There was one identified uncorrected misstatement in relation to the value of plant and equipment. This would have increased net assets by £273,000 and could have increased reserves by the same amount. This was due to a difference in the valuation date and the year-end date which meant an estimate had to be made as to how much the value could have changed. This was a very small issue in the context of everything else.
- The Annual report and annual governance statements required very little adjustment from the first draft.
- Accounting policies were in line with what would be expected.

PH concluded his summary and offered to take any questions.

TW asked what Provider Sustainability Funding (PSF) was.

PH explained this was a sum of money that the Department of Health and Social Care (DHSE) made available to NHS Trusts if they met certain criteria. The reason this had been mentioned in the report was because if a Trust didn't meet the target for PSF they didn't get the money.

Therefore, there was the incentive for a financial director to manipulate the financial statements to meet the targets to get the PSF monies, but there was no evidence of this whatsoever from the audit.

TW referred to PH's comments about the journals and queried whether this had been a considered decision by the Board or whether the system of considering journals had been allowed to drift?

PH responded by saying this was a query likely to be answered by Mark Brooks (MB) but from his perspective the finance team felt they weren't finding anything through this and their system of reconciliation, reviews and tight budget controls gave the finance team and the Board sufficient assurance, but from the auditors perspective this was not sufficient to mitigate the risk.

MB added that in reality the risk was seen to be low and there were a number of compensating controls, there were a lot of account reconciliations after the event and what PH was referring to was that the Trust was not doing this before the event, proactively, it was being completed after the journal had been entered.

The Trust had been comfortable with this historically but would soon be moving to a new accounting system in October / November 2020 and this system required approval before journals were entered on the system. MB also clarified that as an extra control he had no access whatsoever to the accounting system and that was intentional so that he could not input to the system.

BB queried as PH had made the observation did the Trust then make a recommendation about what should be done to resolve the issue?

MB confirmed this was the case and the new system in October would resolve the matter. In the interim any sensitive or unusual journals would be checked prior to being entered on the system.

It was RESOLVED to RECEIVE the Deloitte report on the Trust Annual Report and accounts for 2019/2020.

MC/20/27g Quality report and accounts (agenda item 7.7)

TB clarified that the timescale for the quality account had been moved to December 2020 and as already discussed would not be subject to audit this year. A revised report was planned to go to Trust Board in September. The same process had remained in place in respect of consultation and discussion.

The Members' Council Quality Group was taking place on 10 August 2020 and this would have sight of the first draft of the report. Partners would also be consulted and asked to comment on the draft report.

BC queried whether completing this work later in the year increased any risks to the Trust. TB responded to say that there would be no increase in risks to the Trust as the report was retrospective.

It was RESOLVED to RECEIVE the update on the 2019/20 Quality Account.

MC/20/27h Customer services annual report and accounts (agenda item 7.8)

TB reported that normally this report would have been reviewed by the Members' Council Quality Group (MCQG), but this was not the case due to Covid-19. The report would, however, be going to the next MCQG meeting.

TB continued that the Customer Services annual report contained some useful information on changes that had been made to the complaints process and improvements that had been made in relation to timescales.

DDe reported he had looked at the complaints report and queried if the process was differentiating between a formal complaint, an informal complaint and a comment. Was there anything that governors could be looking out for in their areas to try and help resolve issues?

TB reported that any issue reported to a governor should be reported into the Trust so that it could be addressed. In terms of the report, any formal complaint that had been registered had been through the process of attempted informal resolution before it became a formal complaint. A local resolution was always the preferred process.

It was RESOLVED to RECEIVE the Customer services annual report and accounts.

MC/20/27i Serious Incident annual report 2019/20 (agenda item 7.9)

TB reported that this report showed the Trust's performance against incident reporting. A presentation had been attached to help break up the content of the report. This report would also go to the next MCQG meeting.

BC queried that in previous years the aim had been for zero suicides but from the paper the rate of suicide showed a very flat line and as such was a change of approach required to make more progress?

TB confirmed that the aim was to reduce the number of suicides and states that the report was for the previous year and so some of the work that was currently being undertaken should be reflected in next year's report. There was a strong piece of work linked to the West Yorkshire and Harrogate Integrated Care System (ICS), which featured in a separate report specifically about apparent suicide, and this came to MCQG and Members' Council.

AM reported that the zero-suicide target relates to people in mental health care, whereas the national figure was to aim to reduce overall suicide by 10%. Not all people who die by suicide are in touch with mental health services.

BC asked if the figures in the report reflected people in Trust care. TB confirmed this to be the case.

TB reported that around 30% of people who took their own life would be known to services and 70% were not. The work with the West Yorkshire and Harrogate ICS focused on people both inside and outside of services.

CI raised a query in relation to suicide and the wording and language of letters that were sent to patients prior to them being discharged from services. Were allowances made for people with dementia, literacy problems, memory problems?

TB responded that the decision to discharge someone from services was not taken lightly. There were policies and procedures to be followed around discharge including sufficient attempts to make contact with a person and ensure the person was clear about what they were being asked.

TB continued that the engagement work going on in the Trust was looking at what was right for individuals, not just groups.

TB agreed that there was scope for work to be done in respect of letters and the language used. AM clarified that a previous meeting had been arranged for CI to meet with Mike Doyle to discuss this issue. Given governor absence and then recent events, this had been unable to take place. TB agreed to set up a meeting with CI and Mike Doyle to review language in letters to service users. AJ also reported he would like to be involved in this work.

Action: Tim Breedon

Debs Teale (DT) reported the issue was about clear communication with service users and their individual circumstances and needs. DT was involved in 'Project Hope' with Salma Yasmeen which looked at communication with service users and staff. This looked for communication to be more open and honest. A trial was initially being carried out with Newhaven ward, but this should look to improve service user communication.

TW asked about the relationship between the Trust and local Healthwatch groups. TB responded that the Trust had a good working relationship with local Healthwatch groups and sits with them on a number of meetings from a Board perspective. A meeting is taking place with Healthwatch in the next couple of weeks to discuss their customer services appraisal of Trust services. Healthwatch are also involved in the sign off of the Trust quality account.

Paul Batty (PB) commented that Assertive Outreach Teams (AOT) used to deal with service users who were likely to disengage. The FACT (Flexible Assertive Community Treatment) model currently in use had the potential to lose those service users that were disengaging, especially those that were quiet and made very little contact.

TB reported that when transitions were made in the models of care it was important not to lose sight of any gaps and continue to evaluate things. The development of community forensic teams across the system was an ongoing piece of work with the forensic commissioners. This would be a useful point of discussion in the MCQG.

Action: Tim Breedon

Carol Harris (CH) reported that funding had been received for the pilot of a new community forensic team that would be starting in Wakefield. At the same time a review of the current, very small, forensic community team was taking place to look at how that would fit into the new model. The Trust would be the new forensic lead provider going forward and as part of that work would be looking at developing support for high risk people in the community.

AJ had noted that the top themes in relation to complaints were communication and staff attitudes. AJ referenced an incident in a neighbouring Trust where a young woman had died and there were problems around her care. Staff had written on social media about feeling despondent and didn't get enough praise, which caused significant issues.

A young nurse was "scapegoated" and was made to apologise. AJ asked if we were sharing any lessons in relation to incidents such as this and were staff advised in any way about the use of social media. It caused a lot of upset.

TB reported he was familiar with the incident and there was a social media policy in the Trust, and this was covered in the staff induction when people joined the Trust. It was also covered in the Information Governance Policy, but it may be prudent to give regular reminders about the use of social media and the associated risks.

Action: Tim Breedon

It was RESOLVED to RECEIVE the Serious Incident annual report

MC/20/27j Consultation / review of Audit Committee terms of reference (agenda item 7.10)

LC updated that this item is something that was adopted some time ago having been cited as best practice by Deloitte. The Audit Committee terms of reference were therefore reviewed very twelve months and presented to the Members' Council.

Minor changes had been made to the names of NHS bodies and minor changes to wording.

AM noted it was LC's final Members' Council meeting and gave thanks for all his work and contributions to the Trust and Members' Council.

It was RESOLVED to APPROVE the updated Terms of Reference.

MC/20/27k Recommendation of appointment of external auditors (agenda item 7.11)

LC updated that BB had been involved in the process with the evaluation team representing the governors. The current external auditor's appointment had come to an end, namely Deloitte. LC noted this had been a very thorough process with input from the procurement team to manage the process. There had been initial discussion with team members followed by interviews with the four organisations that tendered for the work.

The scoring process was very objective and resulted favourably for Deloitte, both including and excluding the charitable funds audit which was demonstrated in the paper.

BB reported he was involved as a governor and was particularly interested in what the prospective auditors understanding was of role of the Members' Council, how they proposed to engage and involve the council, and how they would meet with governors. There was also a focus on what they brought to the Trust from outside knowledge perspective and their benchmarking.

BB reported that he was positively assured that Deloitte were the right company for the job. BB thanked the procurement team for a smoothly run process.

It was RESOLVED that the Members' Council APPROVE the appointment of Deloitte LLP as the Trust's external auditor for a period of up to five years (an initial three years with the option of extending for a further two years).

MC/20/28 Trust Board Appointments (agenda item 8)

AM reported she need to vacate the chair. Items relating to the appointment or remuneration of the Chair or Non-Executive Directors had to be chaired by the lead governor, John Laville. AGD would remain to support John with any questions about process.

MC/20/28a Re-appointment of Chair (agenda item 8.1) (confidential item)

It was agreed that Charlotte Dyson would remain for this item as she has been involved in the process.

JL outlined the recommendation that was being put to the Members' Council for consideration. JL explained that the background and the process was included in the paper. JL explained he had experienced some technical difficulties earlier when the private discussion had taken place regarding AM's re-appraisal but had joined the meeting in time to hear CD say that as a Trust we were very fortunate to have AM as our Chair and very fortunate that she had considered re-appointment and JL fully endorsed that. JL opened the meeting up to comments.

CD clarified that the appointment was for a three-year term with a review after 12 months and AM's interim appraisal had been very positive, and this had been agreed by all governors in the earlier meeting.

It was resolved to CONSIDER and AGREE to the recommendation from the Nominations' Committee of re-appointment of Angela Monaghan as Chair from 1 December 2020 for a three-year term (with a review after 12 months from both sides). In the initial period she will remain on her current remuneration.

It was resolved to CONSIDER and AGREE to the recommendation that a remuneration review takes place at the Nomination Committee following approval of the interim appraisal. Any recommendation for progression to the top of the pay range will be made to the Members Council for approval in October 2020 with a view to being implemented on 1st December 2020.

MC/20/28b Non-Executive Director appointment (agenda item 8.2)

JL introduced the item to consider the appointment of a Non-Executive Director. The purpose and the format was clear and JL stated the recommendation to the Members' Council was to approve the appointment of Mike Ford. The Nominations' Committee had to ensure the right composition and balance to the Trust Board. Mike Ford's (MF) background was financial and he met the candidate requirements and he had the relevant financial qualifications. The process was outlined in the paper and was conducted virtually.

JL reiterated that MF was the stand out candidate from his perspective, this view was supported by BB who agreed and stated that all four candidates were strong, but MF stood out for his transformational work that he had carried out with the BBC. AJ agreed with this assertion.

BC asked if MF's biography and photograph could be circulated to the governors prior to the next Members' Council meeting.

Action: Andy Lister

It was RESOLVED to APPROVE the recommendation from the Nominations' Committee to appoint Mike Ford as a new Non-Executive Director from 1 September 2020 for a period of three years.

MC/20/28c Review of Chair and Non-Executive Directors remuneration (process and timescales) (agenda item 8.3)

JL explained where the Trust was paying Non-Executive Directors more than NHSE recommended remuneration it had been agreed these rates be frozen until they fell in line with the NHSE pay scales or on re-appointment.

AGD explained for the NED's there was a flat rate and Members' Council agreed we would hold rate until it fell in line with NHSE recommendations. The Chair's pay was slightly more complex. It had previously been on incremental scale and NHSE had now stipulated pay ranges.

The Chair's remuneration would be considered at the next Nominations' Committee and then the recommendation would come to Members' Council for approval.

It was RESOLVED to REVIEW and SUPPORT the process for the review of the Chair remuneration and NOTE the changes to Non-Executive Director (NED) remuneration agreed in November 2019.

MC/20/29 Members' Council business items (presentations) (agenda item 9)

MC/20/29a Integrated Performance Report (IPR) (agenda item 9.1)

MB provided an update of headlines since the end of the last financial year and the first quarter of this year. MB presented the summary performance metrics and explained that anything highlighted in grey had stopped being recorded during Covid-19.

There were two reasons for this; nationally, recording had stopped to allow the response to Covid-19 and secondly, locally, metrics recording had been paused to allow for other priority work to take place during the pandemic.

- The Trust had been able to maintain good performance against a number of the metrics despite Covid-19.
- MB reported that admission of children and young people to adult inpatient wards had a target of zero, but there were occasions when this action was the least worst option for the individual concerned. There was a high level of safeguarding input in these circumstances to make sure it was as safe as it could be.
- MB noted the increase in information governance breaches. Some work into this had established that staff redeployment as a result of Covid-19 meant staff were not always performing familiar tasks, and the majority of breaches were incorrect addresses. This was

taken very seriously by the Trust and messages around the importance of information governance were being reiterated through the communications team.

- There were some temporary financial arrangements in place that were allowing the Trust to break even every month at the moment.
- The core level of sickness absence had decreased over the pandemic.
- The staff turnover rate had also decreased.

TB introduced the Covid-19 response and Quality sections of the IPR:

- A great deal of work had taken place in relation to the testing of both staff and patients.
- TB clarified that the Trust was in a very similar position to other mental health and community trusts in relation to positive tests for staff. This demonstrated that trusts responding in these areas of work had done so in a broadly similar way.
- There had been notable numbers of positive staff tests in acute trusts.
- Staff absence as result of Covid-19 had made an impact on staffing numbers. At the time of the report 138 were off work due to symptoms, household symptoms or shielding.
- 29 service users (inpatients) had tested positive for Covid-19.
- TB reported that Trust staff had carried out huge numbers of tests for other organisations and care homes, particularly in the Barnsley district where they had made a significant contribution to the Barnsley health system as a well as support around infection prevention and control.
- 884 calls had been received into the occupational health helpline.
- 1600 video consultations had taken place each week, but it was accepted that this was not a suitable medium for everyone and more face to face contacts would be reintroduced as the pandemic continued to decline.
- Gold, Silver and Bronze command structure had been in place.
- Sufficient personal protective equipment (PPE) had been available to staff throughout the pandemic. Mutual aid arrangements were in place across the system and work with partners.
- There had been a very effective digital response to the pandemic, enhanced by investment in the digital estate that had taken place prior to the pandemic.
- The Family and Friends Test (FFT) had been relaunched on 15th June and the responses from this had been positive.
- Safer staffing numbers (inpatients) had been positive during the pandemic, this was due to people continuing to work hard, employment of students to help fill absence and people returning to work who had recently retired.
- TB reported the weekly risk panel now included Covid-19 incident reviews. Early indications suggest that there was a rise in the level of self-harm but otherwise reporting levels remained similar to previous years. Self-harm incidents were being monitored closely.

MB introduced the NHS Improvement metrics section of the IPR:

- MB updated that in relation to NHS Improvement metrics where numbers were highlighted in red these were as a result of the Covid-19 response. As an example, the maximum six-week wait for diagnostic procedures related to one service only which was reliant on our acute colleagues who had restrictions in what they could provide currently.

CH added that during Covid-19 Improving Access to Psychological Therapies (IAPT) had seen a reduction in clients who had completed treatment and were moving into recovery. This was as a result of the service becoming virtual and telephone based. Some clients did not want to work virtually and so wanted to wait until face to face meetings were available and others recovery scores had been affected by Covid-19 itself. There was a lot of work going on to restore services back to how they were prior to Covid-19 but the impact on recovery scores was expected to be seen for some time.

AGD provided some headlines in relation to workforce:

- Some focussed work had taken place around the reasons for sickness and absence and what had been identified was that there was increased sickness due to stress and anxiety, which the occupational health unit is monitoring.

- The health and wellbeing offer had been updated to include virtual contact and remote consultation. A health and wellbeing survey had been sent out to all staff and at the time of the meeting over 1800 responses had been received.
- AGD clarified that 123% staff fill rate related to the acuity of service users on the wards and demands on staff and did not mean that there was overstaffing taking place.

MB provided headlines in relation to finances and explained that there was a current artificial financial environment.

- Since Covid-19 had occurred previous planning arrangements and processes had been paused and normal financial arrangements had been paused.
- There was a current four-stage process of how the Trust was funded. This was originally in place from April until July but had now been extended until August.
- This gave every Trust the mechanism to break even. The Trust had also been paid a month's income early and so it had more cash available, and this had been put in place to allow Trusts to pay suppliers within seven days if possible. Compared to other Trusts we are in a strong position, paying 83% of suppliers within 7 days, whereas the national level was 36%.
- The Finance, Investment and Performance Committee was reviewing, according to guidance, what Trust money could be spent on and what could be reclaimed in response to the pandemic.
- The Trust continued to break-even at present, but the second half of the year was more uncertain as the details of the financial arrangements going forward had not yet been made available.

LH asked if the cost of remote working was being considered and if staff working from home were being compensated for increased energy bills.

MB responded that the cost incurred by NHS Trusts to enable staff to work from home was substantial. 3000 licences had been provided to allow home working, laptops had been made available, Microsoft Teams and other consultation tools had been provided.

AGD reported the conversations had been taking place with staff side in relation to the additional cost of working at home. The long-term arrangements, including chairs and equipment to be used to work from home were being reviewed. There were also tax allowances available for working from home.

LH asked if there was a target percentage of remote consultations that the Trust would like to continue with?

CH agreed that remote consultations would continue where it was the most appropriate option for the service user. A change process was in place including a quality impact assessment which would look at the impact of any changes made, but the focus would remain on what was best for the individual service user.

JL clarified that the staffing ratio of 123% was dictated by demand on the ward, therefore if the demand was 23% greater than anticipated the staffing was in place to support this.

TB confirmed that this was the case but also added that a Covid-19 cohort ward had been opened during this period which had to be staffed which had a significant impact on the numbers.

JL noted from previous meeting that the staffing rate figures always seemed to be over 100% and asked if there was a financial implication to this? MB confirmed this to be the case.

AM reported there were occasions when service users required two or three members of staff to support them, dependant on their level of acuity. Sometimes therefore extra staff were required to manage the acuity of a ward and the service users within it.

TB clarified that the planned staffing rates were reviewed on a regular basis and if there was a continued requirement that extra staff were needed the planned staffing levels would be reviewed.

DDo reported that a number of employees were beginning to struggle working from home due to the lack of work space available and asked if there were any plans to consider a rota to enable people to come in to work one or two days on a rotational basis?

CH responded that work was ongoing reviewing buildings and looking at what changes could be made to facilitate Covid-19 safe working environments. If people were struggling, efforts would be taken to make use of available space and facilitate people coming into work wherever possible. AGD added that working from home did not just present musculoskeletal issues but also wellbeing issues, and a working from home risk assessment was being developed to assess this.

LH asked whether patients detained under the Mental Health Act were being monitored in terms of the profiles of those patients being detained or restrained and their protected characteristics.

TB reported that the Mental Health Act Committee was monitoring protected characteristics through reports being brought into the Committee.

AM updated that the Equality and Inclusion Committee had a focus on groups with protected characteristics and how to improve data in this area.

It was RESOLVED to RECEIVE the update in relation to the IPR

MC/20/29b Care Quality Commission (CQC) – action plan update and update on our inspection and annual report unannounced / planned visits (agenda item 9.2)

- TB introduced the item and reported that the Trust rating from the CQC was currently 'good'.
- An action plan was in place with some 'should do' and 'must do' actions.
- Four main themes were in the improvement plan; risk assessment, medications, care planning and record keeping.
- A collaborative improvement plan was in place using quality improvement methods.
- Five priorities within the plan which focus on risk assessment, care plans, reduction of incidents of violence and aggression against staff, safe medicines and treating service users with dignity and respect.
- Although some aspects had been paused during Covid-19 some of the improvement work had continued.
- TB referenced the Plan, Do, Study, Act (PDSA) quality improvement approach.
- The Trust was receiving monthly updates again and these would go through the Clinical Governance and Clinical Safety (CGCS) Committee in line with the usual process.
- 100% of our 'must do' actions were on track at the end of March 2020.
- 97% of 'should do' actions were on track at the end of March 2020.
- There would be oversight of the report and updates in the next Members' Council Quality Group.
- In summary, the Trust had seen some improvements and the work had been picked up again.
- TB reported that the quality monitoring visits had been paused as a result of Covid-19, but these would be starting again in due course. The quality monitoring visits included an accreditation rating, and this was going to be linked to the quality monitoring visit report for the future.

LH queried how as a Trust we were in the position where contemporaneous notes weren't being done, as this was basic care and putting the person in the centre. Were lessons being learned before we got to the position of using the PDSA cycle?

TB noted that one of the key themes during the CQC assessment was they couldn't always see where things had been recorded; they weren't on the right place in the system. TB clarified that this wasn't an issue across the system but an issue that had been identified in a couple of areas.

On closer inspection it had been established internally that the records had been made but weren't in the right place. There was a piece of work continuing in relation to this.

It was RESOLVED to RECEIVE the update in relation to the CQC action plan update

MC/20/30 Any other business (agenda item 10)

MC/20/30a Annual Members' Meeting (agenda item 10.1)

- AL updated that the Annual Members' Meeting would go ahead as a virtual meeting on the 28 September 2020.
- The annual report and accounts would be presented as per normal practice. AL asked what the Members' Council would like to see or be included.
- One suggestion was for members to complete videos that could be presented to share their experience of Covid-19?
- The team were open to suggestions of what governors would like the day to include.

DDe reported as a new governor he had never attended an Annual Members' Meeting. DDe stated he was a former service user, volunteer and now employee of the NHS and had made a personal story/video on YouTube and would be happy to provide this.

BC asked about breakout rooms and whether this would be an option. Themes in rooms could be poetry, washing hands or what is like to be a governor. Would it be possible to have smaller groups facilitated within the meeting?

Action: Andy Lister

Ruth Mason (RM) suggested a gallery of artwork from Creative Minds. AM reported there had always been a performance in the past and this would be considered.

MC/20/31 Closing remarks, work programme, and future meeting dates (agenda item 11)

AM highlighted the Members' Council work programme needed reviewing to make sure any items highlighted as deferred by Covid-19 were picked back up and given a new date.

AM explained that the next meeting was on 30 October 2020 and was likely to be virtual. This would be also be the annual joint meeting with the Trust Board.

The Annual Members' Meeting would take place on 28 September 2020.

DDo wished everyone a good weekend and praised everyone on the work currently being undertaken.

IHI quality improvement programme was available to be completed by governors and there were some places still available. Governors to contact the membership office if they were interested.

It was RESOLVED to RECEIVE the work programme for 2020/21.

Members' Council Meetings 2020/21

The dates for the Members' Council meetings in 2020/21 held in public were noted as follows:

- 30 October 2020 – 9.30am-14.30pm
- 29 January 2021, afternoon meeting



Signed:

Date: 30 October 2020

Appendix

Poem by Carol Irving "A Moment in Time"

As she turns down the sheets, he is laughed at,
Screams, a waterfall, a cacophony of voices,
Blood ebbs and flows, sleep takes her leave.
Cries of men, abandoned to icy cold Atlantic waters
To God, to darkness, to lungs fill
Repeats and repeats echoing
She tries again to turn down the sheets
He is loading projectile words into five-inch guns on a war time destroyer
Someday man, sun downing, rejigs his suicide plan, locks himself in a bathroom
Yesterday he was the father, today I am not his daughter
Tomorrow he will hear his mother call his name from every cupboard door he opens
It is 3am, the world sleeps, she listens
Supplies him with mugs of hot sweet tea, garibaldi biscuits
A cold hand warmed lies into his, a strange yet familiar comforting confusion
Like a hand slipping into a glove and together, they try to turn down the sheets.