

**Minutes of the Members' Council meeting held at 10.00am on 29 January 2021
Meeting Held Virtually by Microsoft Teams**

Present:	<p>Angela Monaghan (AM) Marios Adamou (MA) Bill Barkworth (BB) Bob Clayden (BC) Jackie Craven (JC) Adrian Deakin (AD) Dylan Degman (DDe) Daz Dooler (DDo) Lisa Hogarth (LH) Carol Irving (CI) Tony Jackson (TJ) Adam Jhugroo (AJ) Trevor Lake (TL) John Laville (JL) Cllr Steven Leigh (SL) Ros Lund (RL) Andrea McCourt (AMc) Debbie Newton (DN) Cllr Mussarat Pervaiz (MP) Tom Sheard (TS) Phil Shire (PS) Jeremy Smith (JS) Keith Stuart-Clarke (KSC) Debs Teale (DT) Tony Wilkinson (TW) Tony Wright (TWr)</p>	<p>Chair Staff – Medicine and Pharmacy Public – Barnsley (Deputy Lead Governor) Public – Wakefield Public – Wakefield Staff – Nursing Public – Wakefield Public – Wakefield Staff – Allied Healthcare Professionals Public – Kirklees Staff – Non-Clinical Support Services Public – Calderdale Appointed – Barnsley Hospital NHS Foundation Trust Public – Kirklees (Lead Governor) Appointed – Calderdale Council Appointed – Wakefield Council Appointed – Calderdale and Huddersfield NHS Foundation Trust Appointed – Mid Yorkshire Hospitals NHS Trust Appointed – Kirklees Council Public – Barnsley Public – Calderdale Public – Kirklees Public – Barnsley Staff – Nursing support Public – Calderdale Appointed – Staff Side organisations</p>
In attendance:	<p>Tim Breedon (TB) Mark Brooks (MB) Alan Davis (AGD) Charlotte Dyson (CD) Carol Harris (CH) Chris Jones (CJ) Mike Ford (MF) Erfana Mahmood (EM) Kate Quail (KQ) Subha Thiyagesh (ST) Sam Young (SYo) Laura Arnold (LA) Andy Lister (AL) Kevin Gelder Adam Newman</p>	<p>Director of Nursing & Quality / Deputy Chief Executive Director of Finance & Resources Director of Human Resources, Organisational Development & Estates Deputy Chair / Senior Independent Director Director of Operations Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Non-Executive Director Medical Director Non-Executive Director Administrative Support Head of Corporate Governance (author) Strategic Planning Lead (item 7.5 only) WRM Sustainability Consultants (item 7.5 only)</p>
Apologies:	<p><u>Members' Council</u> Kate Amaral (KA) Paul Batty (PB) Pauline McCarthy (PMc) Barry Tolchard (BT)</p> <p><u>Attendees</u> Sean Rayner (SR) Rob Webster (RW) Salma Yasmeen (SY)</p>	<p>Public – Wakefield Staff – Social care staff working in integrated teams Appointed – Barnsley Council Appointed – University of Huddersfield</p> <p>Director of Provider Development Chief Executive Director of Strategy</p>

MC/21/01 Welcome, introductions and apologies (agenda item 1)

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

AM explained the logistics of how the meeting will be run due to it being conducted virtually through Microsoft Teams. AM noted the meeting is being recorded to assist with minutes but the recording would be destroyed once the minutes are approved. Attendees of the meeting were advised they should not record the meeting unless they have been granted authority by the Trust prior to the meeting taking place.

Item 7.5 relates to sustainability and estates and Kevin Gelder and Adam Newman will be joining the meeting for this item only.

Item 8.1 concerns the appointment of a Non-Executive Director. Members of the public and directors will be asked to leave the meeting for this item as it will be held in private.

AM noted today is the last meeting for some governors namely, Lisa Hogarth (LH), Marios Adamou (MA), Adrian Deakin (AD), Paul Battye (PB). AM thanked the governors for their support and contributions during their terms.

AM further noted Charlotte Dyson (CD) is approaching the end of her second term as a Non-Executive Director and this will be her last Members Council meeting.

Some governors are approaching the end of their first term, Daz Dooler, Kate Amaral and Barry Tolchard.

MC/21/02 Declarations of Interests (agenda item 2)

No new declarations for the register of interests were received in advance of the meeting.

AM reported a declaration in relation to items 8.1 and 8.2. AM noted all Executive Directors and Non-Exec Directors will step out for these items and John Lavelle will chair.

It was RESOLVED to NOTE the declarations of interest as outlined above.

MC/21/03 Minutes of the previous meeting and the joint Trust Board and Members Council meetings held on 30 October 2020 (agenda item 3)

It was RESOLVED to AGREE the minutes of the Members' Council meeting held on 30 October 2020 as a true and accurate record.

MC/21/04 Matters arising from the previous meeting held on 30 October 2020 and action log (agenda item 4)

AM noted actions highlighted in blue are considered complete unless any issues are raised in today's meeting.

MC/20/36 – Tim Breedon (TB) confirmed licences for the Institute for Healthcare Improvement programme are now available for governors. To close.

MC/20/38a – TB confirmed the work described in the action is included in the Equality, Involvement, Communication and Membership strategy. Strategy actions are to be reviewed at the next Equality and Inclusion Committee meeting. Daz Dooler (DDo) represents governors on this committee. To close.

MC/20/25 – AM noted the constitution update has been deferred to April 2021.

MC/20/27i – Carol Irving (CI) reported she has been working with Lauren Melling around wording of discharge letter. TB has had sight of the new letter and reported this was in its final stage and ready for sign off next week. TB noted CI's input had been very helpful. TB stated he would keep CI updated. TB noted there is to be a change in the way Trust letters are signed off to improve letters in the future. The Members Council Quality Group have an action to monitor progress. Lisa Hogarth (LH) asked why it had taken so long to resolve this matter. TB acknowledged it had taken longer than it should and a new clinical record keeping group will now monitor correspondence. TB confirmed service users are now included in the new process. To close.

AM asked for a new action to review the way the Trust writes notes and communications to service users, families and carers. Letters and communication need to reflect the Trust values of compassion and care. Debs Teale raised a concern about access to health records following bereavement and the jargon used. AM asked TB to take this into the Members Council Quality Group (MCQG) also. TB reported these issues were all part of the new Equality, Involvement, Communication and Membership strategy and would feed into MCQG.

Action: Tim Breedon

Joint TB/MC-1 – BC reported he had not been contacted until the day before yesterday and the action is out of date. BC reported the action had now moved on. AM reported she would follow up the item with Sean Rayner (SR).

Action: Angela Monaghan

MC/21/05 Chair's report – to include feedback from the Trust board meeting held on 26 January 2021 (agenda item 5)

AM's report outlined activity of Chair and Non-Executive Directors (NEDs) since last meeting and AM noted the following key items from the Trust Board meeting held on 26 January 2021:

- The Trust Board Business and Risk meeting took place on 26th January 2021.
- The new Board Assurance Framework (BAF) was approved.
- The Organisational Risk Register (ORR) was reviewed.
- Assurance for Infection, prevention and Control in relation to the Covid-19 was received.
- Assurance in relation to the Ockenden Review (concerning maternity services) was received.
- Reports providing updates for the West Yorkshire and South Yorkshire business developments including integrated care systems (ICS) were received.
- The Integrated Performance report was received in addition to updates from Trust Board Committees.
- An updated Scheme of Delegation was approved.
- In the private meeting the Chief Executive's dual role was reviewed.
- Commercially confidential business development updates including the Adult Secure Lead Provider Collaborative and integrated care developments in Barnsley were received.
- Progress for the Mental Health, Learning Disability and Autism Alliance development in South Yorkshire and Bassetlaw was received.
- A verbal update in relation to Serious Incidents was received
- A planning update was also received.

Adam Jhugroo (AJ) asked about staff vaccinations and take up from ethnically diverse populations. London statistics suggested uptake may be less among Black African, Black Caribbean and Filipino communities.

TB reported early data is being analysed to identify groups where uptake may be lower. The vaccination is being offered equally across all staff. Staff are being utilised across the vaccination hubs to represent diverse communities. TB reported targeted work is taking place to encourage people to have the vaccine.

Mark Brooks (MB) reported 4194 vaccinations had been administered as of this morning and a further 100 staff were booked in to be vaccinated today.

AM reported the Trust communications team was working to “myth bust” and provide staff with factual evidence to enable informed decisions to be taken about the vaccine. It is an individual decision for staff members ultimately as to whether they have the vaccine or not.

Tony Wright (TWr) asked if there had been any concerns raised in respect of the Chief Executives dual role in the private board meeting.

AM reported the Board had reviewed the position from the Trust’s perspective, the West Yorkshire integrated care system perspective and RW’s personal perspective. RW had given a summary of this position and then left the Board meeting for the other Board members to consider the arrangements. The Board are satisfied the current arrangements are working but this will be subject of further review as integrated care systems evolve.

Tony Wilkinson (TW) asked about Red, Amber, Green ratings (RAG) and the context of how they are used. TW asked if Red meant it would receive a higher priority.

AM explained the use of RAG ratings in relation to the BAF, Risk register and performance reports and that each document would contain a key that explained the meaning of the different ratings in relation to each specific document.

John Laville (JL) asked about the Trust response to the integrated care system arrangements and if any delays were expected. TB reported further clarity is to be received in the next two weeks around expected timescales.

Phil Shire (PS) reported there is a useful article from the Kings Fund explaining the context of the ICS developments and he would send this to the corporate governance team for circulation.

Bob Clayden (BC) provided feedback from the West Yorkshire and Humber cancer alliance in relation to RW’s dual role, stating that RW’s leadership in the ICS has helped to get a more patient centred approach.

Councillor Pervaiz (MP) reported she lives in an ethnic minority area and the community is being encouraged to listen to healthcare staff and not to listen to social media. MP is involved in circulating videos to promote the vaccine. MP’s father has had the vaccine and is fine. This has been circulated in the local community in Dewsbury and has worked to good effect. AM asked if the video could be shared with the Trust it would be very helpful for communications use.

Action: Laura Arnold

It was RESOLVED to NOTE the Chair’s report.

MC/21/06 Chief Executive’s update (agenda item 6)

Tim Breedon (TB) reported updates on the following key points in the absence of RW:

- TB noted the significant change in the prevalence of Covid-19 since the last meeting and the pressure this has brought to Trust staff over the Christmas period. TB praised the very positive response of Trust staff over Christmas.
- Prevalence of the virus remains high.
- Services are stable, face to face contact continues where necessary.
- Two vaccination hubs are now operational at Fieldhead (Wakefield) and Kendray (Barnsley).
- Staff self-testing continues with lateral flow tests.
- The Trust is maintaining focus on emergency arrangements with colleagues to support vaccine response.
- Flu vaccinations have concluded with good uptake, the EU exit is complete leaving the focus on the Covid-19 response.
- Staff wellbeing remains a key priority.
- Focus on inequalities work continues within the Trust for both staff and service users.

- The Trust is managing well in difficult and challenging times keeping safety at the forefront of our minds.

AM noted the work of staff and volunteers throughout the Trust and thanked them for their phenomenal efforts.

LH queried the accuracy of lateral flow testing.

TB reported accuracy was about 60-70% accurate. If a positive test is identified a further PCR (polymerase chain reaction) test takes places to confirm the outcome. It is acknowledged that lateral flow test is not as accurate as PCR but works well as an early indicator.

Debs Teale (DT) has been a volunteer at the vaccine hub, feedback has been fantastic, describing the experience as smooth, easy and pleasant. The team are responding incredibly well to changes.

Councillor Lee (SL) queried lateral flow testing and problems with false negatives.

TB responded to state there was little evidence to suggest this was the case.

Dylan Degman (DDe) stated lateral flow testing is done twice a week to reduce likelihood of false negatives.

It was RESOLVED to NOTE the Deputy Chief Executive's update.

MC/21/07 Members' Council Business Items (agenda item 7)

MC/21/07a Governor Engagement Feedback (agenda item 7.1)

AM introduced the item and asked for the paper to be taken as read:

- JL reported virtual governor meetings by district have now been set up and are working well. These have been aligned with the Members Council Coordination Group.
- Dawn Pearson (DP) and the communications team have produced a draft document about community involvement. The document has been reviewed by governors in virtual meetings and JL will summarise a response to DP.
- JL contacted Platform 1 yesterday – a men's mental health group in Kirklees. JL will now receive monthly updates from this group.
- The intention will be to mirror this work in other areas, with other groups, and feed information back into the Trust.
- The governor elections are ongoing, and applications are being encouraged where appropriate.

It was RESOLVED to NOTE the governor engagement feedback.

MC/21/07b Assurance from Members' Council groups and Nominations Committee (agenda item 7.2)

AM gave an overview of each of the groups that sit under Members Council, the coordination group (MCCG), quality group (MCQG) and nominations' committee.

AM asked to take paper as read:

AM reported NHS Providers is a national body which represents all NHS Trusts across the country. As part of their work they provide support for governors and have a Governor Advisory Committee.

The Trust received information about a vacancy for this committee at the end of last year and was brought to the meeting on 14th December 2020. Due to a timing issue we were not able to

communicate this to governors, but this is now on the work plan and will be highlighted in time for next year. As a result, the Trust did not put anyone forward.

Nominations have closed and voting will start soon and close on 26th March 2021. The recommendation is for MCCG to make the decision on behalf of MC. We get one vote as an organisation.

It was RESOLVED to AGREE that the MCCG makes the vote for the NHS Providers Governor Advisory Committee on behalf of the Members Council at the meeting on 8 March 2021.

JL will be coordinating a meeting soon to look at Members Council development plan and welcomes input from all governors.

BD asked for candidates for the NHS Providers vote to be shared well before the MCCG meeting.
Action: Laura Arnold

AM reported encouragement for a governor to co-chair the MCQG had been taking place for some time. Phil Shire (PS) has stepped forward to take up this role and TB and PS will be meeting next week to look at how this will work.

It was RESOLVED to AGREE that Phil Shire will become co-chair of the Members Council Quality Group.

AM reported Tony Wright (TWr) had self nominated for the vacancy on MCCG and as the only nominee he is now an appointed governor on that group.

AM clarified there were no further points of note or queries for this item.

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

MC/21/07c Update on Members Council Elections (agenda item 7.3)

In addition to the paper Andy Lister (AL) highlighted the following:

- Adverts have gone out in the Yorkshire Post for public governors
- Two adverts a week are being posted on Trust social media.
- E-mail and postal information have been sent out to members in the constituencies where there are vacancies.
- DP and the communications team are proactively encouraging applications from diverse networks.
- For staff vacancies, direct communications are being sent into the relevant staff groups
- Adverts have been placed in "The Brief"
- "Headlines" are advertising every week and a further notice has been placed on the electronic payslips message board.
- As of this morning there are four verified public nominations
- One verified staff nomination
- This month has seen eight new members join the Trust

BC reported he had received some comments from members who perceived the information to be about voting and not nominations. AL agreed to look at the election material to make sure it is clear.

Action: Andy Lister

It was RESOLVED to RECEIVE the update on the Members' Council elections 2021.

MC/21/07d Trust Performance Update (agenda item 7.4)

AM noted the slides had been sent to governors for their review:

CJ introduced the item and gave apologies for the late circulation of the document but thanked MB, TB and Alan Davies (AGD) for their work in keeping the Board updated in relation to performance during the pandemic.

CJ highlighted the following points in relation to national metrics:

- The single oversight framework is the criteria by which the regulators judge the performance of the Trust. The Trust has been in band 2 for most of the year which demonstrates a good performance in terms of quality and finance.
- Children in adult inpatient wards is monitored closely by the Trust, this is always taken as the “least worst” option.
- Inappropriate “Out of Area” bed days continues to be a challenge for the Trust and is closely monitored and managed.
- There has been a steady increase in compliments received which is positive in the current climate.
- Safer staffing fill rates are consistently over 100% aggregate.
- Patient safety incident numbers are in the acceptable range.
- Confidentiality breaches continue despite considerable work in this area.
- CAMHS referral to treatment waiting times continue to improve.

Charlotte Dyson (CD) introduced the following sections:

Quality

- Service users are tested for Covid-19 on admission and then tested every 3rd and 7th day. If positive, we have a good system to manage outbreaks.
- There has been good uptake for calls to the Occupational Health line.
- There are increasing numbers of staff being able to work from home.

Covid-19 response

- Staff lateral flow testing we have had a good level of response and monitoring.
- In care homes we have an enhanced support offer in Barnsley.
- PPE supply is in good order.

Patient Experience

- Friends and Family test – despite pressure, staff continue to give high quality level of service with 98% of respondents stating they would recommend community health services and 90% would recommend our mental health services.
- Experience with the trust rated as good or very good is 91%. This is reviewed in further depth in the Clinical Governance and Clinical Safety Committee (CGCS) by area, looking at themes and learning opportunities.
- Text messages for service user opinion have resumed very recently following the response to the pandemic.

Safer Staffing

- The Christmas period was very difficult, the staff fill rate is shown at 115%. This is due to the acuity in inpatient areas. It is important to get the right mix of staff. The average fill rate for registered nurses is just above 90%, an increase from last month.
- Community safer staffing is under review and a report will be going into CGCS soon.

Incident Reporting

- Total number of incidents is around 1000 per month. This shows incidents are still getting reported, which is positive, given the pressure on staff.
- Moderate and serious incidents which have increased. All serious incidents investigations are completed a via Root Cause Analysis process and a weekly risk scan takes place looking at themes.
- Incidents with moderate harm has seen an increase whereas serious incidents have remained at expected levels.

- Self harm has increased, and this is being discussed at Clinical Governance Clinical Safety Committee (CGCS) and is being reviewed.

Single oversight framework

- The Trust is at Level 2 which is graded as “targeted support”, but we are performing above target against most of our national indicators.

AGD highlighted the following:

Workforce metrics

- Non Covid-19 sickness is at lowest level for years, 1% lower than last year.
- Stress and anxiety is up in the staff group – enhanced support is available for staff.
- Staff illness and Covid-19 absence is at 8.37% but this is still lower than April 2020.
- Highest ever uptake of Flu vaccinations, we were joint first Trust in the country.
- The impact of flu has been negligible this year due to high uptake of the vaccine and handwashing and extra measures.
- Mandatory training statistics remain at a good level. Where face to face training is required, staff safety is a priority with Covid-19 measures in place.
- Staff turnover is lower than in previous years at just under 10%
- Corona virus and its disproportionate impact – we now have a BAME (Black, Asian, and Minority, Ethnic) wellbeing practitioner funded through the NHS charities programme.
- Vaccine take up from the BAME community and colleagues. Our aim is to vaccinate 100% of staff but there is lower uptake in certain groups.

CJ highlighted the following points:

Finance

- The Trust is currently performing with a surplus against the plan of a £2m deficit.
- Significant cash balances are present, but this is due to being paid one month in advance and will unwind by the end of the financial year.
- Capital expenditure is a little behind but optimistic about spending £5m.
- Mark Brooks (MB) and team continue to work hard with the better payment requirements.

Performance

- For the first half of the year the Trust was required to break even.
- The deficit of £2.1m was expected but is now reduced to as recruitment hasn't taken place and out of area beds has been less costly than anticipated.
- The Trust is spending more than last year due to pay uplifts and investments and costs of Covid-19.
- Cost pressure remain due to staffing pressures in inpatient services due to high levels of acuity and demand but there is confidence we can achieve the planned deficit.

TB confirmed following a query that reusable personal protective equipment (PPE) was not an option currently due to the risk of transmission. AM noted sustainability was on today's agenda.

CD confirmed the CAMHS friends and family test results were not as good as they previously have been but there were plans in place as to what could be done in this area. AM confirmed the CAMHS Friends and Family test figures could be added for the next meeting.

Action: Tim Breedon/Mark Brooks

Jackie Craven (JC) asked for an update in relation to CAMHS.

Carol Harris (CH) reported there have been significant improvements in waiting times in Barnsley and Wakefield. CAMHS pressure remains in treatment waits for Autistic Spectrum Condition and Attention Deficit Hyperactivity Disorder especially in Kirklees and Calderdale. Detailed CAMHS reports go into CGCS Committee.

LH reported she has been impressed by Trust response to protecting staff. As a member of the BAME community LH feels very safe at work. LH asked AGD if it has been established why staff are feeling anxious and stressed.

AGD reported stress and anxiety has gone up. When reviewed in detail it has reduced in qualified nursing staff but increased in estates and support workers and some of the administration staff. Prior to the pandemic, the pressure was in inpatient areas due to violence and aggression against staff. Inpatient areas have been a focus. The Trust has a good reactive level of support for staff, it is now looking to be more proactive.

AGD reported violence and aggression should not be tolerated but we need to deal with it more effectively. Staffing levels have been a pressure area and there are lots of factors to consider.

JL thanked CJ and CD for presenting the data and their detailed knowledge of the figures. JL asked if the Trust analysed the causes of Occupational Health (OHU) referrals for improvements. JL queried the out of area (OOA) bed metrics against CJ's comments.

AGD reported the reason for absence and OHU referrals were analysed.

MB reported three years ago all NHS organisations had to identify an approach to eliminate the use of OOA beds over three years. In our national metrics that is what we report against, a reducing target of use of beds each year. Internally we recognise that isn't possible and we have set a financial budget that recognises we perform better against our internal target.

SL asked to be sent a copy of the satisfaction survey forms. The danger with surveys is they don't necessarily ask the right questions patients may wish to answer.

Action: Laura Arnold

DDe reported work was ongoing with surveys with DP her team and the right questions will be asked going forward.

AM clarified that the Friends and Family test was only one source of service user and carer feedback and believed the questions are nationally mandated. There is more than one measure to get feedback.

AGD informed governors that the Trust aims to vaccinate 100% of its staff but Covid-19 vaccinations are not mandatory but an option for staff.

PS asked whether the vaccine prevents transmission. If this is the case shouldn't it be mandated.

AM said there has been significant debate about this but there is no significant evidence that the vaccine prevents transmission. At the moment it is there to stop the individual catching it. Mandating the vaccine would have to be a national decision.

SL believed patients have a reasonable expectation that staff have been vaccinated.

DDe reported even if staff have had the vaccine, current information states a person can still carry and spread the virus. DDe reported everyone has a part to play in protecting everyone else.

It was RESOLVED to RECEIVE the update in relation to Trust Performance.

MC/21/07e Focus On – Estates and Sustainability (agenda item 7.5)

AM introduced the item and Kevin Gelder (KG) highlighted the following points:

- The Trust operates from a large and varied estate.
- There are sixty sites, eighteen are Trust owned and forty-two are held under a lease or a licence.

- Other informal arrangements exist such as GP premises, other NHS trusts, schools and council buildings.
- The bulk of the cost of leased estate is for the inpatient wards in Dewsbury and Halifax and comprehensive LIFT (local investment finance trust) estate in Barnsley with several community health centres.
- KG summarised the previous strategy and reported the Trust had delivered against this strategy since 2012.
- Twenty properties across all areas have been disposed of in recent years bringing capital funds of £20m to the Trust.
- Twenty lease properties have been vacated, further rationalising the estate.
- Investment has been made to develop our community hubs in Halifax, Pontefract, Wakefield and Barnsley.
- We continue to improve and enhance existing estate.
- From an inpatient perspective the completion of the Unity Centre at Fieldhead marked the completion of the previous estate strategy.
- A new strategic plan for 2020 – 2030 was scheduled to go to Trust Board last year but this was delayed due to the pandemic.
- In its place, there is an interim whilst the Trust deals with the pandemic for the next ten to twelve months.
- The new ten year strategy will then be completed and will look at the estates impact of older people's services transformation, the potential replacement of the Dales (Halifax) and Priestley Units (Dewsbury), the Kirklees estate requirement, in particular a North Kirklees hub, and proposals for South Kirklees where the Folly Hall lease terminates in 2025.
- In addition, it will look at proposals for the Barnsley community estate
- The strategy will also consider the impact of changing work styles partly brought about by the pandemic.
- Last year we completed the sale of Ossett health centre and the Sycamores unit which brought a capital receipt of £900k. We also disposed of the last plot of non-operational land at Southmore Hospital which raised £115k.
- In 2021 Mt Vernon hospital is scheduled to complete in the next few weeks. The Keresforth centre is also for sale this year.
- The Barnsley estates accounts for thirty six of the sixty properties and is far more varied than other areas of the Trust.
- The Trust intends re-invest the proceeds of both sales in Barnsley. The receipts are likely to be received in 2021 and 2022 The Trust continues to invest in the Barnsley estate and IT infrastructure.
- Investment has been focussed on service user experience and building maintenance.
- Currently improvements are being made at the podiatry unit on the Kendray estate and plans are being finalised for improvements to the older people's inpatient ward, also at Kendray.
- Plans are also in place for improvements at Mapplewell health centre.
- The Trust has committed funds for solar panels and electric vehicle charging points at Fieldhead and Kendray.
- The capital programme needs to align with the capital allocations within the integrated care system. It is anticipated this will bring access to strategic capital from central sources.
- The operation of a large estate has an impact on the environment. The Trust has a duty to consider how it addresses the climate emergency through the use and running of its estate.

AM clarified some queries from KG's presentation in the MS Teams chat, and KG clarified that valuations were carried out by external chartered surveyors.

LH queried why it has taken so long to sell the Mount Vernon site and reported staff who had vacated both Mt Vernon and Keresforth felt the moving process had been chaotic. LH asked for it to be noted that it had caused stress for staff and service users are losing services in certain areas.

KG clarified the property was marketed subject to planning and it is the planning process that has created the delay. KG reported that a lot of planning goes into moving services but noted LH's comments.

AM explained that issues around estates came into the board directly.

KG clarified in relation to the Dales and the Priestley unit, they are not purpose built for the services they provide; therefore, they are under review to ensure the best possible service provision. Any emerging options will be subject to consultation with local communities and the host NHS Trusts.

TS asked about the disposal of surplus estate in Barnsley in 2021.

AGD reported whatever is received through capital investment is reinvested in estate and IT infrastructure. AGD stated we have invested in excess of what has been received in capital receipts in recent years. Having the right estate is essential to providing good services. The money from Mt Vernon and Keresforth will be reinvested.

TS felt aspects of the paper were misleading.

AM suggested given the number of queries it may be prudent to hold a separate meeting to cover questions on estates and sustainability.

Action: Angela Monaghan

Adam Newman (AN) from WRM consultants gave a power point presentation on sustainability which had been shared prior to the meeting. AN covered WRM as an organisation and explained sustainability in the context of the NHS and why it is important and relevant.

SL reported some carbon reducing techniques for buildings can affect the health of the occupants and asked if this would be considered.

It was RESOLVED to RECEIVE the update in relation to Estates and Sustainability

MC/21/07f Members' Council Biennial Evaluation Update (agenda item 7.6)

AM summarised the process that was taking place in relation to the Members Council Biennial Evaluation. The external auditor was to present the findings to governors and there would be the opportunity for governors to reflect on the findings of the survey with actions then being considered by the Members Council Coordination Group. AL agreed to communicate the process to governors.

Action: Andy Lister

MC/21/08 Trust Board Appointments (agenda item 8)

MC/21/08a Appointment of Non-Executive Director (agenda item 8.1)

AM asked for all directors to leave the meeting, except AGD and CD who were supporting JL in the business items. AM confirmed the meeting was private before handing the chair to JL.

JL confirmed the recruitment of a new Non-Executive director is a tried and tested process. JL briefly summarised the process and the dates over which the process had taken place. JL summarised Natalie Mc Millan's background and feedback from her recruitment process.

It was resolved to APPROVE the appointment of Natalie McMillan as a Non-Executive Director for a period of three years from 1 May 2021.

MC/21/08b Chairs Appraisal 2021 – process (agenda item 8.2)

CD reported:

- The process will follow as it has done on previous occasions and starts with governor views but may differ slightly from previous years due to Covid-19.
- CJ will lead the process and will conduct interviews with Lead Governor, Chief Executive, all Executive directors.
- Questionnaires will be sent to stakeholders
- Process will start in May 2021 and is in line with NHSE/I process.
- Once feedback received CJ will discuss with AM and then bring the outcome back to the Members Council.
- The corporate governance team is looking at ways to conduct the interactive session.

JL noted this was CD's last Members Council meeting and thanked her for support in the time she had been here.

It was RESOLVED to agree the process for the Chairs appraisal.

AM re-joined the meeting.

MC/21/09 Any other business (agenda item 9)

No other business items were raised.

MC/21/10 Closing remarks, work programme, and future meeting dates (agenda item 10)

AM reported the next meeting is the 11th May 2021.

The work programme will go to the Members Council Coordination Group.

BC reported he was disappointed meetings cannot take place on different days of the week.

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

LH thanked everyone for their support during her time as a governor

JC thanked CD for all her help during her time as lead governor and everyone else who had supported her during this time.

JL hoped the meeting isn't deemed to be a failure as all items hadn't been fully covered. JL reported it has been a successful meeting due to governors showing a great deal of interest in items being presented.

AM gave governors reassurance around the new estates strategy that it didn't come into effect for another two years and no big decisions will be taken without consultation. We will be finalising the sustainability strategy in March 2021.

TWr asked about continuing the estates discussion through a closed WhatsApp group. AM asked if JL would like to pick this up with governors.

Action: John Laville

AM said thank you to all governors who were leaving, and to all those standing for election.

Signed: 

Date: 11th May 2021