

**Minutes of the Members' Council meeting held at 10.00am on 11 May 2021  
Meeting Held Virtually by Microsoft Teams**

<b>Present:</b>	Angela Monaghan (AM)	Chair
	Bill Barkworth (BB)	Public – Barnsley (Deputy Lead Governor)
	Bob Clayden (BC)	Public – Wakefield
	Jackie Craven (JC)	Public – Wakefield
	Claire Den Burger-Green	Public - Kirklees
	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
	John Laville (JL)	Public – Kirklees (Lead Governor)
	Cllr Steven Leigh (SL)	Appointed – Calderdale Council
	Cllr Ros Lund (RL)	Appointed – Wakefield Council
	Andrea McCourt (AMc)	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Cllr Pauline McCarthy (PMc)	Appointed – Barnsley Council
	Helen Morgan	Staff – Allied Health Professionals
	Imran Mushtaq	Public - Kirklees
	Debbie Newton (DN)	Appointed – Mid Yorkshire Hospitals NHS Trust
	Cllr Mussarat Pervaiz (MP)	Appointed – Kirklees Council
	Beverley Powell	Public – Wakefield
	Tom Sheard (TS)	Public – Barnsley
	Phil Shire (PS)	Public – Calderdale
	Jeremy Smith (JS)	Public – Kirklees
	Keith Stuart-Clarke (KSC)	Public – Barnsley
	(left at 11 am)	
	Debs Teale (DT)	Staff – Nursing support
	Dr Abdul Nusair	Staff – Medicine and Pharmacy
	Nik Vlissides	Staff – Psychological Therapies
	Lisa Ward	Public - Kirklees
	Tony Wilkinson (TW)	Public – Calderdale
	Tony Wright (TWr)	Appointed – Staff Side organisations
<b>In attendance:</b>	Prof Marios Adamou (MA)	Consultant Psychiatrist (former staff governor)
	Adrian Deakin (AD)	General Manager, Forensic services (former staff governor)
	Rob Webster (RW)	Chief Executive
	Tim Breedon (TB)	Director of Nursing & Quality
	Mark Brooks (MB)	Director of Finance & Resources
	Alan Davis (AGD)	Director of Human Resources, Organisational Development & Estates
	Carol Harris (CH)	Director of Operations
	Chris Jones (CJ)	Deputy Chair / Senior Independent Director
	Mike Ford (MF)	Non-Executive Director
	Natalie McMillan	Non-Executive Director
	Kate Quail (KQ)	Non-Executive Director
	Sean Rayner	Director of Provider Development
	Salma Yasmeen	Director of Strategy
	Sam Young (SYo)	Non-Executive Director
	Csilla Fabian	Corporate Governance Manager
	Elaine Lovell	Corporate Governance Administrator
	Andy Lister (AL)	Head of Corporate Governance (Company Secretary) (author)
<b>Apologies:</b>	<u>Members' Council</u>	
	Dylan Degman (DDe)	Public – Wakefield
	Trevor Lake	Appointed – Barnsley Hospital NHS Foundation Trust
	Barry Tolchard (BT)	Appointed – University of Huddersfield

Attendees

Erfana Mahmood  
Dr Subha Thiyagesh

Non- Executive Director  
Medical Director

**MC/21/10 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.

AM welcomed new governors Helen Morgan, Dr Abdul Nusair, Nik Vlissides, Claire Den Burger Green, Imran Mushtaq, Lisa Ward and Beverley Powell. AM also welcomed new Non-Executive Director Nat McMillan who had started with the Trust on 1 May 2021.

AM gave thanks to all those governors who had recently finished terms of office:

- Paul Batty – Staff – Social Care on Integrated Teams
- Lisa Hogarth – Staff – Allied Health Professionals
- Kate Amaral – Public - Wakefield
- Adrian Deakin – Staff – Nursing
- Prof Marios Adamou – Staff – Medicine and Pharmacy

Adrian Deakin and Marios Adamou had both served three full terms of office and were both present at the meeting. AM thanked them for their exceptional contributions over nine years and presented them with certificates of appreciation. She stated all governors will receive a certificate thanking them for all their work.

**Action: Andy Lister**

**MC/21/11 Declarations of Interests (agenda item 2)**

BARKWORTH, Bill Publicly elected - Barnsley	Director, Barkworth Associates Limited. Member – HealthWatch Barnsley
CLAYDEN, Bob Publicly elected - Wakefield	Chair, Portobello Community Craft and Camera Group. Occasionally contracted for sessions as freelance artist, this may be employed by groups funded or partially funded by SWYT Member of West Yorkshire & Harrogate Cancer Alliance Community Panel.
CRAVEN, Jackie Publicly elected - Wakefield	<i>Board member, Young Lives Consortium, Wakefield. Member, Alzheimer's Society. Member, Versus Arthritis. Member, Dementia UK. Volunteer, HealthWatch, Wakefield. Volunteer Ambassador, Dementia UK. Parish Councillor, Crigglestone Parish Council. Trustee, Crigglestone Village Institute. Trustee, Hall Green Community Centre. Trustee, 45 Durkar Scouts. Trustee, Worrills Almshouses.</i>

<i>DEGMAN, Dylan</i> <i>Publicly elected - Wakefield</i>	<i>No interests declared.</i>
DEN BURGER-GREEN, Claire Publicly elected - Kirklees	Expert by Experience and part of the Inspectorate team employed by Choice Support which are contracted to the Care Quality Commission (CQC) to carry out inspections. This is carried out in a variety of settings including NHS services. Awareness Trainer (Volunteer), National Autistic Society Mystery shopper/ accessible venue consultant (volunteer), Attitude is Everything Active member of the support group, Ehlers Danlos UK Active member of the group, Kirklees Mental Health Carers Forum (KMHCF) –
DOOLER, Daz Publicly elected - Wakefield	Chair, S.M.a.S.H Society Community Group in Wakefield and the 5 Towns. Volunteer with SWYT Live Well Wakefield Advisor, employed by Nova Wakefield Seconded position through Nova, Live Well Wakefield and Barnsley Team, South West Yorkshire Partnership NHS Foundation Trust.
IRVING, Carol Publicly elected – Kirklees	Volunteer Ambassador, Dementia UK.
JACKSON, Tony Staff elected – Non-clinical support (services)	No interests declared.
JHUGROO, Adam Publicly elected - Calderdale	Bank registered at Calderdale and Huddersfield NHS Foundation Trust Medical care representative for Diabetes in the Specialist Driven Primary Care business unit for Napp Pharmaceuticals (full time basis) and cover South Yorkshire, which includes Barnsley. Daughter – works on the staff bank at SWYT
<i>LAKE, Trevor</i> <i>Appointed - Barnsley Hospital NHS Foundation Trust</i>	<i>Chair, Barnsley Hospital NHS Foundation Trust.</i> <i>Chair, Joint Independent Audit and Ethic Committee, West Yorkshire Police and Crime Commissioners and West Yorkshire Police Force.</i> <i>Director, Six Degrees Consultancy (non NHS work).</i> <i>Chair, Trustees of Barnsley Hospital Charity.</i>
<i>LAVILLE, John</i> <i>Publicly elected - Kirklees</i>	<i>Director and Shareholder, EMS (Hartshead) Ltd (dormant company).</i> <i>Member/Carer Representative, Kirklees Mental Health Partnership Board.</i> <i>Trustee and Chair, Popplewell Charity.</i> <i>Patient Representative North Kirklees Primary Care Commissioning Committee</i>
<i>LEIGH, Steven</i> <i>Appointed – Calderdale MBC</i>	<i>No interests declared.</i>

<i>LUND, Ros</i> <i>Appointed - Wakefield MDC</i>	<i>Wakefield MDC: Deputy Cabinet Member, Adults and Health</i> <i>Member of The Labour Party</i>
<i>McCARTHY, Pauline</i> <i>Appointed – Barnsley MBC</i>	<i>Director of Credit Union – Acres Food and Allied Workers Union</i>
<i>McCOURT, Andrea</i> <i>Appointed – Calderdale and Huddersfield NHS Foundation Trust</i>	<i>Company Secretary, Calderdale and Huddersfield NHS Foundation Trust</i>
<i>MORGAN, Helen</i> <i>Staff elected – Allied Health Professionals</i>	No interests declared.
<i>MUSHTAQ, Imran</i> <i>Publicly elected - Kirkles</i>	
<i>NEWTON, Debbie</i> <i>Appointed Governor for Mid Yorkshire Hospitals NHS Trust</i>	<i>Director of Community Services, Mid Yorkshire Hospitals NHS Trust.</i>
<i>NUSAIR, Abdul</i> <i>Staff elected – Medicine and Pharmacy</i>	
<i>PERVAIZ, Mussarat</i> <i>Appointed – Kirklees MC</i>	No interests declared.
<i>POWELL, Beverley</i> <i>Publicly elected – Wakefield</i>	Senior Advisor to National Direct Jacqueline Davies (full time), NHSE/I Provide informal Coaching/Mentoring to some SWYPT staff members ( non-board or SLT level)
<i>SHEARD, Tom</i> <i>Publicly elected – Barnsley</i>	<i>Director and Company Secretary of Barnsley TUC Training Ltd.</i> <i>Member of ‘Monk Bretton Cares’ a voluntary group who organise and provide a Dementia Café in Monk Bretton once per week. This is in conjunction with BIADS Barnsley Dementia Support.</i> <i>Member and Chair of Patient Group at White Rose Medical Practice.</i>
<i>SHIRE, Phil</i> <i>Publicly elected - Calderdale</i>	<i>Director, Greenroyd Bowling Club Limited.</i> <i>Trustee and Director on the board of Impact Education Multi-Academy Trust.</i>
<i>SMITH, Jeremy</i> <i>Publicly elected - Kirklees</i>	<i>Director, Predictlaw Ltd.</i>
<i>STUART-CLARKE, Keith</i> <i>Publicly elected - Barnsley</i>	<i>Volunteer with West Yorkshire and Harrogate NHS trust CCG, in the post with their reduction of suicide project which is based at White rose house Wakefield</i>
<i>TEALE, Debs</i> <i>Staff elected - Nursing support</i>	Trustee in National Centre for Creative Health
<i>TOLCHARD, Professor Barry</i> <i>Appointed - University of Huddersfield</i>	No interests declared.
<i>VLISSIDES, Nik</i> <i>Staff elected – Psychological therapies</i>	No interests declared.
<i>WARD, Lisa</i> <i>Publicly elected - Kirklees</i>	Volunteer Facilitator, Richmond Fellowship Volunteer, Recovery College

WILKINSON, Tony Publicly elected - Calderdale	Trustee Board member Healthwatch Kirklees, covering Kirklees and Calderdale.
<i>WRIGHT, Tony Staff elected – staff side organisations</i>	<i>Non-executive director (Trustee) with Barnsley Civic Enterprises.</i>

Where no return has been received by the Trust, the current entry on the Register has been included in italics.

Past governors (who left in 2020/21)

<b>Name</b>	<b>Declaration</b>
ADAMO, Marios Staff elected - Medicine and Pharmacy	Director, Marios Adamou Ltd. Board member, UKAAN. Secondary Care Doctor member, NHS Northumberland Clinical Commissioning Group (CCG).
AMARAL, Kate Publicly elected - Wakefield	No interests declared.
ARMER, Bill Appointed - Kirklees Council	No interests declared.
BATTY, Paul Staff elected - Social care staff working in integrated teams	No interests declared.
BECKLEY, Evelyn Appointed - Staff side organisations	No interests declared.
DEAKIN, Adrian Staff elected - Nursing	No interests declared.
HARRISON, Lin Staff elected - Psychological therapies	Fulltime secondment as Suicide Prevention Project Manager for West Yorkshire and Harrogate Health and Care Partnership (WYHHCP). Member of the Labour party. Volunteer Co-ordinator for sub area of Crookes Mutual Aid Group (COVID-19 Community Support) I commission services for the ICS as Suicide Prevention Project Manager, for example the West Yorkshire and Harrogate Suicide Bereavement Service fulfilled by Leeds Mind. My wife is a Commissioning Manager for Sheffield CCG.
HOGARTH, Lisa Staff elected - Allied Healthcare Professionals	Member governor, Salendine Nook High School Huddersfield. Member of the Labour Party.
MASON, Ruth Appointed - Calderdale and Huddersfield NHS Foundation Trust	Member, Board of Directors, 'Mind the Gap' theatre company, Bradford, which employs actors with a learning disability.
PILLAI, Chris Appointed - Calderdale MBC	Independent Hospital Manager.
SUMNER, Nicola Appointed - Barnsley MBC	No interests declared.

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

**MC/21/12 Minutes of the previous meeting and the joint Trust Board and Members' Council meetings held on 29 January 2021 (agenda item 3)**

It was **RESOLVED** to **APPROVE** the Minutes of the Members' Council meeting held on 29 January 2021 as a true and accurate record.

**MC/21/13 Matters arising from the previous meeting held on 29 January 2021 and action log (agenda item 4)**

MC/21/04 – Discharge letter action to be closed for MC and become an item for Members' Council Quality Group for monitoring.

**Action: Members' Council Quality Group**

MC/21/04 – AM has had a follow up conversation with Sean Rayner (SR). Bob Clayden (BC) reported the position has moved on and the action can now be closed.

MC/21/07d – TB reported CAMHS data would be included in the performance presentation later today. Action closed.

MC/21/10 – Discussed the principle of having a Governors-only WhatsApp Group in the meeting prior to this one. The outcome is that the majority think it is a good idea to try with no obligation to join. JL to progress outside of the meeting. Action closed.

MC/20/25 – AL updated on current position regarding the recording of meetings and will update later in the year.

MC/20/26 – The setting up of the Intranet for Governors has not been able to progress due to pressure of the Covid pandemic, therefore it remains on the action log.

**It was RESOLVED to NOTE the updates to the action log.**

**MC/21/14 Chair's report – to include feedback from the Trust board meeting held on 27 April 2021 (agenda item 5)**

AM's report outlined activity of Chair and NEDs since last meeting and AM noted the following key items:

- The Trust Board Business and Risk meeting took place on 27 April 2021.
- Changes in the Corporate Governance team: Aimee Willett has left on a secondment to Wakefield CCG. Csilla Fabian has joined and introduced herself. Laura Arnold currently away from work – any governor queries to go to Andy Lister.

Tony Wright (TWr) queried if there was any Green Plan update?

AM reported in the March meeting the Board approved the Green Plan. Sustainability work continues and more engagement will take place on the development of a wider sustainability strategy, which incorporates the full engagement of our staff and service users.

We are also doing work with the West Yorkshire and Harrogate Integrated Care System on climate change, which includes more than carbon reduction.

Tony Wilkinson (TW) asked for an update on Rob's dual role.

AM gave background on Rob Webster's (RW) dual role and reported that Integrated Care Systems are going through significant change. Chief Executive (CEO) appointments to integrated care systems are subject to legislation and the appointment process is expected to start around July.

In the meantime, RW continues in the dual role of Lead executive for the ICS and Chief Executive of SWYPFT. The CEO appointment process will take place in all 42 ICSs across the country simultaneously, with the new statutory roles starting from April 2022.

In the meantime, the Board discusses and reviews Rob's dual role every meeting to ensure it continues to work in the way it should. The Board is satisfied that it is working well.

**It was RESOLVED to NOTE the Chair's report.**

### **MC/21/15 Chief Executive's comments on the operating context (agenda item 6)**

RW reported:

- **Covid-19:**
  - Four tests at each stage of easing of lockdown dependant on success of vaccine, including breaking the link between infection, hospitalisation and death.
  - The Prime Minister is lifting restrictions as of next Monday.
  - Main concern in Europe is the "Kent" variant.
  - Variants of concern in the UK – Brazil, South Africa and India. India now a variant of concern.
  - Considering if variants can negotiate the vaccine/immune system, which may cause problems with the Government's strategy.
  - The current situation in India is difficult for our communities and our staff. Support is in place for staff who may be affected and RW's personal thoughts are with those affected.
  - West Yorkshire and South Yorkshire currently have infection rates around 50/100,000 on average. The national average is 0.1% but in West Yorkshire and South Yorkshire. It is 0.2%
  - Over 60's prevalence of Covid is lower due to double vaccination effect.
  - Lower prevalence is reflected in lower staff sickness. RW showed a slide demonstrating staff sickness over the last 12 months.
  - Normal staff sickness is lower than average and Covid-19 sickness is about 0.5% therefore there are more staff, though there is more demand. With many restrictions in place, delivery of care continues to be impacted.
  - Lateral flow testing continues to take place with front line staff, and effective use of PPE and vaccinations campaign.
  - RW showed slide of staff vaccinations: 87.4% vaccinated once, 76.2% vaccinated twice and 12.6% no vaccination. First and second doses continue.
  - Ethnicity of staff vaccinations: white nearly 90%, Indian 86%, Black Caribbean 58% and Black African 71%.
  - The vaccination campaign will be a true success when everyone who wants a vaccination has had one.
- Performance over 20/21 is good. We are in a reasonable place with a lot to do going into 21/22.
- Strategic priorities going forward led by Carol Harris (CH) and Salma Yasmeen (SY) and linked to the digital agenda. Covid-19 has exacerbated inequalities.
- Income impact of Covid: By age and by ethnicity (MORI polling): People over 65 are more financially stable. 23% state they are better off and 19% say they are worse off. 45% of working age (ages 35-44) say they are worse off because of the pandemic. Ethnic minorities: 46% say they are worse off and only 33% of white people say they are worse off.
- We will continue to look at these factors (ethnicity, deprivation and age) and not just by looking at averages.

AM noted comments in the chat on MS Teams.

TB reported he believed the India variant included Pakistan.

RW reported some staff are not having the vaccine due to personal fears and concerns. The Trust approach is to raise confidence in the vaccine. The age and gender profile shows fewer young women having the vaccine, which may be due to fears about fertility. Some Black and Asian staff have different views dependant on their different heritage.

We have been working with BAME network through the West Yorkshire and Harrogate Health Care Partnership, (renamed the Race and Equality Network) and staff are talking about issues and concerns. Some staff have subsequently changed their mind and had the vaccine.

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

### **MC/21/16 Members' Council Business Items (agenda item 7)**

#### MC/21/16a Re-appointment of Non-Executive Director (agenda item 7.1)

All directors left the meeting with the exception of AGD. John Laville (JL) introduced the item and asked for the paper to be taken as read:

- JL reported there is a tried and tested re-appointment process. Nominations' Committee have recommended to the Members' Council to approve Erfana Mahmood (EM) as a Non-Executive Director for a second three-year term from 03/08/21 – 02/08/24.
- JL explained the Members' Council can reappoint a NED as long as the chair guarantees that the NED has performed effectively and remains committed to the role. AM has assured the Members' Council that EM is doing a great job.
- AM confirmed EM remains committed and effective.

**It was RESOLVED to SUPPORT the recommendation from the Nominations' Committee to reappoint Erfana Mahmood as Non-Executive Director for a second three-year term from 3 August 2021 to 2 August 2024.**

All directors returned to the meeting.

#### MC/21/16b Governor Engagement Feedback (agenda item 7.2)

JL gave a slide presentation.

- Feedback process we have been developing over the past few months
- Developing governor feedback is part of the Equality, Involvement, Communication and Membership strategy action plan.
- Governors are here to support members and signpost to where they can get a good answer.
- To reassure any group or individual that their input will be fed back to the Trust and capture that information clearly.
- If people need independent support, we can refer them to Healthwatch.
- It is planned to have a 'You Said, We Did' section on the Trust website.
- The process for feeding in an individual concern is via Customer Services, which can then be added to Datix to capture the type of information from different areas across the Trust. This gives the opportunity to review the process and change or modify the process if required.
- If an individual has concerns and is not comfortable with the Trust's response, they can be directed to Healthwatch for advocacy.
- Data is captured: new group, captured as per the data form. If information is limited, this can be emailed in. All emails/information/forms need to be sent to [InvolvingPeople@swyt.nhs.uk](mailto:InvolvingPeople@swyt.nhs.uk).
- Reporting: The Communications Team are to produce a quarterly Insight report, into which all feedback will go. Quarterly: 1 June, Sept. etc. Reports will be shared with Governors. The report will go to the Equality, Involvement and Inclusion Sub-Committee, onto the



executive management team and the Equality, Inclusion and Involvement Committee will receive a report on the final recommendations, ending in the 'You Said, We Did'.

- A new leaflet for Improving Access to Psychological Therapies (IAPT) has been designed.
- Platform 1 – a men's mental health support group in Huddersfield have had a great increase in referrals and report that other organisations are contacting them, though not giving support.
- A Halifax group, Calderdale Carers' Project, have increased their use of digital platforms to keep their group going.

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*11.00 Keith Stuart-Clarke left the meeting*

RW noted "The Choose Well guide", produced by the Trust, could be used well for this engagement. AM suggested to include this in the induction pack.

**Action: Andy Lister**

TWR introduced the Staff side:

Staff side acts as a critical friend in the Trust, being a friend to our staff and the Trust. Staff side also serve the needs of service users, families and carers. Members take part in strategic high-level meetings. There are also leads for key areas such as equality, health and safety and sustainability.

SWYPFT is well known for partnership working with Staff side. The fact Staff side are present at induction meetings is a very positive thing.

The meetings and processes Staff side are involved in on behalf of our members and wider staff groups include extended EMT, Employment Policy Group, Organisational Change and more.

Regionally Staff side attend partnership meetings for South Yorkshire and West Yorkshire ICS organisations.

The Staff side role has been developed further in the response to Covid-19 – working with Alan Davis (AGD) in weekly meetings, giving a chance to keep up with things as policy changes within hours. We are engaged in silver command. Staff side play their part in Recovery and Restoration, including in risk assessments.

With regard to the resolution process, previously disciplinary processes, Staff side are looking at a different way of doing things, as a learning process.

Bullying and harassment processes are under review in order to support members, not just reviewing bullying and harassment, but preventing it.

The partnership agreement process is being refreshed.

Staff side are passionate about being involved with the work around sustainability and feel this is changing culture.

There are 8 recognised unions in the Trust. Consideration has been given to ensure there is at least one union for every staff group.

AM explained Staff side is an appointed governor role.

**It was RESOLVED to RECEIVE the governor engagement feedback.**

MC/21/16c Governor Training and Development (agenda item 7.3)

Bill Barkworth (BB) introduced the item:

BB reported recently reviewed objectives are supporting governors to be more effective in their roles. More structure and clarity are needed around a training and development plan.

Suggested program of development is a tiered approach:

Level 1 - first year of a governor's term of office – areas governors would benefit from by way of training. E.g. provide specific information regarding SWYPFT. Engagement with the public. Effective questioning and challenging. Quality Monitoring visits around the Trust.

Level 2 - second year – More specific/specialist e.g. Finance, Performance and Accountability.

Level 3 - third year – Training good to have though not as essential as during first year.

Sessions are complementary to the Chair's induction and not mandatory. There is a need for a mix of training both from Governwell (governor training run by NHS Providers), and/or other external trainers and internal trainers.

BC queried the cost implications of training and whether the finances would restrict attendance.

RW reported cost is not a barrier this year. It is hoped to prioritise this work in the next six months.

RW thanked BB for his comprehensive work and encourages everyone to take up training opportunities if they can.

**It was RESOLVED to RECEIVE the update on the training and ENDORSE the development plan.**

MC/21/16d Assurance from Members' Council Groups and Nominations' Committee (agenda item 7.4):

AM explained the breakdown of the different groups that sit underneath the Members' Council.

BC asked about the Members' Council Quality Group. Phil Shire (PS) is worried about the amount of time to look at IPR report and asked if this has been resolved?

PS reported people are reading it well and there is a good level of engagement. The work programme of MCQG has been reviewed so that we can focus on items of concern. Governors are urged to attend meetings if they wish as they will find it useful.

Action to notify new governors about sub meetings of the Members' Council.

**Action: Laura Arnold**

**The Members Council is asked to RECEIVE the assurance and minutes from the Members' Council Co-ordination Group, Members' Council Quality Group and Nominations' Committee.**

MC/21/16di Members' Council Coordination Group annual report 2020/21 including update to the Terms of Reference (agenda item 7.4.1):

**It was RESOLVED to RECEIVE the annual report for 2020/21 and APPROVE the updated Terms of Reference for the Members' Council Co-ordination Group**

MC/21/16dii Members' Council Quality Group annual report 2020/21 including update to the Terms of Reference (agenda item 7.4.2):

**It was RESOLVED to RECEIVE the annual report for 2020/21 and APPROVE the updated Terms of Reference for the Members' Council Quality Group**

MC/21/16diii Nominations' Committee annual report 2020/21 including update to the Terms of Reference (agenda item 7.4.3):

**It was RESOLVED to RECEIVE the annual report for 2020/21 and APPROVE the updated Terms of Reference for the Nominations' Committee.**

MC/21/16e Members Council Elections Outcome (agenda item 7.5)

AL introduced the item and updated governors on the outcome of the elections earlier this year:

Vacancies before the election and numbers of nominations for each constituency:

- Public Kirklees: 3 seats, 4 nominations
- Public Wakefield: 2 seats, 3 nominations
- Public Rest of Yorkshire and the Humber: 1 seat, 0 nominations
- Staff Allied Health Professionals: 1 seat, 1 nomination
- Staff Medicine and Pharmacy: 1 seat, 1 nomination
- Staff Nursing: 1 seat, 0 nominations
- Staff Psychological Therapies: 1 seat, 1 nomination
- Staff Social Care and Integrated Teams: 1 seat, 0 nomination

Following the elections, there are still three vacancies: 1 – Rest of Yorkshire and the Humber, 1 – Staff Nursing and 1 – Staff Social Care and Integrated Teams.

BC noted there had been more postal votes than digital and should we involve our members more by post. AL agreed to review this proposition during the next round of elections. RW pointed out the work taking place around digital inclusion that Dawn Pearson (DP) was involved in and AL should link with DP around this.

**Action: Andy Lister**

**It was RESOLVED to RECEIVE the update.**

MC/21/16f Review of Audit Committee terms of reference (agenda item 7.6)

MF, chair of the audit committee, introduced the brief changes and noted that Deloitte, our external auditors, have approved the terms of reference.

**It was RESOLVED to NOTE the updates to the Terms of Reference for the Audit Committee.**

MC/21/16g Updated Scheme of Delegation (agenda item 7.7)

AM noted BC's comments in relation to the Scheme of Delegation and asked MB to introduce the item.

MB explained the purpose of the scheme of delegation and where changes were in relation to partnership working and provider collaboratives.

BC queried whether the aspects of standing orders were things that had to be undertaken.

MB reported the committees are expected to carry out delegated tasks each year. MB described the committee effectiveness process.

BC agreed to contact AM, AL and MB in relation to a potential issue around standing orders.

**ACTION: Bob Clayden**

**It was RESOLVED to APPROVE the updates to the Scheme of Delegation as set out in the paper.**

## MC/21/16h Update Members' Council Declaration of Interests Policy (agenda item 7.8)

MB reported the policy is based on an existing policy used in previous years, and there were minor changes only e.g. job titles and cosmetic changes.

**It was RESOLVED to APPROVE the revised Members' Council Declaration of Interests Policy.**

## **MC/21/17 Trust Performance (agenda item 8)**

### MC/21/17a Trust Performance Update Q4 (agenda item 8.1)

Mike Ford introduced the item:

#### Summary of performance metrics for Quarter 4

- Impressive set of metrics given the context of the year the Trust has been through. The Trust continues to meet the majority of its performance metrics and makes improvements in certain areas.
- Single Oversight Framework is Care Quality Commission (CQC) linked. The rating of 2 means the Trust only needs targeted support to help it meet the CQC's ratings, which is positive.
- Children and Young People in adult patient wards has a low threshold (zero) to try to avoid the situation. There were three young people who had spent a total of 6 days in an adult ward during Q4.
- Use of out of area beds has declined and is at its lowest in Quarter 4.
- Good to see we still receive compliments.
- Confidentiality breaches - no cases resulted in ICO referral, which is positive.
- MB confirmed who sets the threshold figures. Some are regional, some national and some internal. Targets could be identified by colour coding.

**Action: Mark Brooks**

- IAPT at 50% is an agreed national target.
- Good performance by Trust in finance.
- Non Covid-19 sickness is at a historical low and staff turnover at an acceptable level.

#### Covid-19 Response Metrics

- Staff sickness decreasing.
- Increase in staff testing.
- Use of MS Teams for video consultations.
- Positive outcome on staff vaccinations, while monitoring discrepancies around ethnicity to ensure no one left out.
- In control of PPE demand and supply.
- Command structure continues to operate.

#### Patient experience

- Positive responses and good levels of response being maintained.

#### Safer staffing

- TB explained the context of the Safecare pilot. This is a review of planned staffing establishment figures, reporting and recording staff needs for each day. It is a new way of reporting and recording our staffing against actual need. The results will give a better understanding of what we think we need and how well we are doing in filling those requests.
- Tony Jackson (TJ) asked for a breakdown of registered staff - what percentage is agency? TB will provide to TJ outside of the meeting direct.

**Action: Tim Breedon**

### Incident reporting

- TB updated governors on how incidents are recorded on the Datix system. Large incidents are investigated through Root Cause Analysis to gain any learning if appropriate.
- Trends are reviewed over the year and we are within acceptable parameters, but we have increased self-harm levels and we are monitoring these, as we are also doing with our apparent suicides.
- Although a quarterly report, we also produce an annual report that looks at trends over the past two or three years. An annual report is going to board in the next few months.
- TB confirmed all protected characteristics are looked at in the incident review.

### NHS Improvement

- Targets are set by NHS Improvement.
- The six-week wait target for diagnostic procedures has not been met, having been affected by Covid-19. Significant progress has been made to get this back on target.
- MB added this relates to one service only. The requirement to achieve that threshold has been paused during the pandemic. It is still measured as an important metric.

### Workforce

- Non-Covid sickness is at an historically low level.
- Stress and anxiety is the largest single reason for non-Covid-19 absence.
- Strong performance on the vaccine.
- Compliance with mandatory training has been good given the year.
- Staff turnover rates are 10% lower than last year with a lot of support being put in place.

AGD reported that peer support workers will be in the detail of the workforce plan included in the workforce strategy.

### Making SWYPFT a great place to work

AGD highlighted key points from the slides and gave context to the following areas of which staff have identified as being the essentials for making SWYPFT a great place to work:

- Feeling Safe
- Supportive Teams
- Keeping Fit and Well
- Developing Potential
- My Voice Counts

These have all been developed into pledges and are being implemented.

The strategy is being developed digitally so that staff can see the live document, which will be continually updated.

JL reported the workforce strategy is first rate but noted bullying and harassment figures from the Integrated Performance Report are 1 in January, 1 in February and 0 in March. However, the BAME network report 40% of staff being bullied and harassed.

AGD reported the figures may need splitting for accuracy due to some of the figures relating to bullying and harassment by service users. There is a commitment and lots of work to do over the next three years to improve and learn what needs doing to support staff and prevent bullying and harassment.

AGD reported Freedom to Speak Up Guardians have a network with an appointed lead. There are representatives from the all the staff equality networks. Civility and respect guardians are currently being appointed and the equality networks are involved in these appointments to ensure diversity. Staff side are also involved. We are looking to create a network with many channels where people are comfortable to report issues.

AM asked if governors can be informed as to who the Freedom to Speak Up Guardians are. The lead guardian is Estelle Myers and there are a number of others.

**Action: Csilla Fabian**

### Financial Performance

- Last year was an unusual year for NHS finance as it did not have the normal contracts in place.
- The Government reacted to Covid-19 and in the first six months of the year we were enabled to break even by being given block income.
- In the second half of the year we were given fixed income and targets to meet.
- We were given the targets late August early September, when Covid-19 was at a low level.
- Since then, Covid-19 has been more prevalent, and we could not spend as much money as we thought we could.
- We were given more national support towards the end of year, with funding attached.
- Ultimately, we received more money than we spent, which is not typical of normal years.
- Lockdown had a significant impact on capital spend due to the restrictions of companies attending site.
- We now have a similar financial arrangement for the first six months of 21/22 and expect to return to normality in terms of individual contracts with commissioners and different targets to meet within the second part of this year.

MB reported the Trust did not have to give any surplus back. This will be used for capital expenditure.

**It was RESOLVED to RECEIVE the update on Trust Performance.**

### MC/21/17b Care Quality Commission (CQC) action plan update and update on our inspection annual report unannounced/planned visits (agenda item 8.2)

TB reported:

- TB gave context the CQC and what their role is.
- TB reported the table displayed shows the summary findings.
- There was an overall rating of GOOD.
- The action plan is created to respond to areas for improvement.
- 12 “must dos” and 37 “should dos” were put into an action plan.
- TB summarised the key themes from the feedback.
- TB reported against the improvement plan.
- TB then presented the governance framework and summarised progress against the plan and position at April 2021.
- Actions on risk assessment planning and psychology provision on older people’s wards are ongoing.
- Reports are still going into Clinical Governance and Clinical Safety committee so that progress is not lost.
- The CQC are fully appraised of our progress against the plan.
- The Quality Monitoring Visits programme is being developed for 21/22 following the pandemic.
- Virtual visits pilots have taken place in March and April and now looking at how safety can be reported.
- The Members’ Council Quality Group take a regular report against the Quality Monitoring Visits.
- The next scheduled visits are September 21 – March 22.

TB confirmed the overall rating for Trust is Requires Improvement for Safety, and Good for the Effective, Caring, Responsive, and Well Led domains. There are various different scores against different services.

**It was RESOLVED to RECEIVE the update on the Care Quality Commission action plan.**

**MC/21/18 Closing remarks, work programme, and future meeting dates (agenda item 9)**

AM explained the context of the workplan and its purpose. Every quarter we write to governors asking what they want on the agenda. The Members' Council Coordination Group will then determine what agenda will be.

BC asked if there had been any progress on making some items biennial rather than annual?

Bill Barkworth confirmed going to the next MCCG on 21 June 21.

AM reported the next meeting of the Members' Council is the 17 August 2021.

The next item is the Chair's Appraisal, which takes place in private session. All directors except AGD and CJ will leave the meeting and JL will take the chair. The item will be led by Chris Jones, deputy chair and senior independent director.

**It was RESOLVED to NOTE the work programme for 2021/22.**

**Signed:**

A handwritten signature in black ink, appearing to be 'A.M.', written over a horizontal line.

**Date: 17.08.21**