

Minutes of the Members' Council meeting held at 09.30 on 16 November 2021

Meeting Held Virtually by Microsoft Teams

Present: 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

(CDBG)

Brenda Eastwood (BE) Appointed Barnsley

Gary Ellis (GE) Appointed – Mid Yorkshire Hospital NHS Trust

Carol Irving (CI) Public – Kirklees

Tony Jackson (TJ) Staff – Non-Clinical Support Services

Trevor Lake (TL) Appointed – Barnsley Hospital NHS Foundation Trust

Adam Jhugroo (AJ) Public – Calderdale

John Laville (JL) Public – Kirklees (Lead Governor)

Andrea McCourt (AMc) Appointed – Calderdale and Huddersfield NHS Foundation

Trust

Tom Sheard (TS)
Public – Barnsley
Phil Shire (PS)
Public – Calderdale
Public – Kirklees
Public – Kirklees
Public – Barnsley

Nik Vlissides (NV) Staff – Psychological Therapies

Lisa Ward (LW) Public - Kirklees
Tony Wilkinson (TW) Public - Calderdale

In

attendance: Mark Brooks (MB) Interim Chief Executive

Lindsay Jensen (LJ) Director of Human Resources, Organisational Development

Carol Harris (CH) Director of Operations
Mike Ford (MF) Non-Executive Director
Mandy Griffin (MG) Non-Executive Director
Erfana Mahmood Non- Executive Director
Kate Quail (KQ) Non-Executive Director

James Sabin (JS) Director of Finance & Resources

Darryl Thompson (DTh) Director of Nursing, Quality and Professions

Julie Williams (JW) Assistant Director of Corporate Governance, Performance

and Risk

Salma Yasmeen (SY) Director of Strategy

Grace Coggill (CG) Secretary to the Chair, Non-Executive Directors and

Members' Council (author)

Andy Lister (AL) Head of Corporate Governance (Company Secretary)

Apologies: <u>Members' Council</u>

Tony Wright (TWr) Appointed – Staff Side organisations Helen Morgan (HM) Staff – Allied Healthcare Professionals

Debs Teale (DT) Staff – Nursing support

Cllr Howard Blagbrough (HB) Appointed – Calderdale Council

Chris Jones (CJ) Deputy Chair / Senior Independent Director

Natalie McMillan (NM) Non- Executive Director

Dr Subha Thiyagesh (ST) Medical Director

MC/21/36 Welcome, introductions and apologies (agenda item 1)

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

AM explained that the meeting is held in public and that members of the public are able to join via the link published on the Trust website. The meeting is being live streamed for the purpose of inclusivity, to enable members of the public access to the meeting. Private items are included on the agenda for this meeting, and members of the public will be asked to leave when the items arise.

The meeting is recorded to support minute taking. The recording will be destroyed once the minutes have been approved (it was noted that attendees of the meeting should not record the meeting unless they had been granted authority by the Trust prior to the meeting taking place). Attendees were requested to remain on mute, unless speaking.

It was RESOLVED to RECEIVE the Welcome, introductions and apologies as described above.

MC21/37 Declarations of Interests (agenda item 2)

AM reported the register had been updated since the last meeting.

| Name | Declaration |
|------------------------------------------|-----------------------------------------------------|
| ELLIS Gary | Director, of Wholly owned subsidiary companies of |
| Appointed – Mid Yorkshire Hospitals | The Coalfields Trust |
| NHS Trust | Non-Executive Director, Mid Yorkshire Hospitals NHS |
| | Trust |
| | Non-Executive Director, Berneslai Homes |
| LAVILLE, John | Director and Shareholder, EMS (Hartshead) Ltd |
| Publicly elected - Kirklees | (dormant company). |
| | Member/Carer Representative, Kirklees Mental |
| | Health Partnership Board. |
| | Trustee and Chair, Popplewell Charity. |
| | Patient Representative, North Kirklees Primary Care |
| | Commissioning Committee |
| | Chair, Kirklees Mental Health Carers Forum |
| | Chair, Brookroyd Patient Reference Group and |
| | Member of PCN PRG |
| | Chair/Trustee, Popplewell's Charity |
| WRIGHT, Tony | Board of Trustees Chair, "There for You", the |
| Staff elected – staff side organisations | UNISON Welfare Charity |
| | Trustee, Barnsley Civic Trust |
| | Trustee, UNISON |

It was RESOLVED to NOTE the changes made by Governors.

MC21/38 Minutes of the previous Members' Council meeting held on 17 August 2021 and 19 October 2021 (agenda item 3)

Darryl Thompson (DTh) noted Debs Teale (DT) and DTh attended the meeting on 17 August 2021. On pages 12,13 and 14 comments made are recorded to be those of Debs Teale (DT) but the comments are those of DTh.

DTh asked for the minutes to be amended to reflect these changes. Andy Lister (AL) to amend the minutes as requested.

Action: Andy Lister

It was RESOLVED to AGREE the minutes of the Members' Council meeting held on 17 August 2021 as a true and accurate record with the noted amendments.

MC21/39 Matters arising from the previous meeting held on 17 August 2021 and action log (agenda item 4)

AM informed the Members' Council that she will refer to items that are due today and that remain open.

MC/21/21 - the Green Plan, a meeting was to take place with Estates and Staff Side. An update in relation to this action is still required.

Action: Nick Phillips

MC/21/24 – AM noted the three items under this action reference are on today's agenda and can be closed.

MC21/25g - to understand if the high number of serious incidents in Kirklees is usual and proportionate to the population size - It was agreed that a discussion will take place outside of the meeting between Carol Harris (CH), Darryl Thompson (DTh), John Laville (JL) and Andrea McCourt (AMc).

JL stated that the meeting had not taken place and he has emailed the people concerned.

DTh explained that there was work underway on the analysis of this data which has given some useful insight and Carole Harris (CH) has identified that it is not a direct comparison as the same service is not provided in the same area.

AM thanked DTh for the update.

Item MC20/25 – AM noted the updated constitution is on today's agenda. To close

Item MC20/26 - AM noted there is still no further update as yet. To remain open.

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

MC21/40 Chair's report and feedback from Trust Board (agenda item 5)

AM explained the purpose of the report is to note anything relevant not on today's agenda and provide updates on what the Non-Executive Directors (NEDs) and Chair have been doing for the Members' Council to hold NEDs to account, and to give the headlines from the Board meetings that have taken place during this quarter.

AM noted governor changes since the last meeting and welcomed Gary Ellis (GE) from Mid Yorkshire Hospitals NHS Trust and reported the appointment of Marie Burnham (MB) as the new Chair designate.

An additional item has arisen since the report was written in relation to a domestic homicide report which will be published on 24 November 2021. No details can be shared at this time as it is embargoed until it is published on the 24 November 2021.

This is a serious and complex incident that took place in June 2017 following which, an independent review of the investigation has been commissioned by NHS England and carried out by an external company called "Sancus Solutions" and is referred to as the "Sancus report".

Their view of the investigation has been ongoing for over 4 years and the Trust has responded to Sancus and given its findings full and final consideration. The report sets out some significant learning opportunities for the Trust, and as a learning organisation the Trust is ready to accept and make any changes necessary.

It was RESOLVED to RECEIVE the Chair's report

MC21/41 Members' Council Business Items (agenda item 6)

MC/21/41a Governor Feedback (agenda item 6.1)

John Laville (JL) advised that the report is included in the pack.

- The Wakefield meeting did not take place due to technical issues. The headline is there is a
 considerable amount of activity going on in the community and in services which comes as
 no surprise given the nature of the pandemic.
- In Kirklees there have been good discussions around waiting times and policy in areas such as Child and Adolescent Mental Health Services (CAMHS) and Autism services and there is now a waiting list of carers to support, and demand is outstripping capacity.
- In Barnsley there is a new group to support people with strokes, in the December meeting a
 discussion will take place to propose governors getting involved with the community groups.

AM thanked the governors for all the activity that is taking place

It was RESOLVED to RECEIVE Governor feedback

MC21/41b Assurance from Members' Council groups and Nominations Committee (agenda item 6.2)

AM advised that there was a brief update included in the papers from Members' Council, Members' Council Quality Group and Nominations Committee for information and asked for questions.

Tony Wilkinson (TW) asked for confirmation that the Quality Group accounts are scrutinised by the auditors for robustness of the figures that are used to arise at the decisions.

Mark Brooks (MB) explained for the last 2 years auditors have not reviewed the quality accounts due to the impact of Covid-19 restrictions, but the quality accounts have been disclosed to the required standard to meet necessary requirements.

A full audit of the financial accounts is carried each year by Deloitte and they attend the Members' Council meeting and report the outcome. MB emphasised that there have been no issues identified in the last 2 years during the pandemic.

Mike Ford (MF) reported as the Chair of the Audit Committee. The internal auditor 360 Assurance carry out an annual programme of audit work and give assurances about processes and assurance is received from both internal and external audit.

It was RESOLVED to RECEIVE Assurance from Members' Council Groups and the Nominations Committee

MC21/41c Members' Council elections – process (agenda item 6.3)

Andy Lister (AL) informed the group of the vacancies that will be coming up in the New Year as a result of Governors reaching the end of their terms.

Current vacancies are: 1 seat in Barnsley, 1 seat in Calderdale, 4 seats in Kirklees, 1 seat in Wakefield and 1 seat in the rest of Yorkshire and neighbouring counties. One of the 4 Kirklees seats is now vacant as a result of a resignation.

Numbers are being provided to Civica of public and staff members so they can give a financial quote for the election.

For information postal voting and e-voting numbers tally at 8883 for public members. 6620 will be postal votes and 2163 by email, 4400 staff members will be voting by email.

The election process will be put on the Trust website. There is a provisional timetable and opening nominations will be 20 January 2022 and the deadline will be mid-February 2022.

The final date for nomination withdrawal will be around 22 February 2022 and notice of poll around 10 March 2022. Voting packs will be despatched on the 11 March 2022 and the close of election will be in early April with declarations to be ready for Members' Council in May 2022.

JL commented that a video will be pulled together before the next election and made public and this is being monitored through the Members' Council Coordination Group. AM stated there are restrictions on what sitting Governors can and can't say and need to make sure what is done is within the rules, Civica (the elections services company) will make this clear.

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

MC21/44d Review of Members' Council objectives (agenda item 6.4) AM explained this item was to receive and not discussed.

Bill Barkworth (BB) gave a brief explanation of the paper and action log.

AL noted that an email had been received requesting for Governors' to be involved in Quality Monitoring visits and this would be circulated.

Action: Andy Lister

It was RESOLVED to RECEIVE the Members' Council objectives.

MC21/45e Update to the Trust Constitution (agenda item 6.5)

AL reported the last amendment of the constitution had been approved on 17 August 2021 where the rest of Yorkshire Constituency was extended to include adjacent counties, with a further addition to Annex 1 about Non-Executive Director recruitment.

Trust Board has approved the Constitution amendments presented today, to come to the Members' Council for ratification.

Phil Shire (PS) questioned Annex 6 and requested clarification on what the process would be to monitor governors.

AM clarified that the Code of Conduct for governors was in existence in this format before, and the wording has not been changed but incorporated into the Constitution along with Codes of Conduct relevant to Directors.

AL stated any decision in relation to conduct would be taken by the Members' Council and it would be a group decision.

AM confirmed there is a process around addressing behaviour of governors.

Bob Clayden (BC) referred to the Governor Handbook and noted it had recently been amended and is only published yearly.

AL confirmed the amendments had already been updated in the handbook and the Constitution presented today aligns with the handbook.

Trevor Lake (TL) noted on page 107, item 7 around public constituency makes reference to the areas and should make reference to annex 1 and annex 3. AL agreed to reference annex 1 and 3 and will resolve this.

Action: Andy Lister

It was RESOLVED to APPROVE the updates to the Trust Constitution.

MC21/44f Focus on item - Health and Inequalities (item 6.6)

Salma Yasmeen (SY) presented a PowerPoint presentation and gave a summary overview of the slide pack which covered the following:

- People with mental health or learning disability are known to have reduced years of life
- Black, Asian, and Minority Ethnic (BAME) more likely to experience poor health
- Gypsy, Roma and Traveller communities face large barriers to accessing services
- People with a physical or sensory disability experience impacts relating to communication, information, and the built environment
- Those living in our more deprived areas have a lower average life expectancy and experience poorer health
- There is evidence that LGBTQ+ people have disproportionately worse health outcomes
- Some people experience multiple impacts and disadvantages
- Meeting the requirements of the Public Sector Equality Duty and our legal obligations under the Equality Act 2010 and NHS Constitution.

In conclusion moving forward the plan is to cover the following points:

- As we will be developing action plans for April 2022 –March 2023 we want to know:
 - o What are we doing well that we need to continue doing?
 - o What do we need to start doing that we are not doing?
 - What do we need to do more/less of?

AM noted the importance of work being carried out to focus on our service users, carers and communities.

AM explained WRES is Workforce Equality Standards and WDES is Workforce Disability Equality Standards.

BC asked about Community Supporters. SY explained Community Supporters is a group working in partnership with Creative Minds who will engage with our communities to capture the impact of Covid-19. Community Supporters are people who have been trained to go out and capture stories. They are volunteers who have shown an interest to be involved in this work.

Claire Den Burger-Green (CDBG) asked about work being carried out in relation to autism, especially adult autism. SY explained there is a huge amount of work being carried out in this regard and the presentation today only have a brief overview of the work being carried out.

AM noted there may be a gap in relation to neuro diverse people, and suggested contact with the disability staff network. There are some Trusts who have developed Neuro Diverse Staff networks that specifically support people who identify as being Neuro Diverse, be that autism or other areas, and this might be something the Trust wants to consider.

CDBG agreed it is a step forward for staff and the neuro diverse community needs to be engaged.

Sean Rayner (SR) reported the West Yorkshire Mental Health Learning Disability and Autism collaborative, of which the Trust is a partner, is undertaking a detailed review into autism services across West Yorkshire which will focus on work taking place.

Gary Ellis (GE) noted it is an excellent presentation and particularly likes the framework for service improvement, and noted teams need to be mindful of referral and wider partnership working.

A discussion took place around partnership working and the charities involved, and examples of working with partners through partnership arrangements.

JL commented that it was a really good presentation and great plans but queried how is the Trust going to recognise it is succeeding and asked for examples of really good outcomes.

AM responded that it was vital things have got to change and there needs to be a focus on outcomes, there is an importance around correct strategy that once established will then identify what needs to be monitored.

SY responded giving examples included in the Integrated Performance Report (IPR), the dashboards and action plans that are developed.

SY reported when working with partners there is an aim to try and improve heath checks that are critical to improve early identification of any physical health issues, any psychological health issues for people who have mental health or serious mental health issues or learning disabilities.

SY stated the Trust knows through work with partners this has made a difference looking at the numbers of people who have had a physical health check. There is work ongoing directly with Healthwatch to ensure we receive feedback about what more work needs to be done.

JL reported he sits on the Kirklees Primary Care Commissioning Committee, which has a dashboard and noted there is a stark difference between GP practices that are engaged, and practices that are not. There is a lot of work to do to get every practice engaged.

Erfana Mahmood (EM) reported the Trust charities have an annual report which gives examples of good outcomes. We are trying to improve reporting against equality involvement communications, strategy and outcomes.

It was RESOLVED to NOTE the presentation on Health Inequalities.

MC21/44g7 Focus on item – Integrated Care Systems (ICS's) and new ways of working – including provider collaboratives (agenda item 6.7)

SR presented the slides and explained the purpose of the presentation as follows:

- The purpose of this presentation is to summarise the development of Provider Collaboratives in an NHS/Integrated Care System context.
- The nomenclature with regards to Provider Collaboratives (PCs) can be confusing, and this presentation will attempt to clarify and illustrate (not exhaustively) the different types of PCs that the Trust is involved with or will be in future.
- The different forms of PCs (existing and proposed) will continue to evolve, and the Trust is
 pro-actively working in our 4 Place-based partnerships and 2 ICS's to support and influence
 the way the PCs develop and operate.

AM thanked SR for the presentation and stated there are different place partnerships within each of the ICS's. The Trust straddles two ICS's West Yorkshire and South Yorkshire, and is engaged in place-based partnerships in Calderdale, Kirklees, Wakefield and Barnsley.

Tony Wilkinson (TW) asked about plans for fast-track implementation.

SR replied the arrangements are to be implemented in what are very challenging circumstances for all providers for the NHS. The capacity to put these changes in place is limited at present but there has been real strength from conversations already having taken place. SR gave an example of Kirklees, the domiciliary care sector/social care provider representatives were giving some real examples of pressures of recruiting staff. The collaborative agreed recruitment has to be a priority, and SR gave an example of how staffing issues in relation to social care had been addressed in the Wakefield place-based partnership.

AM referenced the new twenty-two bed CAMHS unit in Leeds which has had work conducted by the CAMHS collaborative across West Yorkshire and noted there are numerous examples of how collaborative working is being directly linked to delivering better services.

Mark Brooks (MB) noted a strong example is the response to Covid-19 pandemic, using Barnsley as an example. Providers have come together to manage the pressure across the whole system, examples being supporting vaccinations and discharge from hospitals.

PS commented he could see this working where there is already a lead provider as the Trust is for forensic and secure services but questioned how the provision of services would work in terms of Trusts performing well and those requiring improvement.

SR reported the emphasis of the new arrangements is on collaboratives and collaboration with a reduced emphasis on competition. Using the Wakefield place as an example, all partners have been very clear that they will hold each other to account for performance. That would be one of the assumptions of a provider collaborative. In the West Yorkshire arrangements similar discussions have taken place in terms of mental health, learning disability and autism collaborative and where we sit compared to each other against several benchmarks, we will hold each other to account and support each other to improve.

PS asked about the budget arrangements for place-based collaboratives.

MB reported the new arrangements provide an opportunity to change how funds have flowed historically which won't be straight forward. Since the start of the pandemic, money has not been our restricting or constraining factor, our constraining factor about service improvement has been the number of work force we have, in particular, qualified work force.

Through speaking with partners there is a really good intention we use money to provide the best services possible in places and a lot will depend on how things develop in the forthcoming months and how much delegation is given to places from the integrated care systems about how they spend their money. This will be a focus for the Trust as developments progress.

AM asked MB if there will still be the ability to pool budgets between the NHS and Local Authorities?

MB replied the potential is still there to deal with winter pressures in some of the systems the Trust is working in. We are looking very closely how we can support social care through the winter period to ease some of the pressures on the NHS.

JL wanted to respond to TW's question, he noted the amazing progress of the Kirklees alliance despite the pandemic and this is a significant step forward from JL's initial experience of the NHS when everyone appeared to work in silos.

Trevor Lake (TL) noted that from his involvement in arrangements the focus would be around "place". TL referenced the Integrated Care Partnership group in Barnsley and how well this had worked in recent years. TL felt that as central ICS's become more comfortable with the working arrangements in places, there will be a devolution of money and responsibilities in South Yorkshire allowing the partners to decide where the money is spent and how services can work together to provide better services. There will be far more scope for collaborative working to improve services.

Mike Ford (MF) noted the arrangements are complex, but collaboration is the way forward. The focus of the Non-Executive Directors is to make sure that the arrangements improve services.

Salma Yasmeen (SY) reminded the Members' Council that part of the Trust strategy for the last 4-5 years was to work well with partners to improve services. There are significant potential benefits to working collaboratively to improve services.

AM stated that Trust Board discusses collaborative working with West Yorkshire and South Yorkshire and where risks are apparent there is a risk register to identify and focus work. AM reported these reports are available on the Trust website in the Board papers.

MB reported that pooling budgets between the NHS and local authorities is a possibility and has taken place before. The work of the provider collaboratives could include local authorities as well as NHS providers and their allocated budgets.

It was RESOLVED to NOTE the presentation on Integrated Care Systems and new ways of working.

MC21/45 Members' Council Business Items

MC/21/48a Integrated Performance Report

AM noted the report is presented for information only and summarised the key headings.

AM reported performance is being maintained in key areas currently but there is significant pressure across the system.

JL noted that calls to the occupational health helpline have almost doubled in the last twelve months and shows the increasing pressure on staff.

CH thanked JL for realising the pressure on staff but reported the Trust is still managing to maintain good performance against our key metrics. Calls to the help line have increased putting extra pressure on occupational staff. Demand increases impact on staff leaving them feeling stretched.

AM mentioned out of area beds have been used to release pressure on inpatient wards but this is a temporary arrangement.

MF noted workforce pressures and potential impact for the Trust of the compulsory vaccine.

CH explained that the Trust is working with staff to understand what the impact will be and liaising with staff who haven't been vaccinated.

It was noted the legislation for staff vaccination comes into effect on 1 April 2022 and Mandy Griffin (MG) noted this a key area of focus for the Workforce and Remuneration Committee.

MC21/46 Any Other Business

No items.

MC21/47 Closing remarks, work programme, and future meeting dates

AM informed the group that future meeting dates will be circulated shortly.

Date of next Members' Council meeting 8 February 2022

MC21/48 Members' Council Private Session

The minutes dated 17 August 2021 approved as a correct record.

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Date: 08.02.22