

### Minutes of the Members' Council meeting held at 09.30 on 24 February 2023

# Hybrid meeting Large Conference Room, Fieldhead Hospital, Wakefield and Microsoft Teams

Present: Marie Burnham (MBu) Chair

Bill Barkworth (BB) Public – Barnsley (Deputy lead governor)

Cllr Howard Blagbrough Appointed – Calderdale Council

(HB)

Bob Clayden (BC)
Jackie Craven (JC)
Daz Dooler (DDo)
Public - Wakefield
Public - Wakefield

Warren Gillibrand (WG) Appointed – University of Huddersfield

Laura Habib (LH) Staff – Nursing support Tony Jackson (TJ) Staff – Non-clinical support

Adam Jhugroo (AJh) Public - Calderdale

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

Andrea McCourt (AMc) Appointed – Calderdale and Huddersfield NHS

**Foundation Trust** 

Elaine Shelton (ES) Appointed – staff side organisations

Phil Shire (PS) Public – Calderdale

Sue Spencer (SS) Appointed – Barnsley Hospital NHS Foundation

Trust

Tony Wilkinson (TWi) Public - Calderdale

In Mark Brooks (MBr) Chief Executive

attendance:

Mike Ford (MF) Senior Independent Director

Carol Harris (CH) Chief operating officer

Carmain Gibson- Deputy Director of Nursing, quality and professions Holmes (CGH) (deputising for Darryl Thompson, Chief Nurse and

Director of quality and professions)

Lindsay Jensen Deputy Chief People Officer

(deputising for Greg Moores, Chief People Officer)

Erfana Mahmood (EM) Non-Executive Director
Natalie McMillan (NMc) Non-Executive Director
Kate Quail Non-Executive Director

Mandy Rayner (MR) Non-Executive Director/ Deputy Chair

(previously Griffin)

Dr Subha Thiyagesh Chief medical officer

(ST)

Julie Williams (JW) Deputy Director of Corporate Governance,

performance and risk

Asma Sacha (AS) Corporate Governance Manager (Author)
Gemma Lockwood (GL) PA to Chair and Chief Executive (Presentation)

**Apologies:** Members' Council:

Keith Stuart-Clarke Public - Barnsley

(KSC)

Dylan Degman (DDe) Public – Wakefield

Cllr Brenda Eastwood Appointed – Barnsley Council

(BE)

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

Jackie Ferguson (JF) Appointed – Wakefield Council

Claire Den Burger- Public - Kirklees

Green (CDBG)

Helen Morgan (HM) Staff – Allied Health Professionals
Cllr Mussarat Pervaiz Appointed – Kirklees Council

(MP)

Beverley Powell (BP) Public – Wakefield

Nik Vlissides (NV) Staff – Psychological therapies

Attendees:

Greg Moores (GM) Chief People Officer (sent deputy)
Sean Rayner (SR) Director of provider development

Adrian Snarr (ASn) Executive Director of finance, estates and resources
Darryl Thompson (DT) Chief Nurse and Director of quality and professions

(sent deputy)

David Webster (DW) Non-Executive Director

Salma Yasmeen (SY) Deputy Chief Executive/ Director of strategy and

change

Andy Lister (AL) Head of Corporate Governance/ Company

Secretary

Laura Arnold (LA) Corporate Governance Officer

### MC/23/01 Welcome, introductions and apologies (agenda item 1)

Marie Burnham (MBu) formally welcomed everyone to the meeting, apologies were noted as above. The meeting was quorate and could proceed.

MBu reported that the meeting is being recorded to support minute taking. The recording will be deleted 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).

Due to technical difficulties with Microsoft teams, governors who were joining the meeting virtually could hear the meeting, but they could not be heard by Members' Council in the Large Conference Room. They were asked to use the chat function and apologies were conveyed to those joining virtually for the problems encountered.

MBu informed Members' Council that this was the last meeting for some of our governors. She thanked the following governors for their service to the Members' Council and to the Trust and wished them well.

MBu informed that Bill Barkworth (BB) has served as a public governor for Barnsley for 6 years and as a Lead Deputy Governor. She thanked him for his time and effort in

supporting the Lead Governor and the Members' Council. He was thanked for his contribution to the Members' Council and to the Members' Council groups.

MBu informed that Jackie Craven (JC) has now completed 3 terms as public governor for Wakefield and is not eligible for re-election, she also served as Lead Governor in her first term. JC has also attended numerous Welcome Events in the Trust. JC was thanked for her contribution as Lead Governor and public governor.

MBu informed that Dylan Degman (DD) could not join us today and he has decided to stand down and is not seeking re-election. DD has served 6 years as public governor for Wakefield and she thanked him for his contribution to Members' Council and to the Members' Council groups.

MBu informed that Tony Wilkinson (TW) has completed 3 terms as public governor for Calderdale and is therefore not eligible for re-election. She thanked him for his contribution to Members' Council and to the Members' Council groups.

MBu informed that Tony Jackson (TJ) will complete his first term on the 30 April 2023 and is seeking re-election to the Members' Council to represent non clinical support staff. MBu thanked Tony for his contribution to the Members' Council.

MBu and MBr thanked all governors for putting the voice of their constituents forward.

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

### MC23/02 Declarations of Interests (agenda item 2)

No new declaration of interest.

Mike Ford (MF) asked whether he and Non-Executive Director, Kate Quail (KQ) need to log off for items 6.8 and 6.9. It was agreed that they would log off and be asked to return for these items.

It was RESOLVED to NOTE the individual declarations from governors.

MC/23/03 Minutes of the previous Members' Council meeting and the Joint Trust Board and Members' Council meeting held on 9 December 2022 (agenda item 3)

### Members' Council meeting

Mandy Rayner (MR) asked to amend page 15 of the Members' Council minutes under heading; MC/22/64i Integrated Performance Report (item 7.9) paragraph 2; "since there are challenges with staffing" to be changed to "despite staffing challenges."

### Joint Members' Council and Trust Board meeting

MR asked to amend the typo under Group E feedback, social responsibility and sustainability, which should read "strategy is now in place" and not "now and place".

Action: Corporate Governance Team to amend the minutes of the 9 December 2022

It was RESOLVED to AGREE the minutes of the Members' Council meeting and the Joint Members' Council and Trust Board meeting held on 9 December 2022 as a true and accurate record with the noted amendments.

# MC/23/04 Matters arising from the previous meeting held on 9 December 2022 and action log (agenda item 4)

### MC/22/63 Freedom to speak up development session

Bob Clayden (BC) enquired whether this development session has been arranged as he has not received the date and time. Julie Williams (JW) confirmed that the date is due to be released to all governors and it has been arranged for Wednesday 22 March 2023, 9.30 – 11am. The corporate governance team will confirm whether the meeting is hybrid or just on Microsoft Teams.

### MC/22/52a Consultation around the sustainability and social responsibility work

BC asked whether governors have been consulted to take part. MBr informed the Members' Council that work is ongoing and we have planted around 400 trees around the Fieldhead site and 100 trees will be planted next week at Kendray Hospital. MBr confirmed this work is not one single event but a series of events and work which will take place over the next few years. BC asked whether governors have been specifically asked to be sustainability champions. JW said she will look into this action point.

### Action: Corporate Governance Team to liaise with the Sustainability Change Manager.

### It was RESOLVED to NOTE the Action log of the Members' Council.

### MC/23/05 Chair's report and feedback from Trust Board (agenda item 5)

MBu asked for the paper to be taken as read to allow more time for discussion items and asked for any questions.

MBu said although it is detailed in the report, she would like to give a special mention to the engagement event with the University of Huddersfield on the 2 February 2023. She said it was attended by herself, John Laville (JL), Warren Gillibrand (WG), Tony Jackson (TJ) and Asma Sacha (AS). She said it was a fantastic event and they had a really good turnout. The students engaged well and 40 new members signed up to become a Member. She explained the intention is to arrange further engagement events in the future.

JL thanked WG for facilitating the event and to AS for their support in arranging the day. JL said there was a great interest from other places as well and it would be a good idea to arrange more events.

MBu thanked the Non-Executive Directors for their hard work since the last Members' Council meeting.

MBu informed Members' Council that at 11am we will be observing a minutes silence for Ukraine.

It was resolved to NOTE the Chairs' report.

### MC/23/06 Members' Council Business items (agenda item 6)

### MC/23/06a Governor Feedback (item 6.1)

JL provided a verbal update.

JL highlighted that the main feedback from staff is appointment wait times and staffing challenges and retention. He said there was good stories from nursing support in relation to development days and joint working between service users, carers and the Trust. JL said it was highlighted that induction was good in some areas but not as good in other areas.

JL said when we look at the recruitment figures, we have increased but some of them were new roles and movement within the workforce. He stated there were common themes such as people being barred from the crisis team. He said he has heard how some people being referred to IAPT for talking therapies but then referred to a third party charity.

JL said some individuals were moved from the enhanced to the core pathway without any communication with the carers although it was noted on clinical notes that carers were to be consulted.

JL said at the carers forum meeting last week they heard from one lady and her daughter's journey, and she said she felt abandoned. JL said there was a carers worker present at the meeting who will look into her individual case.

JL highlighted governors had observed two board committees. JL said he observed the clinical governance and clinical safety committee, and Tony Wilkinson (TW) observed the People and Remuneration Committee. JL said next week Beverley Powell (BP) will observe the Mental Health Act Committee. JL said it has been fantastic to observe the committees between the Non-Executive Directors and the Executive Directors and it was reassuring. JL said the corporate governance team circulate a schedule of Committee dates for the rest of the year and he encouraged governors to attend a Committee meeting. JL thanked MBu, MBr and all the Executive and Non-Executive Directors for giving this opportunity to governors.

MBu said it was important to receive this feedback. JL said they appreciate that they, as governors, will only hear one side of the story and it was important to feed this into the Trust.

Carol Harris (CH) informed JL that if there is no progress in the individual cases, he has mentioned then he can contact CH. JL confirmed he will contact her if needed.

Daz Dooler (DD) said he has lived experience and some of the feedback is poor, he said that we need to see a culture change. MBu said we will look into this and we are continually seeking improvement and she welcomes this feedback. JW said she will take the points raised by JL and DD and liaise with CH if needed.

Action: JL and JW to discuss the issues in their monthly catch up and liaise with CH if needed.

It was resolved to RECEIVE the governor feedback.

# MC/23/06b Assurance from Members' Council groups and Nominations Committee (To be taken as read and submit questions in advance) (item 6.2)

The governors were presented with a paper to provide assurance to the Members' Council that the Members' Council Co-ordination Group, Quality Group, and the Nominations Committee were fulfilling their duties in accordance with their terms of reference. MBu noted that no questions had been submitted about the papers and they can be taken as read.

It was RESOLVED to RECEIVE the Assurance from Members' Council groups and Nominations committee.

# MC/23/06c Governor appointment to groups and Committees (To be taken as read and submit questions in advance) (item 6.3)

Asma Sacha (AS) informed the Members' Council that this paper is to support the appointment of governors to the Members' Council groups.

On the 1 November 2022, nominations were received from Phil Shire (PS), public governor for Calderdale and Daz Dooler (DD) public governor for Wakefield expressing an interest to extend their membership to the Members' Council Quality Group. As their nominations were uncontested, they will automatically fill the two vacancies.

AS relayed there were 3 vacancies on the Members' Council Co-ordination Group and there was 1 vacancy on the Members' Council Quality Group although this seat could not be filled at present as we do not have a public governor for Rest of Yorkshire and Humber representatives.

JL said we have a lot of vacancies due a period of transition. There are also a few governors coming to their end of term and he is confident that from the 1 May 2023 we will fill the places when new governors are appointed.

JW said she will also go through the different Members' Council groups as part of the governors induction process.

It was RESOLVED to RECEIVE the update on appointment to Members' Council groups and committees.

# MC/23/06d Constitution, Standing Financial Instructions and Scheme of Delegation update (item 6.4)

JW presented the Constitution; she said the primary purpose of the change was due to the change in the Health and Social Care Act 2022. She said it reflects the statutory changes to the NHS England Code of Governance for NHS provider Trusts, it will be effective from the 1 April 2023 and it reflects the organisational need. JW thanked BC for providing a comprehensive feedback and she will be working through them. She said none of the comments will effect the legality of the document. JW said the statutory changes are highlighted and changes to the Social Care Act have been added. She said the Integrated Care System (ICS) structures are referenced in the document as well as ICB and ICP. She said Monitor references have been removed and replaced with NHS England and BC has highlighted that there are some Monitor references in the document.

JW confirmed they have to remain as they are historic in terms of the structure of the Foundation Trust.

JW said the Standing Financial Instructions is to provide a framework for the proceedings and business of the Trust, this update follows previous updates agreed through the Audit Committee in October 2021 and January 2022.

BC informed JW that he has made a series of recommendations, JW confirmed that she has received his feedback and worked through them. BC said he could not feedback earlier because he did not receive his papers in the post and the papers were difficult to reference as they did not have page numbers. JW apologised and said she was aware of the issue with the post and provided assurance that this won't happen again.

BC asked about governor expenses and whether this could be extended to reimbursement of digital expenses as well as for physically travelling to a venue for Trust business. He asked whether they could be reimbursed for things such as printing and use of computers. JW said we are relying on the way to do business digitally more and more and she can look into this and find out what we can reimburse.

# Action: JW to confirm whether governors can be reimbursed for digital expenses

BC said it was also written that Non-Executives Directors were able to apply for loss of earnings.

BC asked about the disqualification of membership. He said it seems to be unfair because if a member of staff attacks someone else then they wouldn't be barred from being a member but if a member of the public did the same then they would be disqualified from membership. BC said if a member of staff was consequently terminated from employment, then they could apply to become a member but if a member of the public did this then they could not become a member again. JW said this was standard constitution language and we can discuss this outside of the meeting. JW confirmed they were statutory requirements. It was agreed that subject to changes made following further feedback from BC then the Constitution was approved.

# Action: Corporate governance team to contact BC to note any further feedback

PS said there was a new role added under the Foundation Trust Code of Governance and we are unable to amend anything as it has been added nationally.

JW said we have organisational policies and procedures in relation to staff and the constitution will be implemented as an overlay to them.

JW said the scheme of delegation has been reviewed and amended to include the following updates:

- Monitor references removed and replaced with NHS England
- Executive job titles updated
- Committee titles updated and Collaborative Committee added
- Trust Board strategy, plans and budgets updated to include the financial approval hierarchy table that has been updated to reflect the new limits

JW said the differential between a Non-Executive Director and the Associate Non-Executive Director roles have been added but they don't have a statutory role in the organisation.

JW said the Members' Council can stand up and stand down forums. She highlighted that it was discussed in the Members' Council Quality Group about pulling different teams together to make an improvement to services. JW said we have talked about governors supporting forums such as a young person's forum or a carers forum. This has been left vague on purpose in the report, so the Trust has the flexibility to choose.

The Trust seal has been updated to be signed by the Chief Executive (or his/her nominated deputy) and witnessed by the Company Secretary. This is to improve efficiency.

### Scheme of Delegation

JW presented the changes to the scheme of delegation, there has been an update to appendix 4. This includes statutory changes and making sure documents support that.

BC said he wanted to give feedback regarding the scheme of delegation document, on page 13. He said under Members' Council it states; "Appoint and removal of the Chair and Non-Executive Directors." He asked whether this should include the Associate Non-Executive Directors. JW confirmed it doesn't include the Associate Non-Executive Directors because they are not statutory.

JW said the Constitution will be replaced by midnight from 31 March 2023 and she will feedback if there are any issues that need to come back to the Members' Council.

It was RESOLVED to APPROVE the updates to the Constitution, Standing Financial Instructions and Scheme of Delegation as set out in the paper.

### MC/23/06e Local Indicator for Quality Accounts (item 6.5)

Carmain Gibson-Holmes (CGH) presented this paper and explained that this is an annual report that focuses on how the Trust performs against a set of quality priorities that have been set alongside a range of mandated items as identified by NHS Improvement (NHSI) and Department of Health and Social Care (DHSC). The Quality Account requirements/ guidance is expected to be received by the end of February 2023. The preparation is underway to prepare the report as the Trust have done in the previous years. She explained that pre Covid-19 the Trust members were asked to identify quality indicators to review as part of the Trust's internal and external data quality checks. This requirement was stepped down and it is expected to remain this way but if this was to change then the Members' Council will be informed.

### It was RESOLVED to RECEIVE the update to the Local Indicator for Quality Accounts

### MC/23/06f Members' Council elections (update) (item 6.6)

JW updated the Members' Council in relation to the Members' Council elections. She informed that the Trust has had a very successful election campaign and nominations were concluded on 16 February 2023. JW thanked the Chair and governors for their support with the election campaign and a thank you to AS and TJ for their support with the engagement day.

JW informed the Trust has received 24 verified nominations for 14 vacancies.

She explained one place will be uncontested, and all other vacancies will be subject to an election process. One vacancy will remain which is for the social care staff (working in integrated teams).

JW provided a breakdown of vacancies and nominations as displayed in the following table:

Vacancy type	Constituency	Number of	Number of
		vacancies	<u>nominations</u>
Public	Barnsley	2	4
Public	Calderdale	1	2
Public	Kirklees	4	5
Public	Wakefield	2	4
Public	Rest of Yorkshire etc	1	3
Staff	Non Clinical Support	1	2
Staff	Medicine and	1	1 (unopposed)
	Pharmacy		
Staff	Nursing	1	3
Staff	Social care staff	1	0
	(working on integrated		
	teams)		

JW informed Members' Council that the voting packs will be circulated on 4 March 2023 and voting will close on 4 April 2023.

JW informed that there were a few young people who have applied as public governors and she would like to thank DD for his help and assistance with this. MBu also thanked DD and all the governors for all their help.

JW said the corporate governance team will also be working with the lead governor on the governor induction programme.

BC said he is unclear about the voting process. JW said she will liaise with BC outside of the meeting.

### Action: JW to meet with BC to explain the voting process.

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

### MC/23/06g Members' Council Objectives (item 6.7)

JL said he has worked with governors on the Members' Council Objectives (1 April 2023 – 31 March 2025). JL thanked Claire Den Burger Green (CDBG), Tony Wilkinson (TW) Daz Dooler (DD) and Laura Habib (LH) for their help in drafting the objectives. JL explained he has discussed the headings with governors, and they have continued to use the same headings which are; Involvement, Quality and Effectiveness which has worked well previously.

JL explained the front sheet explains the statutory requirements of governors.

JL said there are 8 bullet points under Involvement and five of them are new.

JL went through some of the new objectives such as establishing a young people's forum and the Trust is seeking accreditation for triangle of care which is really positive.

JL said under quality we will continue the work of the Members' Council Quality Group and the interface with the Integrated Care System (ICS). He said governors will also support the Quality Monitoring Visits (QMV). JL explained they have specified that staff governors can also discuss the locality or team they work in rather than just the specific staff group they represent. JL asked for governors support and opened it up for discussion. BC asked why one of the bullet points has changed from "to work with" to "support". A discussion took place to clarify the work of the governors.

MBu agreed with the Members' Council that there were really good objectives. TW explained that the objectives do make it clear that governors are working in a much wider system now. Erfana Mahmood (EM) explained the Trust should also ensure that there is an improvement in diversity within our Membership and on our Members' Council. JD asked about younger governors and how we will engage them. DD said in Wakefield they have linked with the Young Lives Consortium. DD said he has also liaised with someone from the Wakefield Council who would be interested and helping governors get in touch with interested young members.

Andrea McCourt (AM) asked how they will measure progress. JL said they will implement different forums to assist with this.

Governors agreed to approve the Members' Council objectives subject to the following changes;

- 1. Involvement
- 1.8. "to support the Trust" will be changed to "to engage with the Trust"
- 2. Quality
- 2.5. "place visits" should read Patient Led Assessments of the Care Environment (PLACE)

Corporate Governance Team to amend the Members' Council Objectives and to re-circulate this out to the Members' Council

It was RESOLVED to APPROVE the Members' Council Objectives from 1 April 2023 until the 31 March 2025.

MC/23/06h Review of Chair and Non-Executive Directors' remuneration (item 6.8) Lindsay Jensen (LJ) presented the paper on the review of the Chair and Non-Executive Directors remuneration. LJ explained the Members' Council undertake regular reviews of the remuneration. LJ explained that the Nominations Committee met on the 18 January 2023 to review the remuneration arrangements and agreed the current remuneration of the Trust Chair and Non-Executive Directors remains aligned to NHSE recommendations.

LJ highlighted that the Chair will be subject to a full annual appraisal in 2023 following which the Nominations Committee will review the Chairs remuneration and make a recommendation to the Members' Council. She explained should NHSE recommend any changes to the remuneration levels, a review will take place and Nominations Committee will be updated.

It was RESOLVED to APPROVE the review of the Chair and Non-Executive remuneration.

MC/23/06i Re-appointment of Non-Executive Directors (item 6.9) (Mike Ford (MF) and Kate Quail (KQ) left the meeting)

MBu explained MF is a very good SID and brings a lot of value to the Trust. MBu asked the Members' Council whether they agree to re-appoint MF for a further 3 years. It was agreed to re-appoint MF for a second term of office for three years from 1 September 2023 to 31 August 2026.

MBu explained again, KQ is a very good Non-Executive Director and she successfully chairs the Mental Health Act Committee and is involved in others areas of the Trust such as the board development work. MBu asked the Members' Council whether they agree to re-appoint KQ. It was agreed to re-appoint KQ for a third term of office subject to annual review from the 1 August 2023 to 31 July 2023.

BC asked whether the relevant checks will be done again when they are re-appointed. JW confirmed the Trust carries out a fit and proper person test annually.

It was RESOLVED to APPROVE the re-appointment of Mike Ford and Kate Quail.

KQ and MF re-entered the Members' Council meeting.

MC/23/06j Re-appointment of Lead Governor (item 6.10) (JL left the meeting)

MBu explained the corporate governance team wrote to all governors to express an interest for the lead governor role and JL self-nominated to be re-appointed as a lead governor. MBu said JL addressed the Nominations Committee on 18 January 2023 explaining why he would like to continue in his role as lead governor and how he would fulfil the role and what support he would need. She explained that the Nominations Committee considered JL's nomination and have made a recommendation the Members' Council to re-appoint JL as lead governor.

All governors expressed a view that JL was extremely likeable, worked really hard and engaged really well with the governors and constituents.

MBu said we haven't appointed to the Deputy Lead Governor and this discussion will continue outside of the meeting. MBu encouraged current governors to discuss this position with JL if they were interested. DD suggested a joint role or rotation until a permanent Deputy Lead was appointed. JW confirmed that they could do this in rotation as a temporary measure.

Governors to discuss with JL whether they would like to self-nominate for a lead governor position (rotation will be considered).

It was RESOLVED to APPROVE the re-appointment of John Laville as Lead Governor.

# MC/23/06k Integrated Performance Report (To be taken as read and submit questions in advance) (item 6.11)

KQ joined the meeting virtually and due to the IT issues, could not present this paper.

It was agreed for MBr to present a brief summary.

MBr highlighted there were winter demands in the Trust as well as the Acute Hospitals and there was a huge increase in respiratory illnesses. MBr said various sectors have also had an impact in relation to industrial action. MBr explained that it has been challenging. The demands have been high in relation to complexity and acuity. The Trust has had out of area bed usage and this comes at a cost. MBr said the Trust have a 100 more staff and this might not always be in the areas of most need such as inpatient roles and this has been challenging for our teams. The performance metrics are holding up well and this is credit to all staff. He explained the Trust is getting more referrals from our primary care and delayed discharge. The sickness was high during the winter period and is coming down again.

MBr said financially the Trust has been fine for the last 3 years but next year it will be challenging for the NHS as a sector and for our Trust. MBr said although we are in difficult circumstances, and it was a great credit to our staff who are working hard across services.

The Members' Council observed a minute's silence for Ukraine at 11.00.

MBu explained we are doing well in relation to challenges that the Trust is facing. LJ said the Trust is seeing more starters and leavers and there are now 33 international nurses on our inpatient wards. LJ said the Trust is also looking at leavers survey and doing this much earlier rather than doing this when people have left.

DD said young people being admitted to an adult ward has doubled even though the numbers are small. CH commented that the Trust works closely with our partners and the demand has increased. DD asked about Red Kite View. CH explained the demand is significant and the level of observations of young people also has impact on this. MBr explained this also links in with acuity and staffing. MBr said between April – June 2019 compared to 2021, the number of referrals over the 4 places increased by 56%. DD said he understands there is a bigger picture and social issues needs to be resolved which then leads to mental health especially within the ICS. MBr said two members of staff were also hospitalised on our inpatient wards because they had been attacked by patients and this also has an impact on recruitment.

AJ said there was a serious incident in Manchester, and the Trust in Manchester were using nursing associates as nurses in charge, he asked whether this was happening within the Trust. CH said this does not happen routinely and they would not be put on a roster. CH commented that if this was to occur on an exception basis then it would be reviewed and go to the Nursing Directorate. CGH explained the Trust has a Safe care programme which is being rolled out and gives opportunity for clearer reporting on the quality of our staffing. CGH said the Nursing Directorate will be able to provide clearer reporting on this as the safe care programme progresses. AJ explained it isn't appropriate for a junior member of staff to lead a ward when there may be clinicians who were more qualified working in the crisis team. CH said they do have senior clinicians working on the wards and they look at staffing and the rosters. CH said our main decisions are based on patient safety. It was agreed for AJ to discuss this issue with CH outside of the meeting.

JW explained we haven't looked at safe care system in detail with governors, to look at this as a future session with governors. JL agreed with this.

### Action: AJ to contact CH to discuss his concerns about staffing, in particular the use of nursing associates

Action: Corporate Governance Team to add safe care system as a future focus item

It was RESOLVED to RECEIVE the Integrated Performance Report.

### MC/23/07 Focus on item - Trust Teaching Hospital proposal (item 7)

Dr Subha Thiyagesh (ST) presented this item.

She explained the Trust are going for the Teaching Hospital status and there is already a strong commitment to teaching, research and innovation.

ST highlighted that the Trust has established strong relationships with the University of Huddersfield, University of Sheffield and the University of Leeds.

She explained we already hold an Associated Teaching Trust status with the Leeds Medical School. She said the Trust trains medical students and nurses and allied health professionals and there maybe an opportunity to train pharmacy students.

ST said staff have managed to support these students throughout the pandemic.

ST explained that to allow the Trust to be recognised as a Teaching Trust, the Trust will have the name "Teaching" to reflect the significant teaching, training and research work of the Trust with our wide range of stakeholders including our Universities.

ST highlighted some key reasons why the Trust should apply to be a teaching hospital;

- Reflect the Trust's commitment to teaching and learning
- It was keeping with the Trust vision to provide outstanding physical, mental and social care in a modern health and care system
- In line with values of aiming to improve and be outstanding, relevant for today and ready for tomorrow.
- Supports our strategic objectives e.g. the Trust being a great place to work, and further, a great place to train our future workforce.
- Improves the visibility of the Trust as a learning organisation
- Will support attracting a high calibre workforce, whilst delivering high quality care to our service users and carers.
- Strengthens applications for research and development funding

ST explained that in relation to capacity, resources will need to be identified to support the project over a 6 month period and this has formed part of the planning and prioritisation discussions for 2023/24. She explained resource and capacity will be the main risk. ST said that costs associated with the name change, for example signage and templates will be updated as required rather than incurring a significant cost up front.

ST explained that there is limited guidance available to Foundation Trusts on how to gain Teaching Trust status and this has been established through engagement with other Trusts with experience of this process for example, through consultation with Humber Teaching NHS Foundation Trust and via engagement with the Executive Management Team (EMT), Committees and Board.

ST said this proposal was initially presented to EMT to gain Teaching Trust status in June 2022 and it was supported. The paper was then presented to the Clinical Governance and Clinical Safety Committee in November 2022 and there was agreement to progress. The paper was presented to Trust Board in November 2022 and an agreement was reached to commence consultation for obtaining Teaching Trust status with Members' Council for their consideration and approval.

ST said a steering group is being established which she will chair, and she will be responsible for oversight of all the workstreams including communications, engagement, corporate governance, legal, research and development and estates and facilities.

ST asked the Members' Council for their approval and to move to the next step of consultation. ST said the next step would be for MBu and MBr as Chair and Chief Executive to write to external stakeholders and NHSE.

ST made a recommendation to the Chair to write to the Trust membership with supported proposal asking for responses by exception.

MBu thanked ST for the presentation and explained that this would enhance the quality of people we attract and employ, and staff are regularly up to date with training and development.

TW asked whether patients will benefit directly. ST said patients will benefit from this and having the Teaching Trust status will attract the right calibre of staff and it also has a direct impact on the Trust clinical practice. The Trust would use research methodologies.

TW asked whether this would lead to greater staff turnover. ST said the workforce will be attracted by our culture and drawn by the ambition and learning. This will be linked to workforce recruitment and retention.

LH commented that this was a really good initiative and there will be a lot of support and we are heading in the right direction. MBu said there is fantastic learning and development drive. DD asked whether we would strip resources from our core services and we may lose staff from the core services to other projects. ST said this will attract people back into our services and she understands what he was saying, but this will enhance the Trust reputation and training. ST said we are validating what other staff are doing already, such as preceptorship and developing our staff further. DD said we need to reinforce that all staff are welcome and not everyone has to be ambitious as there are people who want to just do a good job. MBu and ST said this was a good point and as a Trust we will ensure we have an open message.

AJ asked whether people will be taking on extra roles on this project. ST said the Teaching Trust status will not change what people are already doing. ST said they have done a survey about looking at non-medical staff who want to engage in research and looking at the barriers. AJ said this was a good idea but what will happen in services if someone takes on an honorary lecturer role and they won't be on the ward. MBu said we are giving people acknowledgement for what staff are already doing and it is not giving them extra

roles. ST provided an example with her role and the application of her research. She said she was awarded the professor status at the University of Huddersfield.

WG explained many of his staff already work with NHS organisations and with SWYPFT as part of the nursing division and we can't disassociate from the teaching/ training and education. We need to bring the innovations together. WG said he has worked for different Trusts and as we move forward with digitalisation of care then we need to be at the forefront about bringing the education and research together. WG said the National Institute of Health Research have a programme which this Trust has got the success in achieving called research for patient benefit. It is solution focused and there are many benefits. This will also bring benefits and funding. DD relayed his concerns and WG said the patient interface will increase.

AJ said he can also see the benefits and he asked whether staff will be working in their own time and doing more than there allocated working hours. He asked how the organisation will help staff by making time out and back filling tasks. CH said if we create an improved learning environment, and this will help staffing and she is hopeful that it will help.

AM said she was very supportive of this. She asked whether the Trust has contacted other Trusts to consult on the process and who will be the ultimate decision maker as to whether the Trust receives the Teaching Status. ST said the Trust have worked with the Humber Teaching NHS Foundation Trust in relation to the governance process and also engaged with NHSE. MBu explained a few universities will also take this to Board to say they support our status and also the Members' Council would also have to support the status. MBu said the Trust will write to NHSE to request to add Teaching Status to our name.

JL said he fully supports this and asks whether it was too good to be true. He said it is positive that it was a 6 month timeline but there may be obstacles along the way. MBu explained that there are few mental health trusts with teaching hospital status, and our Trust is already doing a lot of work on Research and Development (R&D) and learning. ST said sometimes we need the right team to come together and have an ambition to go through this. MBu said the Trust already have an Associate Teaching Hospital status and we need to bring it together and receive this recognition. LH highlighted some research she is aware of on the wards which is really positive.

Cllr. Blagbrough asked when this will be communicated to the wider public. ST said we will do this once the steering group is established and once the Trust receives the status.

TW asked whether the community will care about this change as long as they receive the care they require. JL said he is happier to be treated at a Teaching Hospital than a non-teaching hospital. JL commented that there is perception that they may be better qualified staff at a Trust which is labelled "Teaching Hospital".

AJ asked whether the steering group will engage with service users. ST said there is a service user engagement and this is also applicable with research and development.

DD asked about evidence based and he asked whether as a Teaching Hospital they will have more influence. ST said they are already doing this. ST said we are already a specialist organisation and the Trust influences our discussions with our commissioners and look at our data in terms of waiting lists etc. MF commented that this was a good and effective debate.

# It was RESOLVED to RECEIVE and APPROVE the Trust Teaching Hospital proposal.

### MC/23/08 Focus on item - Single Point of Access (SPA) (item 8)

The team were presenting virtually so the item will be re-scheduled a later date.

JL highlighted he has discussed the crisis line at the Kirklees Mental Health Alliance, there has been various discussions about crisis lines being re-routed to NHS 111. JL said there were concerns in the MH Alliance as to the implications of this. JL asked whether this would include SPA and he also said there were great concerns as there are lengthy delays in them calling people back.

CH said she chairs the secondary care pathway meetings for the West Integrated Care System and 111 keeps us updated with their work. CH said she is relaying this from memory but the 111 will sit at the front but then they will re-route people to the most appropriate service and one of those services maybe the helpline. CH said she will raise his concerns and also receive an update and report back to JL. JL said they discussed at the meeting that if a member of the public was to call the 111 crisis line which was set up during the pandemic, this call would go to 111 and 111 may sign post people on but this may add delay. JL said the system leaders were equally concerned about this. CH said she will look to clarify the position and report back.

### **Action: Carol Harris to update John Laville**

Cllr Blagborough asked how we deal with the homeless needing help. DD explained it may be the plan that everything is accessible via 111 which is easier to remember than individual service lines. DD said the change may be due to not many people getting the help they require from the existing SPA service.

AJ said that there will be difficulties with using 111, for example, with scarlet fever, people couldn't get through to 111, he explained he works in the GP practice and there were many people who needed antibiotics and when they called 111 they were informed that someone would call them back but then they received a second call saying they were too full and no one could call them back and their case was subsequently closed. AJ said this system would not work for people who were mentally distressed.

PS highlighted that SPA doesn't operate on weekends therefore there needs to be a discussion on how well the home based treatment teams worked at the weekends to handle the calls and whether the SPA team could include this in their presentation.

TW asked about engagement and consultation regarding this initiative. MBr said the Trust will get an opportunity to input within the consultation process. DD relayed that this was already happening in the South of England and it was creating a triage system.

Action: Corporate Governance Team to relay the above messages to SPA to add this to their presentation.

### MC/23/09 Chair's appraisal (process) (item 9)

Mandy Rayner (MR) discussed the process for MBu's annual appraisal process. She explained that as the Members' Council were only discussing the process that MBu can remain in the room unless there were any objections. No objections were received.

MR confirmed that MBu's appraisal will be by MF as Senior Independent Director (SID). She explained that the process for 2022/23 will follow that of previous years which will enable all members of the Trust Board, governors and key stakeholders to contribute. She explained that NHS England publish an appraisal framework for NHS provider chairs which is a standard approach across the system.

She explained that MBu has been Trust Chair since December 2021 and her full appraisal will be from 1 April 2022 until the 31 March 2023. MR asked if a Chair is appointed midterm whether they will have to wait 18 months until they have a full appraisal. JL said MBu joined us in December 2021 and MF confirmed that MBu has received an interim appraisal.

It was RESOLVED to RECEIVE an update on the Chair's appraisal process.

### MC/23/10 Closing remarks and work programme 2023/24 (item 10)

The 2022/23 work programme was included in the Members' Council papers in error and the 2023/24 work programme was omitted. Apologies were relayed by AS and it was agreed to circulate the 2023/24 work programme to the Members' Council as soon as possible for comment and approval.

Action: Corporate Governance Team to circulate the Members' Council work programme 2023/24.

### MC/23/11 Date of next Members' Council meeting (item 11)

BC highlighted that the Members' Council Coordination Group were asked to agree the dates of the Members' Council meetings for 2023/24 and noted that the date in August had changed from 16 August 2023 to 15 August 2023. Discussion took place in relation to governor and Board unavailability on Tuesdays and Thursdays, therefore it was agreed to schedule future Members' Council meetings on either Wednesdays or Friday mornings.

#### Future dates:

- ➤ May 2023 TBC
- ➤ August 2023 TBC
- Friday 29 September 2023 Annual Members' Meeting
- Friday 17 November 2023 (including Joint Trust Board and Members' Council)
- Tuesday 20 February 2024

Action: Corporate Governance Team to reschedule the dates of future Members' Council meetings.

It was RESOLVED to APPROVE the Members' Council meeting dates for 2023/24 with the noted amendments.

### MC/23/12 Any Other Business (item 12)

BC said the 2021 cancer patient survey from NHSE showed that the two groups who are worse served as people with cancer were people with learning disabilities and those diagnosed with a mental illness. BC said he has been doing some work on this with them and is working with the cancer experience care lead from NHSE and they are doing work which will filter down to our Trust. He said they are working with local health teams and they are working with toolkits for professional use and reasonable adjustments mostly for acute health trusts and doctors. He said the group in Northumberland is working on patient passports and the local alliance is working on patient groups. BC said there are few mental health trusts getting involved with the process. CGH asked whether there was a system in place to determine that those people have a diagnosis of cancer and then the challenge of the treatment they receive. Natalie McMillan (NMc) explained as Chair of CG&CSC the Trust need to focus on this and she will take this as a discussion to the CG&CSC and to look at the the outcome of those with Learning Disabilities. She said we need to look at it as we have received the learning from deaths report, and it is about our learning of people from learning disabilities and to broaden it. NMc said it is about choices and how they can have this choice. AJ said it was an important piece of work and working in general practice there are people who are afraid of hospitals and an earlier input may have changed a persons prognosis. ST said this was part of our physical health strategy. ST said we are working with the executive trio to identify a strategy over the next 3 years and the use of more reasonable adjustments. EM said the Mental Health Act Committee also has data about rules about capacity and the MHAC also have other local authorities sitting on which providers assurance.

**Action: Natalie McMillan** 

- BC said the West Yorkshire and Harrogate Cancer Alliance have got monies of around £100,000 for innovative research. ST said she will make a note of this and discuss this with the R&D team.

### Action: ST to discuss this information with the R&D Team

- Asma Sacha (AS) informed Members' Council that although they are still considering different venues for hybrid Members' Council meetings for 2023/24, whether governors would be in agreement to hold the next meeting at Fieldhead Hospital to enable new governors to visit the site and for the corporate governance team to arrange a walk about. Members' Council agreed to this plan.

# Action: AS to arrange a walkabout of the Fieldhead site for all governors at the end of the next Members' Council meeting.

- JC, TW and BB thanked everyone for supporting them throughout their term as governors. MBu thanked them for their contribution to the Members' Council.

### It was RESOLVED to NOTE any other business.

Close of Members' Council meeting