

## Minutes of the Members' Council meeting 23 February 2024, 10.00 - 12.30

## Hybrid meeting

Large Conference Room, Learning and Development Centre, Fieldhead Hospital, Ouchthorpe Lane, Wakefield, WF1 3SP and Microsoft Teams

Present: Marie Burnham (MBu) Chair

> Jacob Agoro (JA) Staff - Nursing

Cllr Sue Bellamy (SB) Appointed - Barnsley Council Cllr Howard Blagbrough Appointed – Calderdale Council

(HB)

Bob Clayden (BC) Public - Wakefield

Warren Gillibrand (WG) Appointed – University of

Huddersfield

Ian Grace (IG) Staff – Medicine and Pharmacy Emma Hall (EH) Appointed - Mid Yorkshire NHS

Teaching Hospital

Sara Javid (SJ) Public - Kirklees Adam Jhugroo (AJh) Public – Calderdale

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

John Lycett (JLy) Public - Barnsley Anne Magee (AM) Appointed – staff side Appointed - Calderdale and Andrea McCourt (AMc)

**Huddersfield NHS Foundation Trust** Staff - Allied Health Professionals

Helen Morgan (HM) Bob Morse (BM) Public – Kirklees Reini Schühle (RS) Public - Wakefield

Public – Calderdale Phil Shire (PS)

Susan Spencer (SS) Appointed – Barnsley Hospital NHS

Foundation Trust

Public - Barnsley Keith Stuart-Clarke (KSC)

In attendance: Mark Brooks (MBr) Chief Executive

> Mike Ford (MF) Non-executive director

Assistant Director of IT services and Paul Foster (PF)

system development and leading on

digital strategy

Deputy Director of Nursing, Quality & Carmain Gibson – Holmes

(CGH) **Professions** 

**Chief Operating Officer** 

Carol Harris (CH)

Dawn Lawson (DL) Executive director of strategy and

change

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

Dawn Pearson (DP) Associate Director of Communication,

Involvement, Equality and Inclusion

Chief Allied Health Professional and Katie Puplett (KP)

leading on clinical strategy

Mandy Rayner (MR) Deputy Chair and Senior Independent

Director





Andrew Lister (AL) Company Secretary/ Head of

Corporate Governance

Asma Sacha (AS) Corporate Governance Manager

(author)

Andrew Betteridge (AB) Corporate governance administrator

Apologies: Members' Council

Tanisha Bramwell (TB) Public – Kirklees

Claire Den Burger-Green Public – Kirklees (Deputy Lead

(CDBG) Governor)

Daz Dooler (DD) Public – Wakefield Rumaysah Farooq (RF) Public – Kirklees

Leonie Gleadall (LG) Staff – non clinical support

Daniel Goff (DG)

Laura Habib (LH)

Rosie King (RK)

Christopher Mateiak (CM)

Public — Barnsley

Staff — Nursing support

Public — Wakefield

Calderdale

Christopher Matejak (CM) Public – Calderdale

Cllr Mussarat Pervaiz Appointed – Kirklees Council

Fatima Shahzad (FS) Public – Rest of Yorkshire and

Humber

Nik Vlissides (NV) Staff – psychological support

Apologies: Attendees

Lindsay Jensen (LJ) Acting Chief People Officer

Dr Rachel Lee (RL) Associate Non-Executive Director

Greg Moores (GM) Chief People Officer
Kate Quail (KQ) Non-Executive Director

Sean Rayner (SR) Director of provider development
Adrian Snarr (ASn) Executive Director of finance, estates

and resources

Professor Subha Chief Medical Officer

Thiyagesh (ST)

Darryl Thompson (DT) Chief Nurse and Director of quality

and professions

David Webster (DW)

Julie Williams (JW)

Non-Executive Director

Deputy director of corporate

governance

#### MC/24/01 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). Attendees who were joining virtually were kindly requested to remain on mute, unless speaking.



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

MC/24/02 Declarations of interest (agenda item 2)

No further updates.

It was RESOLVED to NOTE the individual declarations from governors.

MC/24/03 Minutes of the meeting dated 17 November 2023, the Joint Members' Council and Trust Board meeting held on 17 November 2023 and the Extraordinary Members' Council meeting held on 1 December 2023 (agenda item 3)

It was RESOLVED to APPROVE the minutes of the Members' Council meetings of 17 November 2023 and 1 December 2023 as a true and accurate record.

MC/24/04 Matters arising from the previous meeting held on 16 August 2023 and 11 September 2023 and action log (agenda item 4)

Action from 16 August 2023;

MC/23/31 (item 7.1) Quality account and external assurance

Carmain Gibson-Holmes reported she has liaised with Bob Clayden (BC). BC confirmed this and the action can be closed.

Action from 9 May 2023;

MC/23/06d (action log)

Andy Lister (AL) said this action is in relation to the expenses policy which will be reviewed by the Members' Council Co-ordination Group. This action will remain open until this review has taken place.

#### Quality account

CGH informed Members' Council that there is no longer a requirement to produce the local indicator for quality accounts and the Trust is awaiting further national guidance on the quality accounts. This is reflected in the Members' Council work programme for 2024/25.

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

MC/24/05 Chair's report and feedback from Trust Board (agenda item 5)

MBu asked to take the report as read and explained the purpose of the report was to highlight the Chair's and Non-Executive Director's activity since the last meeting.

John Laville (JL) reported governors were still not receiving the Brief (staff communications newsletter). He said they were receiving the Headlines and the View. AL reported he will ensure all governors receive a copy of the Brief.

### **Action: Corporate governance team**

Phil Shire (PS) said the Older People's Services (OPS) Consultation work has been very thorough and PS stated he had attended the consultation event in Halifax, and it had been well planned.

MBu thanked governors for engaging in the process.



Cllr Howard Blagbrough (HB) reiterated the consultation had been extremely thorough and thanked the Trust.

Adam Jhugroo (AJ) stated he has spoken to GPs in his area, and they were unaware of the consultation. He asked how the Trust was engaging with GPs.

Mark Brooks (MBr) reported Subha Thiyagesh (ST) was the executive lead and he suggested for AJ to liaise with ST.

MBr informed the Members' Council that the consultation doesn't end until the end of March 2024 and a letter will be going out to all members of Place committees on the 23 February 2024 (today). MBr explained there are GP representatives on all the Place committees, and they should provide feedback through this route.

AJ thanked MBr for the update.

lan Grace (IG) reported he had attended the Dewsbury consultation event, and was very impressed by the display, and the amount of people who were present. He said as a governor and a constituent of Dewsbury, it had been very well planned.

Bob Clayden (BC) noted there is a PDF document regarding the Older People's consultation event on the Trust website but the links on the document do not appear to work.

## Action: Corporate Governance Team/ Integrated Change Management Team

MBu reported there are over 270 nominations for the staff excellence awards 2024 which is outstanding.

MBu stated on Christmas day all Board members contacted wards and teams across the Trust which had been well received.

MBu informed Members' Council that she has now completed the Non-Executive Director mid-year reviews, as part of which they are committed to visiting services.

IG asked about virtual wards.

MBr explained the virtual wards focus was on acute wards/ physical health in the Barnsley area at the present time. MBr explained the project is about using digital innovations which the Trust has already introduced during the Covid-19 pandemic to make services more effective.

IG said he has heard from acute colleagues that there are patients on acute wards who were waiting for a mental health bed but there were no beds available, and asked whether in this instance, we could use the model of virtual wards.

MBr said winter pressures had an effect on all mental health wards. Some people have complex needs and it can be difficult for them to find a placement. MBr said this was the same for younger people needing Tier 4 beds. MBr stated he can provide governors with assurance that there are crisis liaison teams in the Trust who work with acute services.

## It was RESOLVED to NOTE the Chairs' report.

## Members' Council business items

## MC/24/06 Governor feedback (agenda item 6.1)

John Laville (JL) reported he has met with all governors and Kirklees governors intend to write to the Cabinet member for children in relation to funding which currently goes to a



charity provider called Northorpe Hall. JL explained the council are stopping this funding at the end of March 2024 and he has been informed that the vast majority of the funding will not go back into children's services, but it contributes to Kirklees council savings.

JL reported governors have discussed sexual safety and also discussed the recent case in the media in Nottingham where a man murdered three people. The man had been known to mental health services and was discharged from services due to non-engagement.

Natalie McMillan (NMc) reported sexual safety in the Trust, has been reviewed and escalated to the organisational risk register. The risk has been assigned to the Quality and Safety Committee for oversight and monitoring.

Carmain Gibson-Holmes (CGH) explained the Trust has signed up to the National Sexual Safety Charter. CGH reported quality improvement work is taking place including engaging with service users and staff who deliver care and treatment. Work has been taking place over the last few years and is being monitored through the Clinical Risk Panel who provide assurance to the Trust clinical governance group.

Mandy Rayner (MR) reported the sexual safety risk is also reviewed in the People and Remuneration Committee (PRC).

Carol Harris (CH) noted reference to the Nottingham incident, and reported the Trust has a thorough discharge process involving multi-disciplinary team consideration who consider different ways of engaging with patients. She explained there is a national drive to move away from the Care Programme Approach (CPA) and this work is a priority.

Adam Jhugroo (AJ) said, as a Calderdale governor, it is known that if someone doesn't respond to the Single Point of Access (SPA) within a certain timescale then their case would be closed in 10 days. AJ stated he is aware the core community mental health team do not engage patients over the longer term.

AJ asked whether there are still Assertive Outreach Workers in the Trust.

CH reported although there are no longer Assertive Outreach workers, the work is now carried out by the enhanced community mental health team. CH said if a patient presented significant risk, then this would be highlighted through the referral.

Bob Clayden (BC) asked whether the Trust will find out what system the Nottingham NHS Trust was using.

MBr reported the Trust will be updated with any outcome of an enquiry on publication.

CH said there is a multi-agency group who meet to review high risk patients in the community, and they also liaise with the police via the portal.

MBr informed Members' Council of a complex case where one service user who was known to the Trust had been involved in a homicide. The tragic event was before Christmas in relation to a mother and her baby. MBR reported the work carried out by clinicians was based on risk assessments at the time of the assessment and work with a multi-disciplinary team.

JL asked if the governor question and answer sessions can be scheduled for the year ahead. It was agreed to share with the governors the full schedule for 2024.

#### Action: Corporate governance team.

JL said governors have also requested a schedule for Quality Monitoring Visits (QMVs). He said governors have attended the training on QMV and are waiting to attend the visits.



## Action: Corporate governance team/ Quality, Improvement and Assurance Team (QIAT).

JL said he had been made aware that GPs are being asked to reach out to veterans who are reluctant to seek help. JL asked if the Trust would do the same for veterans seeking mental health support.

MBr reported the Trust has been re-accredited for its interaction with veterans and the Trust recognises their needs.

JL noted staff governors have spoken about the junior doctor strike and the pressure this puts on the system and workload. JL noted IG mentioned controls on medication and the impact on the pharmacists workload. Staff governors were reassured by MBr that they can contact him to discuss any cases.

NMc reported the Trust is aware that industrial action has an impact on staff and patients, but there hasn't been any immediate harm caused, but the Trust does not yet know the longer term impact.

MR reported there is a Trust risk logged on the risk register in relation to industrial action and is overseen by the People and Remuneration Committee (PRC).

Jacob Agoro (JA) reported staff are feeling pressured and it feels like it is being normalised .

MBr said he has reached out to staff through the communications team using the Brief and he recognises the pressure. All messages are passed down to staff throughout the organisation. MBr reported he was happy to have further conversations with staff and governors who can contact him as required.

It was RESOLVED to RECEIVE the governor feedback.

## MC/24/07 Governor appointment to the Members' Council and Trust Board Groups and Committees (agenda item 6.2)

Andy Lister (AL) reported an email was sent to governors inviting self-nominations for the vacancies on Members' Council groups. There are currently three vacancies on the Members' Council Co-ordination Group but no vacancies on the Members' Council Quality Group, Nominations Committee or the Equality, Involvement and Inclusion Committee.

AL stated one uncontested nomination had been received for a staff governor position from Leonie Gleadall on the Members' Council Co-ordination Group. It is recommended to appoint Leonie Gleadall as a member for a period of three years from February 2024 to February 2027.

JL thanked all governors who are members of the Members' Council groups.

It was RESOLVED to APPROVE the governor appointment to the Members' Council Coordination Group.

MC/24/08 Assurance from Members' Council groups and Nominations Committee including (to be taken as read and submit questions in advance) (agenda item 6.3)

Members' Council present confirmed they had read the paper, and they had received no questions.

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



### MC/24/09 Re-appointment of Non-Executive Director (agenda item 6.4)

Natalie McMillan, Non-Executive Director left the meeting for this item.

MBu said in the absence of Lindsay Jensen - Interim Chief People Officer, Andy Lister (AL) will present this item.

AL stated Non-Executive Directors are appointed for a term of 3 years and Natalie McMillan (NMc) was appointed from 1 May 2021 and her term will end on 30 April 2024.

AL stated NMc has confirmed she wishes to seek re-appointment for another term which is supported by the Chair and the Nominations Committee.

It was RESOLVED to APPROVE the re-appointment of Natalie McMillan as Non-Executive Director for a second term of office for three years from 1 May 2024 until 30 April 2024.

## MC/24/10 Review of Chair and Non-Executive director remuneration (agenda item 6.5)

Andy Lister (AL) reported he will present this paper in the absence of Lindsay Jensen (LJ), Interim Chief People Officer.

AL explained the remuneration for the Chair and Non-Executive Directors is provided in a framework from NHS England (NHSE). The Trust signed up to this framework in 2019 and remuneration levels have not changed since this time. A review is taking place through NHS providers but at this time there is no update, should NHSE recommend any changes to remuneration levels a review will take place and the Nominations Committee will be updated.

It was RESOLVED to RECEIVE the update from Nominations Committee in relation to Chair and Non-Executive Director remuneration.

# MC/24/11 Freedom to Speak Up – Biannual survey results and planning tool (agenda item 6.6)

Carmain Gibson-Holmes (CGH) said she will be presenting this paper on behalf of Julie Williams, Deputy director of corporate governance and Estelle Myers, Freedom to speak up guardian. She explained this paper has been reviewed by the Executive Management Team, the People and Remuneration Committee and Trust Board.

CGH stated the report provides the Trust commitment to support colleagues who wish to speak up, to listen to and learn from what we hear, and to follow up and make changes in response to what we hear. There is a clear structure in place to ensure oversight of all contacts with our freedom to speak up guardians, with identified non-executive and executive leads for speaking up.

CGH went through the key highlights;

- The national data shows that the Trust continues to perform in line with peer Trusts for the national quarterly pulse survey data and has maintained its position within Quartile 2 for FTSU reported cases.
- In quarter three (Q3) of 2023/24 there was a small decrease in the total number of concerns.
- The number of anonymous concerns has stayed the same in Q2 and Q3 as did the number of concerns relating to inappropriate attitudes and behaviours.
- There has also been an increase in Q3 in the number of concerns relating to bullying and harassment compared with Q2.



- In the year to date, there have been two reports of detriment (detriment is defined within the paper).
- Since April 2023, five cases have been taken through FTSU process and the following themes have been identified: staff behaviours and attitudes, team issues and access to training.
- As of November 2023, mandatory training with regards to speaking up was at 94.75% against a target of 85%. She said there is still work to be done on the follow up and listen up training.

CGH said Speak Up has also been recognised as a risk on the organisational risk register and the risk of people not speaking up and the detrimental effect this can have on staff and patient care. She said there is still work to be done in this area.

She explained none of the five cases relate to patient care but is unable to ascertain if there is any hidden impact. Triangulation of data takes place by looking at complaints and quality monitoring visits in addition to FTSU reporting. The report also highlights barriers to speak up and there are staff focused solutions.

CGH stated the Care Quality Commission (CQC) have also informed her that they have spoken to staff, and staff were aware of the paths to take should they wish to speak up and they were confident with the process.

Mandy Rayner (MR) reported FTSU is a standing agenda item at People and Remuneration Committee, and Mike Ford is the allocated NED champion.

Phil Shire (PS) noted "whistle blowing" doesn't appear in the report and he understands it was a re-branded because of the victimisation of those who chose to speak up. PS noted none of the incidents related to patient care, but he asked if there are there any major system issues the Trust is aware of.

MBr said FTSU came about from the outcome the incident investigation in mid-Staffordshire. FTSU is used when a staff member hasn't made progress through their line manager or staff union, and is another route. MBr explained the Trust also have Equity Guardians and FTSU champions and there are many routes staff can go through.

MBr reported clinical issues are usually raised locally by staff through line management but occasionally the FTSU route has been used.

MBr said there have been times when staff have gone straight to CQC rather than liaise with their manager.

PS asked about detriment, and whether this refers to people who felt victimised as a result of speaking up.

MBr said the Trust ensures there is appropriate support available to staff to ensure they do not suffer detriment and staff can also approach Mike Ford (MF) as Non-Executive Director.

JL stated when incident reporting is increasing then it can be interpreted that the Trust has an open culture.

JL said the report shows from a total of 46 people contacting FTSU from April 2023 to December 2023, only six cases were allocated as FTSU cases. JL asked about the staff where it was deemed not to be a FTSU case and whether they felt listened to or if they felt their issues were "quietly sidelined".



MBr said Julie Williams (JW), Deputy Director of Corporate governance has established a group where FTSU is reviewed and there is a feedback loop.

MBr said the findings from this group show most issues raised relate to team dynamics and people related issues rather than quality. MBr reported there is a feedback loop available with a thorough review process.

JL said he was disappointed to see bullying and harassment are issues in the Trust, noting they are difficult cases to deal with as they can escalate when reported.

MBr stated there is zero tolerance to bullying and harassment in the Trust, and he understands there will be incidents in the NHS but as a Trust there is an open culture and bullying and harassment are not tolerated.

JA said he was a FTSU guardian, and stated the process is very good. JA reported there is currently a communication barrier with the newly recruited international nurses, and he was doing some work with them to break down some of these barriers. International nurses are struggling, and they don't necessarily feel comfortable in speaking up. JA said he will continue working with international nurses to address this.

MBr said Carol Harris (CH), Darryl Thompson (DT) and Subha Thiyagesh (ST) executive TRIO, have met with international nurses to listen to the issues that have been raised. MBr noted the shape and dynamics of the Trust workforce is changing and work is taking place to ensure communication is effective for international nurses and existing staff.

BC asked about complex cases and changing ways of working.

CGH said this relates to staff and how they would like to come to a resolution. It is undertaken in collaboration, and doesn't always resolve quickly.

BC asked whether this will be reflected in the report. CGH said she will report this feedback.

## **Action: Carmain Gibson-Holmes**

KSC asked whether people were not speaking up because it is against the workplace culture to be able to speak up.

MBu said all staff have the opportunity to report their concerns through a number of means, and it is important that Trust staff continue to be open and inclusive.

It was RESOLVED to RECEIVE the Freedom to Speak Up (FTSU) update report.

#### MC/24/12 Chairs' appraisal - process (agenda item 6.7)

Mandy Rayner (MR) informed the Members' Council about the Chair's appraisal process for 2023/24 and objectives for 2024/25. She explained the process will follow that of previous years, enabling members of the Trust Board, governors and key stakeholders to contribute. She explained the final report will come to Members' Council in August 2024.

It was resolved to RECEIVE the Chair's appraisal process.

#### MC/24/13 Members' Council elections – update (agenda item 6.8)

Andy Lister (AL) explained the nomination stage for the Members' Council election closed on 22 February 2024 and all seats have received nominations. AL reported all candidates have been verified and there will be an election in Kirklees and Psychological Therapies, but other candidates are unopposed.



### It was resolved to RECEIVE the update to the election process.

## MC/24/14 Integrated Performance Report (IPR) (agenda item 6.9)

Natalie McMillan (NMc) explained the key highlights of the IPR;

- The performance figures are positive overall despite the external and internal challenges.
- Inappropriate out of area bed placements was 85 in December 2023, this has been a focus in the organisation and there is sustained improvement,
- There is a focus on the number of people with a risk assessment within 7 working days of first contact as the target hasn't been reached.
- The reporting of injuries, diseases and dangerous occurrences regulations (RIDDOR) is 4, this work is being addressed and is being reported through the Audit Committee.
- Sickness/absence remains a challenge and this is overseen by the People and Remuneration Committee.
- Appraisal rates are improving and the Trust has achieved 85% target which is above the 80% threshold.
- Agency use continues to reduce.
- Safer staffing metrics The Trust Board is reviewing how to report this as it is currently quite complex.
- Finance, Capital is currently red, this has been scrutinised at Finance, Investment and Performance Committee. There is assurance that this will be delivered.

John Laville (JL) asked what the red means.

MBr reported the Trust hasn't spent all of the money yet this year and if the Trust doesn't spend it this year, then this won't be re-allocated next year.

Anne Magee (AM) said in relation to appraisals, staff feel this is more person centred this time and it doesn't feel they are working through a tick box exercise, which is positive.

Phil Shire (PS) said there was a 6 week wait for diagnostic procedures, but other waiting list metrics are green.

MBr said this refers to Paediatric Audiology in Barnsley, which isn't a large service and there are part time staff working in the service, one of whom has been on sick leave. MBr said they are reviewing the delivery plan.

JL said he was very happy about increasing the number of appraisals and improved quality.

MR asked the Members' Council to note there have been high numbers of nurses this year.

Bob Clayden (BC) noted smoking quit rates for patients and that the reference shows that Q3 will be due in February 2023. It was confirmed this was a typing error it should state February 2024.

BC asked about the incident of RIDDOR and the consequences of the action.

MBr said the Trust requests strong reporting from all teams so any learning from outcomes can be captured.

It was RESOLVED to RECEIVE the Integrated Performance Report (IPR).



#### MC/24/15 Focus on item: Biennial evaluation (agenda item 7)

(Presentation)

Andy Lister (AL) informed Members' Council that the Biennial survey is a 2-yearly process, and reported a survey was sent to all governors about Members' Council meetings and how to make them more effective.

AL said the questions will need to be reviewed for the next survey, and he will do this via the Members' Council Co-ordination Group.

## **Action: Corporate Governance Team**

AL explained 22 out of 31 governors responded to the survey with a breakdown of 13 public governors, 3 staff governors and 6 appointed governors. AL explained the presentation will focus on the issues where 5 or more governors have responded and to look at key issues and possible solutions.

Mandy Rayner said there was a high response to the survey and thanked governors for contributing to this piece of work.

#### Question:

Governors can confidently describe the current key areas of concern / risks within the Trust. MR said there is a proposal to arrange a development session for the Members' Council on the Board Assurance Framework and the Organisational Risk Register. AL said it would be useful for governors to understand how they both operate and what are the keys risks for the Trust.

BC said he was concerned about the amount of training governors are asked to attend. AL said we can build this in as a focus item for a future Members' Council meeting.

## **Action: Corporate Governance Team**

#### Question:

Governors to have an opportunity to influence the Trust's strategy and plans. MR explained Dawn Lawson and Dawn Pearson will be holding a session after the Members' Council meeting (23/02/24) for governor input in the Trust strategy refresh.

BC asked whether governors could affect strategy.

MR said Dawn will be attending the session today for governors to engage the strategy. Dawn Lawson she will be speak about the mechanism for doing this.

## Question:

Governors have had sufficient information and opportunity to ask questions about the appointment of Non-Executive Directors

MR said this is included in the training available to governors, the process only occurs once every six years and governors may have opportunity to be fully involved in the process through the Nominations Committee and stakeholder groups.

### Question:

Governors have had sufficient information and opportunity to ask questions about setting remuneration of the Non-Executive Directors and Chair.

MR explained that the Trust took the decision in 2019 to align to the NHS England pay structures for the Chair and the Non-Executive Director remuneration. MR said governors will continue to receive updates.



#### Question:

Governors have had sufficient information and opportunity to ask questions about the appointment of the Chair.

Training is available to governors and the process only takes place once every six years, governors will be fully involved in the process through the Nominations Committee and the stakeholder groups.

#### Question:

Governors have had sufficient information and opportunity to ask questions in relation to the review of the Trust's Membership Strategy

MR explained the membership strategy is currently under review as it is refreshed every three years. Governors will be consulted as part of this process in the strategy refresh session at the Members' Council meeting today.

JL reported he had an engagement meeting yesterday and he was delighted that governors have now got an engagement event planned with Wakefield Young Lives on the 3 April 2024. He explained the first Members' Council newsletter will go out to all Members by the end of March 2024.

MR said governors provided a list of comments in relation to the effectiveness of the Members' Council meetings and some of the actions are;

- Governors require training on their roles and what constitutes effective and appropriate challenge.
- The papers are too long.
- The meetings are long.
- There should be a summary sheet for each agenda item.
- New governors should have training on the composition of the Trust Board, governance, Quality, Finance and Trust priorities.
- Posted documents sometimes arrive too late.
- Presentations for the governor Q&A sessions should be circulated to governors before the meeting to allow for further comment and discussion before the session.

AL said the comments are valid and a formal action will be created which will be reviewed via the Members' Council Co-ordination Group.

## Action: Corporate Governance Team

BC requested if staff could refrain from using acronyms in the papers.

Staff will also avoid using acronyms but as an extra assurance the governor's handbook does have a list of acronyms in the back of the document.

#### Question:

The Members' Council meeting should be accessible to everyone.

JL highlighted that the Annual Members' Meeting is accessible to everyone as it is broadcast live on YouTube and is also available to view on the Trust website. He explained staff take into consideration public transport routes and accessibility to the building when booking the venue. JL said the last venue was in Kirklees and the one previous to that was in Barnsley town centre.

AL said the link to the You Tube channel was advertised very well externally and he feels this could have been advertised equally as well internally to the Members' Council as well.



#### **Action: Corporate Governance Team**

#### Question:

Governors are able to communicate the views of Members and stakeholder organisations they represent to the Members' council.

Governor feedback to Members' and stakeholder organisations issues following a Members' Council meeting.

JL said the majority are involved in the community. He asked governors if they wanted any help and support in this area.

#### Question

Governors understanding of the role of the Senior Independent Director

A description of key roles relevant to the Members' council can be found in the governor handbook.

MBu said NEDs also have an important role in the Chair's appraisal process and the feedback they provide.

The roles governors felt they needed to develop and improve the way they work with are; Lead governor Deputy lead governor Staff governor Appointed governor Non-Executive directors Executive directors

Lead governor/ Deputy lead governor: JL informed governors they can contact him and Claire Den-Burger Green (CDBG) if they wish to know about his role and responsibilities and this is also described in the governors handbook.

Staff governor/ Appointed governor: JL encouraged public governors to contact staff and appointed governors if they wanted to find out more about their role and to also read the section in the governors handbook.

BC said it seems the virtual governor only meetings worked in silos and asked whether there was a solution to this so governor can hear each other's views. He said as a public governor he doesn't liaise with the staff governor.

JL agreed and said he will look to develop the virtual meetings. He said they were originally set up for place based governors, but he was open to other suggestions.

### Action: John Laville, Lead Governor

Non-Executive and Executive Directors: JL said governors can observe Trust Board Meetings and Trust Board Committee meetings. He informed them that there are also the monthly governor Q&A sessions which is aligned to a Trust Board Committee. AL explained that the Trust Board meetings can be lengthy and there is an option for governors to attend a part of the meeting.

#### Question:

Governors were asked if they have had an induction meeting with the Chair and there were up to 5 governors who said no.



The corporate governance team will be reaching out to all governors again to ensure everyone has had an induction.

#### Question

Governors were asked if they have had an annual review / appraisal meeting with the Chair.

MBu said she has spent up to a week meeting with all governors as part of their review and asked whether there was another way to review this piece of work. MBu said if this was done annually then this would mean appraising up to 35 governors.

AL explained that the corporate governance team will review this process.

#### **Action: Corporate Governance Team**

#### Question:

Governors were asked if they had attended training events e.g. development sessions and / or Governwell courses.

A new training guidance document is being developed to help governors understand which courses may be useful at different stages of their three-year term. It is strongly recommended that all governors attend the Governwell course in their first year.

AL explained the team will review how we can make the meetings accessible. For example putting the recordings online.

**Action: Corporate Governance Team** 

AL highlighted that the survey was very long and this will be reviewed for the next effectiveness survey.

**Action: Corporate Governance Team** 

JL informed governors that the outcome from this survey will be merged with the action points from the November Members' Council meeting to create an action plan which will be managed by the Members' Council Co-ordination Group.

**Action: Corporate Governance Team** 

JL explained that all governors can contribute to the Members' Council Co-ordination Group. MBu thanked JL and MR.

It was RESOLVED to RECEIVE the outcome of the biennial evaluation.

#### MC/24/16 Strategy refresh – update (agenda item 8)

Dawn Lawson (DL) informed the Members' Council about the Trust strategy refresh and highlighted that the governor feedback was important about what the Trust is doing well and what the Trust needs to do to improve. DL said there is an advisory group with representatives from different staff groups where there is also a governor representative.

DL explained the strategy refresh is an 8 week engagement period and there are lots of opportunities to take part. DL said we need to also refresh our digital strategy as well as the Trust Equality, Involvement and communication membership strategy and the development



of the clinical strategy therefore it is much broader. DL said there are a range of different ways that staff and governors can engage with the team.

DL said the strategy will be a medium and long term plan and an opportunity to think about what level of ambition and what is the Trust appetite for risk.

DL said the clinical strategy is a big part of the consultation and what modern healthcare looks like. She said through this process her team will triangulate the themes and bring it all together.

## Key highlights;

- Using existing insight what we already know
- Workshops across the Trust and an online/ paper workforce survey
- Direct conversations with Governors and members council
- Over 2,300 members to be invited to respond
- Promote to voluntary and community sector umbrella organisations 200 groups in each of our places
- Healthwatch to promote the conversation.
- Over 23 community assets supporting conversations which includes Connecting People, Engagement Champions and Community Voices
- Specific conversations with people who have a learning disability
- Targeted young people involvement through groups the Trust have built a relationship with as part of the membership approach.

DL informed governors that it would be helpful for them to engage with their members about this piece of work and through this the team will gather as much information as possible and create opportunities for discussion.

DL said there will be drop in sessions for staff and there will also be site visits across the inpatient areas which is being led by Laura Habib (LH), Organisational Development practitioner/ staff governor.

DL explained there is an online and paper survey and there is also a staff app which will enable more people to participate.

DL said recent feedback from staff have said that it was a nice opportunity for them to be heard at the engagement session. DL said the team is looking to standardise feedback forms, equality monitoring forms and look at where the gaps are present. DL said there are also resources for people to run their own workshops.

DP welcomed governor feedback and asked for thoughts on the following key areas;

How can the Trust involve and include people

Digital technology

Improving clinical care

It was RESOLVED to RECEIVE an update to the Trust Strategy refresh.



## MC/24/17 Closing remarks and annual work programme (agenda item 9)

Governors agreed with the work programme 2024/25 subject to the change on the Quality Indicator.

BC asked to expand the titles on the work programme and to change the layout to landscape rather than portrait.

**Action: Corporate governance team** 

It was RESOLVED to APPROVE the work programme for 2024/25 with the noted amendments.

MC/24/18 Any Other Business (agenda item 10)

None.

It was RESOLVED to NOTE any other business.

MC/24/19 Next meeting of the Members' Council and future meeting dates (agenda item 11)

Wednesday 15 May 2024, AM, Hybrid (venue to be confirmed)

It was RESOLVED to APPROVE the dates of the Members' Council meeting.

12.30 - Close of public meeting