Minutes of the Members' Council meeting
7 May 2025, 10.10 – 12.45

Hybrid meeting
Microsoft Teams and Fieldhead Hospital, Ouchthorpe Lane, Wakefield

Present:	Marie Burnham (MBu)	Chair
	Claire Den Burger-Green (CDBG)	Public – Kirklees
	Daz Dooler (DD)	Public – Wakefield/ Deputy governor lead
	Amaina Elzoubir (AE)	Public – Wakefield
	John Laville (JLa)	Public – Kirklees (Lead Governor)
	John Lycett (JLy)	Public – Barnsley
	Valentina McParland	Public – Kirklees
	Bob Morse (BM)	Public – Kirklees
	Reini Schühle (RS)	Public – Wakefield
	Phil Shire (PS)	Public – Calderdale
	Keith Stuart-Clarke (KSC)	Public – Barnsley
	Nesar Rafiq (NR)	Public – Wakefield
	Sarah Leason – Hurley (SLH)	Staff – Social workers
	Ian Grace (IG)	Staff – Medicine and Pharmacy
	Elaine Lane (EL)	Staff – Allied Health Professionals
	Warren Gillibrand (WG)	Appointed – University of Huddersfield
In attendance:	Anne Magee (AM)	Staff – Staff side
	Christine Brereton (CB)	Interim Chief People Officer
	Gary Ellis (GE)	Non-executive director
	Margaret Kitching (MK)	Non-executive director
	Adrian Snarr (AS)	Executive Director of Finance, Estates and Resources
	Darryl Thompson (DT)	Chief Nurse and Director of Quality and Professions
	Professor Subha Thiyagesh (ST)	Chief Medical Officer
	Izzy Worswick (IW)	Assistant director of corporate governance
	Andy Lister (AL)	Head of Corporate Governance / Company Secretary
	Gemma Lockwood (GL)	Corporate Governance Manager (author)
	Debbie Beynon-Fisher (DBF)	Corporate Governance Officer
Members' Council Apologies:	Cllr Geraldine Carter (GC)	Appointed – Calderdale Council
	Andrea McCourt (AMc)	Appointed – Calderdale and Huddersfield NHS Foundation Trust
	Rosie King (RK)	Public – Wakefield
	Stephen Baines (SB)	Public – Calderdale
	Helen Dale (HD)	Staff – Nursing support
	Daniel Goff (DG)	Public – Barnsley
	Leonie Gleadall (LG)	Staff – Non-clinical support
	Jacob Agoro (JA)	Staff – Nursing
	Melanie Mott (MM)	Staff – Psychological Therapies
	Susan Spencer	Appointed - Barnsley Hospital NHS Foundation Trust
	Sara Javid (SR)	Public – Kirklees
	Mike Ford (MF)	Non-executive director
	Erfana Mahmood (EM)	Non-executive director

	Natalie McMillan (NMc)	Non-executive director / Deputy Chair
	Fatima Shahzad	Public – Rest of Yorkshire and Humber
	Emma Hall (EH)	Appointed – Mid Yorkshire Hospitals NHS Trust
Apologies:	Mark Brooks (MBr)	Chief Executive
	Adele Fox (AF)	Chief Operating Officer
	Dawn Lawson (DL)	Executive director of strategy, inclusion and change

MC/25/19 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 was being recorded to support minute taking, and that the recording would be deleted once the minutes had 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 requested to remain on mute, unless speaking.

MBu shared that David Webster's term as a Non-Executive Director had ended. She advised two new Non-Executive Directors had been recruited and a detailed paper would be presented later in the meeting.

MBu also advised that Jon Head had resigned from his post as Chief People Officer, and Christine Brereton (CB) had taken on the role of Interim Chief People Officer and Christine was welcomed to the meeting.

MBu advised John Laville (JLa), Lead Governor, had been re-elected as Governor for Kirklees and would remain in post as Lead Governor. It was advised Keith Stuart-Clarke (KSC) had also been re-elected for Barnsley, Farida Ali elected as Public Governor for Kirklees and Amaina Elzoubir (AE) elected as Public Governor for Wakefield.

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

MC/25/20 Declarations of interest (agenda item 2)

Andy Lister (AL) explained the declarations of interest process and advised that each year, declarations of interest are received from Governors on the Members' Council. These are no longer available publicly but are available by request through Izzy Worswick (IW). AL advised that the Corporate Governance team will follow up on any outstanding declarations of interest with governors in line with the required timescales.

It was RESOLVED to RECEIVE the individual declarations from governors.

MC/25/21 Minutes of the previous Members' Council meeting held on 14 February 2025 (agenda item 3)

The minutes of the meeting held on 14 February 2025 were accepted as a true and accurate record.

It was RESOLVED to APPROVE the minutes of the Members' Council meeting on 14 February 2025 as a true and accurate record.

MC/25/22 Matters arising from the previous meeting held on 14 February 2025 (agenda item 4)

MC/25/15 To obtain more detailed financial information around the required £22m savings for the next Member's Council meeting. Adrian Snarr (AS) confirmed that a paper would be presented to the meeting to provide an update on the Trust's current financial position.

MC/25/14 - Adele Fox (AF) to review the discharge process for service users back into the community. It was advised that AF has overseen the discharge audit and would present a paper to the Quality and Safety Committee before bringing a further update back to Members' Council. JLa asked why the date for completion of this action was August and whether this could be brought forward. MBu confirmed that the paper has been completed within the timescale and would be presented to Quality and Safety Committee first, as part of the assurance process. AL added that the paper was scheduled to be presented to the Quality and Safety Committee on 13 May 2025 and could be circulated to Members' Council via email in May 2025. Once circulated, governors would have the opportunity to provide feedback via the Corporate Governance team. Darryl Thompson agreed to speak with AF regarding the audit process and discuss it further with the Quality and Safety Committee.

Action – Darryl Thompson

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

MC/25/23 Chair's report and feedback from Trust Board (agenda item 5)

MBu explained that the report provided a summary of the Chair and Non-Executive Director focus and activity since the last meeting in February.

MBu highlighted that the news that NHS England will be abolished, and of structural changes to the NHS which will affect a lot of colleagues.

MBu advised that the latest Shadow Board programme had concluded and been really successful with plans to continue the programme in the future.

MBu reported that the long service awards and Excellence awards had taken place. She explained this was a fantastic event which recognised the achievements of staff. Claire Den Burger-Green (CDBG) advised that it had been noted in the Governor pre-meeting that none of the Governors (with the exception of the Lead Governor) had been invited to the Excellence awards this year, when they had in previous years, and Governors had not been aware that the event was happening. MBu advised that she was unaware that the Governors had not been invited. It was agreed that IW would speak to the comms team to find out why.

Action – Izzy Worswick

JLa advised that previously, if Governors had been involved in the judging process, they would be invited but on this occasion no Governors had been invited. Elaine Lane (EL) advised that she had expressed an interest in attending the awards.

MBu explained that the awards were different this year due to the financial constraints including having the event sponsored, and the Board providing funding for drinks.

MBu highlighted the activity of the Non-Executive Directors and the breadth of work they undertake. MBu reminded the group that Governors have the opportunity to observe committees and meetings.

MBu passed on thanks to staff and service users who have attended Board meetings to share stories which is an important part of the agenda.

Nesar Rafiq (NR) queried if there could be a section in the Chair's report which takes responsibility for key issues for example waiting lists and explain what is being done to address these. MBu explained that, in her role as Chair, her job is to ensure oversight of the Trust Board and that Non-Executive Directors deliver their objectives. MBu added that the Chief Executive's report would cover items such

as waiting lists, which are a national problem, and the Integrated Performance Report would cover other operational matters.

NR added that it would be good to explain to the public that waiting lists are a national problem and not specific to the Trust, who are doing everything possible to improve.

Bob Morse (BM) reported on page 28, the report refers to four key issues which are highlighted but not actually highlighted. Izzy Worswick (IW) advised there was an issue with numbering within the report which would be rectified next time.

It was RESOLVED to RECEIVE the Chairs' report.

MC/25/24 Chief Executive's comments on the operating context (agenda item 6)

Adrian Snarr (AS) presented the report on behalf of Mark Brooks. He explained that NHS finances are a key topic at the moment nationally, locally and within the Trust. AS explained that there are significant financial constraints across the entire NHS and the Trust needs to demonstrate it is living within its means.

AS highlighted some points from the report including:

- The Government announced that NHS England will be abolished and absorbed into the Department of Health. The changes outlined to NHSE and DHSC are accompanied by a requirement to generate savings of 50% of the current costs.
- A process to clarify the roles of Integrated Care Boards (ICB) has been announced, with ICBs asked to make cost savings of 50%.
- Provider Trusts will be asked to reduce growth in corporate services by 50% which is causing some anxieties with staff. MBu clarified that cost growth over the last five years needs to be halved. AS confirmed that for the Trust this equates to approximately 30-35 whole time equivalents across support services.
- The Trust has a good track record and hit a break even position for the 2024/25 period, as well as meeting all other targets including capital.
- All NHS organisations have received the report around the Valdo Calocane homicides in Nottingham, and all Trusts have been asked to consider the report. With South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) being a mental health Trust, this is particularly relevant. The executive team had the opportunity to meet with the Chief Nurse of Nottinghamshire around lessons learned and what the Trust can learn from this.
- The staff survey results were very similar to last year which is positive. SWYPFT is a high performing Trust in terms of staff feedback, however it is recognised that there are some areas that need focus and that there is always room for improvement.
- There is a continued and increased focus on clinically ready for discharge with a number of patients delayed in the system due to not having appropriate housing or care packages in place to be able to be discharged. There is an increase in delays in some areas and service locations with ongoing work to better understand delays, whether the Trust are in control of this, or if there is work needed with partners.

Phil Shire (PS) asked what the impact will be on the Trust of losing 30-35 roles in corporate services. AS responded that the detail is being worked through at the moment with all executives having been engaged in a piece of work with a company called Meridian who have reviewed the corporate structure of thew organisation to identify areas of efficiency and focus.

PS queried why there has been such growth over the last five years that now needs to be reduced. AS explained that there was significant growth as a result of COVID which did not reduce as the impact of COVID reduced.

Anne Magee (AM) added that communications from the Trust have been good, and that everyone was being kept informed as to what is happening but that that there was anxiety amongst staff, especially with the message that work will be pushed down from the ICBs into Trusts, and what this will look like. AM stated that staff are anxious about numbers being cut but work being increased.

Margaret Kitching (MK) reiterated how important it is to protect front line staff with the growing complexities of service users the Trust is working with, but also to consider the corporate staff who keep admin work away from front line staff in order to be able to concentrate on clinical work.

John Laville (JLa) highlighted that good staff survey results must mean that staff trust the management of SWYPFT which is paramount, especially in difficult times.

AS reported that there is currently a Value for Money programme running within the Trust with eight key areas of focus.

AS explained that the government have set financial targets including reducing agency usage by 30%, bank usage by 10% and achieving a break even plan.

Daz Dooler (DD) asked if taking on Cheswold Park Hospital had affected meeting costing efficiency targets and AS responded that it hadn't. At the moment the Trust continues to receive support from NHSE for Cheswold Park Hospital.

Darryl Thompson (DT) gave a brief update on Cheswold Park Hospital reporting that staff are working hard to ensure that Cheswold Park is running safely with a high level of quality. NHSE do have oversight of services and the Care Quality Commission (CQC) visit regularly to speak with service users and staff as well as undertake Mental Health Act visits.

DT reported that service users are completing their care pathways and inpatient numbers are up to 71 Feedback from the CQC is that SWYPFT is an open and responsive organisation and they have no concerns about care or services. DT confirmed that NHSE have invited the Trust to submit a case to step down their oversight.

Gary Ellis (GE) reiterated that the Trust achieved efficiencies £20.6m last year with the challenge being that savings need to be recurrent.

PS advised that the Members Council Quality Group held their last meeting at Cheswold Park and agreed that there would be another visit in a year's time. The group were impressed with the work taking place, recognising a lot of work to support integration and improvement is required. PS reported that staff seemed excited to be part of SWYPFT and that he wanted to reflect how impressed the Quality Group had been with the services they at seen at Cheswold Park.

It was RESOLVED to RECEIVE the Chief Executive's comments on the operating context.

MC/25/25 Members' Council business items (including annual items) (agenda item 7)

MC/25/25a Appointment of Non-Executive Directors (agenda item 7.1)

The appointment of Non-Executive Directors' paper was taken as read and outlined the recruitment process. Christine Brereton (CB) confirmed that following a successful recruitment process, the recommendation from the Nominations Committee was for Members' Council to approve the appointment of two Non-Executive Directors, Martin Neeson and Rokaiya Khan.

Members' Council approved both appointments and MBu confirmed that Martin Neeson will take up the post in June 2025 and Rokaiya will replace Erfana Mahmood, taking up the post at the end of Erfana's term in August 2025.

In relation to both appointments, AL advised that the fit and proper person process had begun.

It was RESOLVED to APPROVE the Appointment of Non-Executive Directors.

MC/25/25b Appointment of Deputy Lead Governor (agenda item 7.2)

MBu introduced the item and handed over to Andy Lister (AL) to present. Daz Dooler (DD) was asked to leave the meeting for the item.

AL explained that two nominations were received for the role of Deputy Lead Governor which were discussed in Nominations Committee with the Committee agreeing to recommend Daz Dooler for the role to be ratified at Members' Council. Members' Council approved the appointment of Daz Dooler.

It was RESOLVED to APPROVE the Appointment of Deputy Lead Governor.

MC/25/25c Audit Committee Terms of Reference (annual item) (agenda item 7.3)

AL advised that as part of Good Governance for Provider Trusts it was stipulated that Members' Council should receive the Terms of Reference for Audit Committee.

AL highlighted the Terms of Reference have been updated to reflect the following:

- Receipt of a bi-annual update on the Trusts compliance with the accessible information standard (AIS)
- Review of the Trust's approach to Freedom to Speak Up including receiving at least 2 reports every year, one of which should be the annual report, from the lead Freedom to Speak Up Guardian.
- Receipt of the Freedom to Speak Up Strategy and action plan and review in detail of relevant performance indicators.
- Monitoring of clinical audit via the Quality and Safety Committee
- In line with the Trust Treasury Management Strategy and Policy receives regular updates to on treasury management and interest receivable to provide assurance of appropriate management.

It was RESOLVED to RECEIVE the Audit Committee Terms of Reference.

MC/25/26 Focus on item: Quality Assurance System (agenda item 8)

DT introduced Lauren Melling and Liam Redican to the meeting to present the focus on item relating the Trustwide Quality Assurance System (QAS).

Lauren Melling (LM) introduced herself as the Team Manager for the Quality Governance Team who oversees the Quality Assurance System which is a framework that triangulates data, information and feedback to provide an oversight of quality and culture across Trust Services.

LM presented a series of slides outlining the system and the processes behind it. A dashboard is currently in production which will present data in real time to help identify any areas of concern and provide assurance that teams are performing well. LM explained that Quality Walkarounds are part of the system which are a proven intervention that focus on open and transparent communication and allow service users and staff to provide feedback and highlight any areas of concern.

LM went on to explain the principles of QAS and collaborative working to ensure teams feel supported and enable early identification of any areas of concern. LM explained the three QAS levels and how these are implemented.

LM took the group through the milestones to be celebrated in the development of the QAS and thanked Governors and Non-Executive Directors who have been involved so far in helping to this achieve these. LM highlighted the positive feedback that has been received which included 100% of respondents feeling the walkarounds were beneficial.

LM highlighted the next steps for the Quality Assurance System including launching the toolkit across the Trust which will be finalised and published in March 2026.

MBu congratulated the team for the implementation of an internal assurance system of quality and asked if there were any areas that might be hard to pick up on from the QAS. Liam Redican (LR) answered that one challenge would be how the system is used to identify any closed cultures, where soft intelligence and real time feedback will be used to gain additional insight.

MK explained that the key to the dashboard is the real time information, for example if Freedom To Speak Up issues are raised they can be addressed straight away with focussed assurance visits to those areas.

John Lycett (JLy) expressed thanks for the presentation and highlighted that the quality walkarounds he attended have been professional and well received with the system being a positive addition to the Trust.

Claire Den Burger Green (CDBG) reiterated that this system should negate any surprises when the CQC carry out their inspections. CDBG added that it would be helpful to have figures to go with the statistics as 100% of respondents could be just one person. The team agreed to add in figures going forwards and DT confirmed that these will be added in future reports.

DT highlighted that the culture aspect is key and will help make sure the system is embedded in the Trust and ensure staff feel comfortable to speak up and communicate with managers and colleagues.

Subha Thiyagesh (ST) advised that she attended one of the first evening walkarounds at Cheswold Park Hospital, which was a great experience and reiterated how important it is to be able to observe culture first hand. ST reiterated that the walkarounds are well organised and collect a great amount of useful data.

JLa gave thanks for the presentation which put the quality walkarounds into context. JLa confirmed that he had been on a couple of walkarounds and highlighted that in his visits there had been no contact with carers and that it was important to seek carer feedback. JLa added that specific people could be selected to speak to people carrying out the walkarounds. However, JLa stated that the walkarounds did feel “closer to the action” than quality monitoring visits.

MK advised that one of the changes with the new system was access to staff and patients and added that it was important to meet with “experts by experience”.

MK added that carers have been involved in visits. Whether carers are involved can be affected by the timings of the walkaround and availability of carers. LR added that evening walkarounds were introduced to have access to a wider range of people.

AM asked how often feedback is fed back to the relevant teams and LR advised that there is a written report after each walkaround which is fed back to the team during a meeting.

CDBG asked if there are different avenues for people to speak up with any concerns within the Trust. DT responded that the Freedom To Speak Up Guardian is a small part of the approach, with people able to speak up with managers, colleagues or anyone in the organisation. The Guardian role is an additional option. DT reiterated that there are also anonymous routes for people to speak up.

CDBG advised that the CQC offer remote conversations alongside physical visits and asked if this would be offered to staff, carers, service users etc as part of the Trust approach? MK confirmed that remote conversations are ongoing for staff and service users who do not attend sites.

MK reported that 34 quality walkarounds were carried out last year out of more than 230 services. MK added that every service area will have a routine walkaround, some without Executives or Governors but will have a peer review, to enable a service visit sooner and to collect data, which will mean every service will receive an annual visit. Any visit that highlights concerns or the need for a more intensive visit will then receive one.

It was RESOLVED to RECEIVE the Quality Assurance System.

MC/25/27 Members' Council Business Items continued (including annual items) (agenda item 9)

MC/25/27a Quality monitoring visits annual report 23-24 (annual item) (agenda item 9.1)

DT asked for the report to be taken as read and advised that the report is being presented to Members' Council later than expected from the workplan. Future reports will be the Annual Report of the Quality Assurance System.

It was RESOLVED to RECEIVE the Quality monitoring visits annual report 23-24 (annual item).

MC/25/27b Care Quality Commission (CQC) action plan (agenda item 9.2)

DT provided an update. He explained that most organisations have an open action plan in terms of the CQC, in response to inspections

DT highlighted a particular action from the CQC visit was the reduction in prone restraint and the Trust has reduced prone restraint by 43% over the past two years with an ambition to reduce to zero.

DT stated that the action plan was live document which is being continually updated and is regularly presented through Committee and Board.

It was RESOLVED to RECEIVE the Care Quality Commission (CQC) action plan.

MC/25/27c Quality Account Update (annual item) (agenda item 9.3)

DT explained that this was part of the required submissions and has been reviewed in Quality and Safety Committee and Members' Council Quality Group. The final draft will be presented to Committee again next week and devolved authority has been granted for the Chair and Chief Executive to sign off the report for publication by the end of June.

It was RESOLVED to RECEIVE the Quality Account Update.

MC/25/27d Appointment to Members' Council groups (to be taken as read and submit questions in advance) (agenda item 9.4)

AL explained that there is currently one vacancy in Members' Co-ordination Group for a Wakefield public Governor and comms would be sent out accordingly.

AL confirmed that Nominations Committee and Members' Council Quality Group have stipulations that the Deputy Lead Governor will attend which is now Daz Dooler following his election.

It was RESOLVED to RECEIVE the Appointment to Members' Council groups.

MC/25/27e Members' Council groups and Nominations Committee annual reports (annual item) (agenda item 9.5)

MBu asked for the paper to be taken as read and AL explained that updates from all meetings were included in the paper.

AL confirmed that each group had reviewed their Terms of Reference, Annual Report and workplan which has been submitted to Members' Council for approval as part of the governance process.

It was RESOLVED to RECEIVE and APPROVE the Members' Council groups and Nominations Committee annual reports, terms of reference and workplan.

MC/25/27f Members' Council elections – outcome (agenda item 9.6)

AL reported that the Members' Council Elections process occurred between 8 April 2025 and 30 April 2025. There were two positions in Kirklees, one in Wakefield, one in Calderdale, and one in Barnsley. Keith Stuart-Clarke (KSC) was re-elected in Barnsley. Amaina Elzoubir (AE) was elected as the new Governor for Wakefield. In Kirklees, there were four nominations for two seats; JLa was re-elected along with Farida Ali. One vacancy remains in Calderdale, so a mid-year elections will be considered later this year.

AL confirmed that Melanie Mott has resigned as Governor for Psychological Therapies and will step down effective from 27 May 2025. The Trust's constitution provides several options to address this vacancy, which will be reviewed with the Chair and Lead Governor.

It was RESOLVED to RECEIVE the Members' Council elections – outcome.

MC/25/27g Governor feedback (agenda item 9.7)

JLa explained that he had a conversation with a member of staff who mentioned that her service was under particular pressure with long waiting lists and had some vacancies for nurses which were taking a long time to fill due to process of advertising internally first and the extra scrutiny on recruitment. The staff member understood the processes but in the meantime reported pressures in the service where increasing.

DT explained that he sits on the Vacancy Review Panel and provided assurance that where there are roles in areas where there are high waiting lists and clinical pressure, and there is confidence that there are not the appropriate skills internally, these roles are supported for external recruitment.

JLa advised he had received a Healthwatch report for Calderdale and Kirklees and asked how the Trust use such reports. DT explained that Healthwatch reports form part of the insight reports which are collated by the Involvement Team and feed into the "you said, we did" approach within care groups.

JLa highlighted that he and CDBG were both members of the Kirklees Mental Health Carers Forum Group and discussed some of the feedback from the group in the pre-meet. He advised that he understood people don't tend to feed back when everything is going well but do when there are issues. He advised there are individuals who have come to the end of their clinical pathway in the Trust and discharged to primary care who may then feel unsupported.

AM confirmed that there is ongoing work into establishing the responsibilities of teams, the services they provide and how services cross over. There can be issues when a person has exhausted all services within the Trust.

CDBG gave an example of a service user who had been discharged from mental health services but could not get the appropriate medication from their GP who advised they needed the prescription from a psychiatrist.

Elaine Lane (EL) added that pathways and journeys could be better communicated to service users, with better terminology, in order to manage expectations in terms of what services and treatments are available and a timeline for their "journey".

Sarah Leason-Hurley (SLH) stated that no service user should feel unsupported. SLH confirmed that re-referrals from GPs were having a big impact on services for needs such as a prescription. This also causes delays for secondary care for people who really need it. SLH advised that services are looking into ways around this.

DD stated more understanding of what is available in the community is needed.

JLa raised that he felt that carers were not being involved sufficiently. JLa highlighted that communications could be improved by service users seeing the same person within a service every time. Chris explained that shift patterns for staff explained why services users sometimes saw different people and if this was the case it was communicated.

JLa fed back from a recent quality walkaround in North Kirklees Community Services, admin burden had been raised.

JLa reported that Warren Gillibrand (WG) asked if the current financial constraints will lead to a reduction in services and WG confirmed that his questions have been answered and he felt assured.

Valentina McParland (VM) asked if the Trust had single sex wards, if staff have single sex changing rooms, and if service users could request same sex care. MBu confirmed that single sex facilities and changing rooms are available.

It was RESOLVED to RECEIVE the Governor Feedback.

MC/25/27h Integrated Performance Report (to be taken as read and questions to be submitted in advance) (agenda item 9.8)

MK asked that the IPR be taken as read and highlighted the following:

- There are some areas of concern within improving care including risk assessments within 24 hours of admission, which is improving. There has been a negative impact on the implementation of a new care plan but patients who do not have a care plan are followed up individually.
- Clinically ready for discharge is an issue which is being picked up, with system discussions.
- In terms of Great Place to Work, there has been an increase in turnover, mainly due to a lot of fixed term contracts coming to an end.
- There has been a dip in mandatory training compliance with some targeted work to drive this up.
- The Trust is performing well on all quality indicators.
- Out of areas beds are up to five with an ambition to reduce to zero.
- In reference to safer staffer there is a large amount of work going into establishments reviews.
- Incident reporting remains within the expected range.
- In the national metrics, there has been significant improvements in paediatric audiology waits due to recruitment into the service.
- Sickness absence rates have improved which have improved the year to date average.

It was RESOLVED to RECEIVE the Integrated Performance Report.

MC/25/27i Governor Capacity (agenda item 9.9)

John Laville (JLa) explained that the work of the governors has increased over the years and presented a slide show highlighting this. In May 2020 there was a total of 13 opportunities to attend meetings which has increased to 95 in 2025.

JLa added that as well as an increase in the number of opportunities, the involvement and influence of governors has increased with governors having more of a voice. However, there are now more opportunities than governors can cover, with more on the way. JLa reiterated that Governors are

volunteers with their own lives and community commitments which leaves the question around what is reasonable and fair.

JLa presented a slide outlining the core requirements of a governor, highly recommended activities, recommended activities and what some governors feel is reasonable. JLa advised that the table will be sent to Governors to populate and reiterated that this is not set in stone and will help ensure that activities are shared out fairly bearing in mind what capacity individual governors have. EL added that the governors are diverse and will bring different strengths to different things

It was RESOLVED to RECEIVE the Governor Capacity.

MC/25/28 Closing remarks and annual work programme (agenda item 10)

It was RESOLVED to RECEIVE the annual work programme.

MC/25/29 Any Other Business (agenda item 11)

None.

MC/25/30 Teaching Trust Status (agenda item 12)

Subha Thiyagesh (ST) explained that In February 2023 the Trust's ambition to be recognised as a Teaching Trust was shared with Members' Council, to reflect the significant teaching, training and research work that the Trust does. Members' Council supported the continued work to progress to Teaching Trust status.

ST outlined the advantages of being a Teaching Trust, including attracting a high calibre workforce and students as well as strengthening applications for research and development funding.

ST explained that the Trust engaged with the University of Leeds in a four stage process. ST confirmed that the Trust has received confirmation from the University of Leeds that they have approved the application to be a recognised Teaching Trust, the first Mental Health Trust in the region to receive this status. This was confidential until joint comms could be agreed with University of Leeds.

ST outlined the next steps in the process which includes considering a name change for the Trust to incorporate 'Teaching', whilst adhering to NHS England guidance. The proposed new name is South West Yorkshire Partnership Teaching NHS Foundation Trust which will be subject to engagement and agreement with NHSE.

The University will
nominate a member of staff to be an Associate Non-Executive Director for the Trust. This process will be overseen by Nominations Committee, with recommendation to Members' Council for approval.

ST invited feedback from the Members' Council.
MBu reiterated how much of an achievement it is to have obtained Teaching Trust status.

Bob Morse (BM) mentioned that achieving Teaching Trust status feels like the Trust is entering a new period of growth which will enhance the Trust and the workforce it attracts.

Anne Magee commented that once the news is sharable it will be well received by staff as good news.

It was RESOLVED to RECEIVE the Teaching Trust Status.

MC/25/31 Future meetings of the Members' Council (agenda item 13)

- Wednesday 13 August 2025 (hybrid – venue to be confirmed)

It was RESOLVED to APPROVE the date of the next Members' Council meetings.

Close of public meeting