

**Name of meeting: Council of Governors - Public**

**Date: Thursday 1 December 2022**

**Time: 5.05pm until 6.05pm**

**Venue: Meeting held virtually using Microsoft Teams**

### Agenda

	Lead	Time
<b>1 Apologies for absence</b> (verbal)	LP	5.05pm
<b>2 Declaration of any Conflicts of Interest</b> (verbal)	LP	
<b>3 Minutes of the previous meeting held on 1 September 2022</b> (enclosure)	LP	
<b>4 Matters arising</b> (verbal)	LP	
<b>5 Action Log</b> (enclosure)	LP	5.10pm

#### GOVERNOR FEEDBACK

<b>6 Issues and Questions from Communities</b> (verbal)	Governors	5.15pm
<b>7 Youth Views</b> (verbal)	AS	5.30pm

#### STRATEGIC CONTEXT

<b>8 Chair's Report</b> (enclosure)	LP	5.35pm
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#### QUALITY, SAFETY AND RISK

<b>9 Performance Report</b> (enclosure)	SI / MW	5.45pm
<b>10 Assurance Reporting</b> (enclosures)		5.50pm
<b>10.1 Audit Committee held on 7 July and 6 October 2022</b>	AC	

<b>10.2</b>	<b>Charitable Funds Committee held on 28 July 2022</b>	<b>MR</b>
<b>10.3</b>	<b>Finance, Business and Investment Committee held on 22 September 2022</b>	<b>MA</b>
<b>10.4</b>	<b>Mental Health Legislation Committee held on 22 September 2022</b>	<b>SL</b>
<b>10.5</b>	<b>Quality and Safety Committee held on 20 October 2022</b>	<b>AM</b>

## GOVERNANCE AND WELL LED

<b>11</b>	<b>Council of Governors Annual Work Plan</b> (enclosure)	<b>For information</b>	
<b>12</b>	<b>Any Other Business</b> (verbal)	<b>LP</b>	<b>6.00pm</b>
<b>13</b>	<b>Meeting Evaluation</b> (verbal)	<b>LP</b>	<b>6.05pm</b>

**The next public Council of Governors meeting will take place following the private meeting on:  
Thursday 2 February 2022, 5.10pm until 6.30pm**

**Council of Governors' Meeting held in **Public**  
 Wednesday 1 September 2022 at 5.10pm  
 Virtual meeting held on Microsoft Teams**

Agenda  
 item

**3**

<b>Present:</b>	<p>Dr Linda Patterson          Anne Scarborough          Dr Sid Brown          Tina Butler          Anne Graham          Hannah Nutting          Trevor Ramsay          Pamela Shaw          Joyce Thackwray          Jimmy Vaughan</p> <p>Andrew Chang          Gilbert George          Sue Grahamslaw          Michelle Holland</p> <p>Phil Hubbard</p> <p>Susan Ince          Tafadzwa Mugwagwa          Mark Rawcliffe          Helen Robinson</p> <p>Tim Rycroft          Kathryn Travis          Helen Verity          Mike Woodhead</p>	<p>Chair of the Trust Chair of the Council of Governors          Public Governor: Keighley / Lead Governor          Public Governor: Shipley          Appointed Governor: Bradford Assembly          Public Governor: Bradford West          Public Governor: Shipley          Public Governor: Bradford West          Staff Governor: Clinical          Public Governor: Bradford South          Public Governor: Keighley</p> <p>Non-Executive Director          Interim Director of Corporate Affairs          Corporate Business Manager (Secretary)          Deputy Director of People &amp; Organisational Development          Director of Nursing/Professions and Care Standards, and Deputy Chief Executive          Deputy Director of Performance and Planning          Interim Chief Operating Officer          Non-Executive Director          Corporate Governance Manager and Deputy Trust Secretary          Chief Information Officer          Corporate Governance Facilitator          Fundraising Officer          Director of Finance, Contracting and Estates</p>
<b>Observers:</b>	<p>Dr Beverley Fearnley          Catherine Schofield</p>	<p>Deputy Director of Patient Safety, Compliance and Risk          Allied Health Professions Lead</p>
<b>Apologies:</b>	<p>Alyson McGregor          Maz Ahmed          Therese Patten          Carole Panteli          Abdul Khalifa          Zahir Irani          Linzi Maybin</p>	<p>Non-Executive Director          Non-Executive Director          Chief Executive          Deputy Trust Chair          Staff Governor Non-Clinical          Appointed Governor – Bradford University          Staff Governor - Clinical</p>

## MINUTES

Item	Discussion	Action
<b>224</b>	<p><b>Welcome and Apologies for Absence</b> (agenda item 1)</p> <p>Linda Patterson (chair) opened the meeting noting apologies received.</p> <p>The meeting was quorate.</p>	
<b>225</b>	<p><b>Declarations of Interest</b> (agenda item 2)</p> <p>No declarations of conflicts of interest were made.</p>	
<b>226</b>	<p><b>Minutes of the Council of Governors' meeting held on 13 July 2022</b> (agenda item 3)</p> <p>The minutes of the public Council of Governors' meeting held on 13 July 2022 were agreed as a true and accurate record.</p> <p>Dr Brown, Public Governor highlighted the wording in the minutes of 13 July 2022 regarding tax evasion and tax avoidance. The Director of Finance, Contracting and Estates assured the processes were correct and offered a discussion outside of the meeting if required.</p>	
<b>227</b>	<p><b>Matters Arising</b> (agenda item 4)</p> <p>There were no matters arising.</p>	
<b>228</b>	<p><b>Action Log</b> (agenda item 5)</p> <p>There were no comments given in respect of the action log.</p>	
<b>229</b>	<p><b>Chair's Report</b> (agenda item 6)</p> <p>The Chair, Dr Linda Patterson introduced herself and gave a brief description of her previous experience. She informed the Council of Governors that she had been attending introductory meetings and familiarising herself with the Trust since commencing over the summer.</p> <p><b>The Council of Governors noted the update.</b></p>	
<b>230</b>	<p><b>Integrated Care System Update</b> (agenda item 7)</p> <p>The Interim Director of Corporate Affairs gave an update to Governors regarding the Integrated Care System established by legislation on 1 July 2022. He explained that the framework of integrated care systems would be place-based with decisions made at the front line in regard to community. Organisations would be set up within the ICB Framework. West Yorkshire's ICB included the Bradford &amp; Craven Partnership. The Interim Director of Corporate Affairs explained there was a lot of work required to bring the whole</p>	

Item	Discussion	Action
	<p>ICB together but it was noted that the West Yorkshire ICB was in a more advanced stage than others around the country which was positive.</p> <p><b>The Council of Governors noted the verbal update.</b></p>	
<p><b>231</b></p>	<p><b>Freedom to Speak Up Guardian Report</b> (agenda item 8)</p> <p>The Director of Nursing/Professions and Care Standards, and Deputy Chief Executive informed the Governors that Rebecca Wixey, Freedom to Speak Up Guardian had gone on maternity leave and that Joe Cohen would take over during this time to ensure visibility within the service. Mrs Hubbard highlighted that since the report had been written there had been an update from the National Guardian office and that would mean the freedom to speak up strategy and policies would need to be refreshed. It was noted that the change in policy would come into effect in December 2022 and that <b>a self-assessment would take place via a Board development session</b>, in conjunction with a discussion with the Governors also.</p> <p><b>It was noted this would be carried over to Decembers Meeting.</b></p>	<p>Corporate Governance</p>
<p><b>232</b></p>	<p><b>Performance Report</b> (agenda item 9)</p> <p>The Director of Finance, Contracting &amp; Estates stated that the report was consistent with reports seen over the last 6-12 months, confirming there were high service demands with increased acuity and workforce challenges, high levels of vacancies, difficulties in attracting and retaining staff and high sickness levels. Mr Woodhead advised that this was not unique and was relevant to most Trusts. Work would continue with Cygnet regarding the out of hours beds. Cloud-based sharing of care records was incoming.</p> <p>Trevor Ramsay, Public Governor sought clarification regarding the cost implications of sending service users out of the area with Cygnet hospitals placed in special measures.</p> <p>The Director of Finance, Contracting &amp; Estates advised that patients were only sent out of area when there was no local setting available. The Director of Nursing//Professions and Care Standards, and Deputy Chief Executive gave assurance that there were robust quality assurance checks in place in relation to Cygnet placements.</p> <p>The Medical Director also gave assurance that Bradford Cygnet was not used and service users were transferred to Harrogate or Darlington.</p> <p>The Chief People Officer and Director of Finance, Contracting &amp; Estates both confirmed that it was too early to tell if the incentive payments provided were making a difference but the Trust was on a level playing field with other NHS providers.</p>	

Item	Discussion	Action
	<p>Pamela Shaw, Staff Governor advised that work has been taken across the board with students, volunteers and retired people with a robust preceptorship programme in place. Engagement with the current workforce was good.</p> <p><b>The Council of Governors:</b></p> <ul style="list-style-type: none"> <li>• Considered the key points and exceptions highlighted and noted the actions being taken;</li> <li>• did not provide any further feedback regarding the content of the performance report.</li> </ul>	
233	<p><b>Audit Committee held on 7 July 2022</b> (agenda item 10.1)</p> <p><b>The Council of Governors welcomed the Audit Committee AAA Report. There were no items identified that required escalation.</b></p>	
234	<p><b>Finance, Business &amp; Investment Committee held on 28 July 2022</b> (agenda item 10.2)</p> <p><b>The Council of Governors welcomed the Finance, Business &amp; Investment Committee AAA Report. There were no items identified that required escalation.</b></p>	
235	<p><b>Mental Health Legislation Committee held on 21 July 2022</b> (agenda item 10.3)</p> <p><b>The Council of Governors noted the content of the Mental Health Legislation Committee AAA Report. There were no items identified that required escalation.</b></p>	
236	<p><b>Quality &amp; Safety Committee held on 21 July 2022</b> (agenda item 10.4)</p> <p><b>The Council of Governors noted the content of the Quality &amp; Safety Committee AAA Report.</b></p>	
237	<p><b>Feedback &amp; Questions from Governors</b> (agenda item 11)</p> <p>Anne Graham, Public Governor, raised a question in relation to Speech and Language Therapists and staff shortages, and could any insight be given regarding maternity leave and what could be learned to make more efficiencies and less pressure on teams and different ways to improve processes.</p> <p>Alyson McGregor, Non-Executive Director advised that nationally there was a shortage due to it predominantly being a younger female workforce meaning a particularly high number of people on maternity leave.</p> <p>The Director of Nursing//Professions and Care Standards, and Deputy Chief Executive responded advising that the Trust did over-recruit but there was a shortage nationally and creativity was needed around flexibility of contracts.</p>	

Item	Discussion	Action
	<p>Ms McGregor also pointed out that capacity issues in HR could impact on recruitment processes.</p> <p>No other feedback or questions were raised.</p>	
<b>238</b>	<p><b>Workforce – Staffing Update</b> (agenda item 12)</p> <p>The Chief People Officer presented the paper which informed the Council of Governors as to the Trust’s position in relation to implementing the NHS People Plan. The Model roster 3 piece of work had been implemented within mental health inpatients and would demonstrate the benefits and enhance patient experience and therapeutic opportunities within services.</p> <p>Growing the Trust’s workforce was developing the programme to take people from volunteering into career opportunities, delivering clear pathways and for service users again taking volunteers into employment. The Chief People Officer confirmed that the data for the leadership inclusion element had been successfully submitted in August and the annual staff survey was due to take place in October. With regards to better compliance the key area of focus would be the looking after our people agenda.</p> <p>In relation to the emotional, mental, physical wellbeing of the workforce initiatives were to be offered across the system to allow the independent and volunteer sector able to access those services offered traditionally only available within health partners and NHS partners.</p> <p>Tina Butler, Appointed Governor welcomed that the third sector would be given access to these.</p> <p><b>The Council of Governors noted the update.</b></p>	
<b>239</b>	<p><b>Youth Views</b> (agenda item 13)</p> <p>Anne Scarborough, Public Governor outlined the desire to involve young people in governance and Trust membership. A group of Governors and Trust staff were working Cathy Schofield and had connected with a number of youth groups within the NHS and within Bradford. A further meeting was scheduled for 5 September 2022. Mapping was taking place at present to see how the Trust could link in with youth workers, schools, and universities. More to be reported back in December once further meetings had taken place.</p>	
<b>240</b>	<p><b>Council of Governors Annual Work Plan</b> (agenda item 14)</p> <p><b>The Governors confirmed they had received the Annual Work Plan.</b></p>	

Item	Discussion	Action
241	<p><b>Management of Deferred Items</b> (agenda item 15)</p> <p>The Council of Governors noted the Deferred Items Log.</p>	
242	<p><b>Any Other Business</b> (agenda item 16)</p> <p>The Deputy Trust Secretary advised the Governors of the Annual Members Meeting due to take place on 15 September in person at the Victoria Hotel in Bradford. All Governors were encouraged to attend the meeting.</p> <p>Mrs Robinson then introduced Kathryn Travis as the new Corporate Governance Facilitator.</p>	
243	<p><b>Meeting Evaluation</b> (agenda item 17)</p> <p>It was noted that everyone had been open and honest and the meeting was a good balance and the papers had been produced in a very succinct way.</p> <p>It was questioned as to whether the chat function could be used more with someone able to monitor.</p> <p>The Chair thanked the Council of Governors for their time. The meeting was closed at 6.10pm.</p>	

**Signed:**

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**Dated:**

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Action Log for the Council of Governors Public Meeting from September 2022

Action Key	Green: Completed	Sky Blue: Update to be provided at meeting	Amber: In progress, not due	Red: Not completed, action due
Action Log Reference	Action (including the title of the paper that generated the action)	Person who will complete the action	Meeting to be brought back to / Date to be completed by	Update report - comments
1. 05/05/22	<p><u>Performance Report</u></p> <p>Director of Nursing, Professions and Care Standards and Infection Prevention and Control to consider whether information provided to the Partnership Safeguarding Board could be made available to Governors.</p>	Phil Hubbard	September 2022	<p>An update will be provided at the September meeting after the next Bradford partnership meeting, which had been postponed.</p> <p><b>Ongoing.</b></p>
2. 01/09/22	<p>A FTSU self-assessment would take place via a Board development session, in conjunction with a discussion with the Governors.</p>	Corporate Governance	December	<p>The next Board Development session is scheduled for 24 January 2023 and this will be among the topics covered.</p>

**Actions closed at the last meeting**

Action Log Reference	Action (including the title of the paper that generated the action)	Person who will complete the action	Meeting to be brought back to / Date to be completed by	Update report - comments
05/05/22-2	<p><u>Assurance Reporting</u></p> <p><b>Chief Operating Officer</b> to provide a written briefing on the 'no force first' approach to a future meeting.</p>	<p><b>Tafadzwa Mugwagwa</b></p>	<p>September 2022</p>	<p><b><u>Completed</u></b></p> <p>Presentation and update on implementation has been shared.</p>
13/07/22	<p><u>Action Log</u></p> <p><b>Corporate Governance</b> to share No Force First briefing from the Positive and Proactive Group provided by the Interim Chief Operating Officer</p>	<p><b>Corporate Governance</b></p>	<p>September 2022</p>	<p><b><u>Completed</u></b></p> <p>Briefing circulated to Council 19-21 July 2022.</p>
13/07/22	<p><u>Action Log</u></p> <p><b>Corporate Governance</b> to update action log, close and remove actions listed as completed.</p>	<p><b>Corporate Governance</b></p>	<p>September 2022</p>	<p><b><u>Completed</u></b></p>
13/07/22	<p><u>Imagine If ... Better Lives Wish List</u></p> <p><b>Director of Finance, Contracting &amp; Estates</b> to clarify there were no tax evasion concerns following an incident many years ago relating to volunteers' tax responsibilities.</p>	<p><b>Mike Woodhead</b></p>	<p>September 2022</p>	<p><b><u>Completed</u></b></p> <p>There are no tax evasion concerns, and there have not been any historical issues with this in relation to Gift Aid and the Better Lives Charity. Robust procedures are in place. We operate in accordance with the relevant laws and HMRC regulations, and we are subject to independent</p>

**Actions closed at the last meeting**

Action Log Reference	Action (including the title of the paper that generated the action)	Person who will complete the action	Meeting to be brought back to / Date to be completed by	Update report - comments
				external audit on an annual basis. The charity must also provide the relevant assurances to the Charitable Funds Committee.
13/07/22	<u>Youth Views and Issues</u>  <b>Corporate Governance</b> to share membership link for Governors to pass onto interested constituents, especially young people.	<b>Corporate Governance</b>	September 2022	<p style="text-align: center;"><b><u>Completed</u></b></p>

## Council of Governors - public

### 1 December 2022

<b>Paper title:</b>	Chair's Report	<b>Agenda Item</b>  <b>8</b>
<b>Presented by:</b>	Dr Linda Patterson OBE – Chair of the Trust	
<b>Prepared by:</b>	Fran Stead – Trust Board Secretary	
<b>Committees where content has been discussed previously</b>	Board of Directors – November 2022 Council of Governors Remuneration Committee, Nominations Committee November 2022	
<b>Purpose of the paper</b> Please check <b>ONE</b> box only:	<input type="checkbox"/> For approval <input checked="" type="checkbox"/> For information <input type="checkbox"/> For discussion	
<b>Link to Trust Strategic Vision</b> Please check <b>ALL</b> that apply	<input type="checkbox"/> Providing excellent quality services and seamless access <input type="checkbox"/> Creating the best place to work <input type="checkbox"/> Supporting people to live to their fullest potential <input type="checkbox"/> Financial sustainability, growth and innovation <input checked="" type="checkbox"/> Governance and well-led	
<b>Care Quality Commission domains</b> Please check <b>ALL</b> that apply	<input type="checkbox"/> Safe <input type="checkbox"/> Caring <input type="checkbox"/> Effective <input checked="" type="checkbox"/> Well-Led <input type="checkbox"/> Responsive	

<b>Purpose of the report</b>
Chair's Report to the Council of Governors on key activities that have taken place over the last quarter, and upcoming areas of interest for Governors to be aware of.

<b>Executive Summary</b>	
Chair's Report to inform Governors on relevant partnership engagement and developments, system and integrated care partnership working, and activities with the Trust's Council of Governors, staff, and Board of Directors.	
Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?	<input type="checkbox"/> <b>Yes</b> (please set out in your paper what action has been taken to address this)  <input checked="" type="checkbox"/> <b>No</b>

Recommendation(s)
<p>The Council of Governors is asked to:</p> <ul style="list-style-type: none"> <li>• note the partnership and engagement work that has taken place;</li> <li>• note the attendance at the 2021/22 Annual Members' Meeting;</li> <li>• note that further details on Non-Executive Director appointments will be discussed at the Part B Council of Governors meeting;</li> <li>• welcome the opportunity to take part in the Go See service visits;</li> <li>• welcome the opportunity to observe the Board of Directors meeting held in public, and the Board sub-Committee meetings; and</li> <li>• support the proposal for the Corporate Governance Team to act on Governors behalf to amalgamate the Council of Governors Nominations Committee, Remuneration Committee to support efficiencies, into a Nominations and Remuneration Committee.</li> </ul>

Relationship to the Board Assurance Framework (BAF)	
<p>The work contained with this report links to the following strategic risks as identified in the BAF:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> <b>SO1:</b> Engaging with our patients, service users and wider community to ensure they are equal partners in care delivery (QSC)</li> <li><input checked="" type="checkbox"/> <b>SO2:</b> Prioritising our people, ensuring they have the tools, skills and right environment to be effective leaders with a culture that is open, compassionate, improvement-focused and inclusive culture (WEC)</li> <li><input type="checkbox"/> <b>SO3:</b> Maximising the potential of services to delivery outstanding care to our communities (QSC)</li> <li><input checked="" type="checkbox"/> <b>SO4:</b> Collaborating to drive innovation and transformation, enabling us to deliver against local and national ambitions (Board)</li> <li><input type="checkbox"/> <b>SO5:</b> To make effective use of our resources to ensure services are environmentally and financially sustainable and resilient (FBIC)</li> <li><input type="checkbox"/> <b>SO6:</b> To make progress in implementing our digital strategy to support our ambition to become a digital leader in the NHS (FBIC)</li> </ul>	
<b>Links to the Strategic Organisational Risk register</b>	N/A
<b>Compliance &amp; regulatory implications</b>	<p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> <li>• Well-Led Compliance</li> <li>• Foundation Trust Code of Governance</li> <li>• NHS Act</li> <li>• Health and Social Care Act</li> <li>• NHS England / Improvement Appraisal Framework for the Chair's and Non Executive Directors</li> <li>• Nolan Principles</li> <li>• Provider Licence</li> </ul>

## **Council of Governors - public**

**1 December 2022**

### **Chair's Report**

#### Partnerships

Over the last two months I have been meeting with various stakeholders in order to introduce myself and to continue discussions on key issues. They include the following:

- Helen Hirst – Chair: Calderdale and Huddersfield NHS Foundation Trust
- Richard Barker – Regional Director: North East, Yorkshire and North West Regions, NHS England/Improvement
- Cllr Rizwani Jami – Chair: Health & Social Care Overview and Scrutiny Committee / Caroline Coombes – Scrutiny Committee Lead
- Rob Webster – Chief Executive: NHS West Yorkshire Integrated Care Board
- Cllr Sarah Ferriby – Portfolio holder for Healthy People and Places: Bradford Metropolitan Council
- Max McLean – Chair: Bradford Acute NHS Foundation Trust
- Sarah Muckle – Director of Public Health: Bradford Metropolitan Council
- Andrew Gould – Chair: Airedale NHS Foundation Trust
- Susan Hinchcliffe – Leader of Bradford Council (regular meetings)
- Kirsten England – Chief Executive of Bradford Council

I have also attended partnership meetings with West Yorkshire Community Trusts, Mental Health Trusts, the West Yorkshire Integrated Care System Partnership Board and Place based partnership meetings.

I will continue to report on any external meetings in future reports and welcome the opportunity for continued engagement with our existing and new partners.

In addition to this I have been on a visit to Lynfield Mount Hospital to support both my induction to the Trust and as part of the planned internal engagement work. I found this visit to be useful in seeing the facilities which need to be replaced, and to meet staff in Pharmacy. I have also visited the 0-19 Service, and the Dental Service. I was also fortunate enough to attend Daisy Bank to have my flu injection and Covid Booster and had the opportunity to engage with staff both attending and running the vaccination clinic. I have attended the long service awards.

During October, I was proud to attend a round table event at the House of Commons, chaired by Lord Crisp on Tackling Health Inequalities. The meeting was attended by some MPs and the shadow minister for Public Health Andrew Gwynne. We heard from researchers in Manchester University about the north-south divide in healthy lives and the reduced life expectancy of people in poorer communities. There are also increasing health issues with older people living alone. All these inequalities will be exacerbated by the cost of living crisis, and solutions need political will to tackle the underlying problems.

During November I attended Baby Week through Better Start Bradford, I was also invited by Dr Owen Williams OBE, Chief Executive at Northern Care Alliance, to an event exploring the role of NHS Chairs and Chief Executives in tackling health inequalities and geographical disparities in England. Finally, I will be attending the West Yorkshire Health and Care Partnership meeting with local authority leaders, Health and Wellbeing Board Chairs, Integrated Care Board Chairs and Non-Executives at the end of the month.

### Governor engagement and responsibilities

- Annual Members Meeting

On 28 September 2022 the Trust held its Annual Members' Meeting, to present the Annual Report and Accounts, and subsequent Quality Report for 2021/22. The External Auditors findings on the Report, an overview of the Trust's performance and future plans were also presented. We were delighted that 118 members joined us for the session, with seven Governors in attendance. The event was a celebration of the Trust's work during the last year, and provided an opportunity for members to raise questions with the Board of Directors. Consideration was also given to future developments, with presentations on the community Estates reconfiguration and the Trust's digital future. As part of the event, Linzi Maybin, Deputy Lead Governor presented an overview of activity that the Governors had undertaken on behalf of the members. Thank you to all Governors who were able to join the event.

- NED appointments

Following discussion by the Council of Governors Nominations Committee, and Remuneration Committee on 16 November 2022, a series of approved proposals will be presented to the Council of Governors private meeting on 1 December to seek formal ratification. This includes:

- NED/Audit Chair appointment
- substantive appointment of the Deputy Chair
- substantive appointment of the Senior Independent Director (SID).

On behalf of the Trust, I would like to thank Carole Panteli for undertaking the Interim Chair role; Andrew Chang for undertaking the Interim Deputy Chair role; and Simon Lewis for undertaking the Interim SID role following the substantive appointment of the Chair of the Trust taking place.

- Go See – service visits

As you know Governors are encouraged to attend Go See service visits, with the opportunity recently being rolled out again for Governors following the temporary restrictions that were put in place as part of the business continuity arrangements during the COVID-19 pandemic. Governors will recall that attending Go See service visits gives you the opportunity to observe the Non-Executive Directors (NEDs) undertaking their role, and to gain further information about the Trust's services. A programme of visits has been arranged for the remainder of the 2022/23 financial year, with further visits being scheduled for 2023/24. Details of the upcoming visits will continue to be shared with Governors by the Corporate Governance Team.

- Board of Directors and Committee meetings

There is the opportunity for Governors to observe public Board, and Committee meetings, chaired by our NEDs. All meetings are currently held using Microsoft Teams. Please contact

the Corporate Governance team [corporate.governance@bdct.nhs.uk](mailto:corporate.governance@bdct.nhs.uk) to arrange attendance. Attending will give you another opportunity to observe the NEDs undertaking their role, whilst supporting you to observe the discussion that takes place to give you a greater understanding of the Trust.

<b>Date of Meeting</b>	<b>Time</b>	<b>Meeting</b>
15 December 2022	09.30am - TBC	Quality and Safety Committee
12 January 2023	09.00am - TBC	Board of Directors – public meeting
19 January 2023	09.30am - TBC	Quality and Safety Committee
26 January 2023	09.30am – TBC	Finance, Business and Investment Committee
26 January 2023	1.00pm - TBC	Mental Health Legislation Committee

- **Nominations Committee & Remuneration Committee**

The Council of Governors is asked to consider a proposal for the Corporate Governance Team to act on Governor’s behalf to bring together the Council of Governors Nominations Committee, and Remuneration Committee into one Committee meeting (Nominations and Remuneration Committee). Whilst separate Committees have worked well in the past, Governors are asked to note that often the discussion items that are presented to one of these Committee’s will also be presented to the other Committee because of the specific duties that each Committee is responsible for. The proposal is to support efficiencies without compromising our robust governance arrangements. If Governors support the proposal for the Corporate Team to act on their behalf, a draft Terms of Reference for the Nominations and Remuneration Committee will be produced, based on the separate Terms of Reference documents that are currently in place for the Nominations Committee, and the Remuneration Committee. It is also proposed that all existing members of the Nominations Committee, and the Remuneration Committee will automatically become members of the Nominations and Remuneration Committee, on the basis that this is an existing agreement in place for existing work that is not being changed, simply amalgamated together for efficiency purposes.

**Dr Linda Patterson OBE FRCP**  
**Trust Chair**  
**November 2022**

**Fran Stead**  
**Trust Board Secretary**  
**November 2022**





Committees. Governors are also provided with a link to the full Board integrated performance report and data pack so they can access further detail if required.

In August, September and October 2022, high service demands have continued, compounded by workforce challenges, with high labour turnover, high levels of vacancies in some services, continued difficulties in attracting and retaining professionally qualified staff and sickness absence higher than pre-COVID rates. The COVID-19 pandemic has exacerbated waiting lists and waiting times for some community health services and mental health services. The Senior Leadership Team continues to oversee processes to manage and reduce waiting lists, including support for people who are waiting.

Seasonal pressures over winter are likely to be intensified by the ongoing impact of COVID-19. In September and November, the Board received updates regarding the Trust and Bradford District and Craven plans for winter 2022, including actions being taken to help address anticipated demand, capacity and workforce pressures and challenges.

Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?

- Yes** (please set out in your paper what action has been taken to address this)
- No**

### Recommendation(s)

The Council of Governors is asked to:

- consider the key points and exceptions highlighted and note the actions being taken.

### Relationship to the Board Assurance Framework (BAF)

The work contained with this report links to the following strategic risks as identified in the BAF:

- SO1:** Engaging with our patients, service users and wider community to ensure they are equal partners in care delivery (QSC)
- SO2:** Prioritising our people, ensuring they have the tools, skills and right environment to be effective leaders with a culture that is open, compassionate, improvement-focused and inclusive culture (WEC)
- SO3:** Maximising the potential of services to delivery outstanding care to our communities (QSC)
- SO4:** Collaborating to drive innovation and transformation, enabling us to deliver against local and national ambitions (Board)
- SO5:** To make effective use of our resources to ensure services are environmentally and financially sustainable and resilient (FBIC)
- SO6:** To make progress in implementing our digital strategy to support our ambition to become a digital leader in the NHS (FBIC)

<p><b>Links to the Strategic Organisational Risk register (SORR)</b></p>	<p>The work contained with this report links to the following corporate risks as identified in the SORR:</p> <ul style="list-style-type: none"> <li>• 2485: Reduced staffing levels in speech and language therapy core paediatric service due to vacancies</li> <li>• 2504: Waiting lists in memory assessment services</li> <li>• 2509: Community nursing services demand exceeding capacity</li> <li>• 2535: Staff wellbeing – 0-19 children’s services</li> <li>• 2598: Staff shortages in older people’s mental health services</li> <li>• 2609: Organisational risks associated with out of area bed use (finance, performance and quality)</li> <li>• 2610: Core Children and Adolescent Mental Health Service waiting list</li> <li>• 2611: Improving Access to Psychological Therapies waiting lists</li> <li>• 2620: Increased demand on speech and language therapy community adult service</li> <li>• 2648: Safeguarding team staff sickness</li> </ul>
<p><b>Compliance &amp; regulatory implications</b></p>	<p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> <li>• The NHS oversight framework describes how NHS England’s oversight of NHS trusts, foundation trusts and integrated care boards operates. Oversight metrics are used to indicate potential issues and prompt further investigation of support needs and align with the five national themes of the NHS oversight framework: quality of care, access and outcomes; preventing ill health and reducing inequalities; people; finance and use of resources; and leadership and capability.</li> </ul>

# Council of Governors Performance Report

## 1 December 2022 meeting

### Performance relating to August, September and October 2022

Combined impact of:

- **high service demands** - increased acuity and complexity;
- **workforce challenges** - with increasing labour turnover, high levels of vacancies in some services, continued difficulties in attracting and retaining professionally qualified staff, sickness absence remaining higher than pre-COVID rates and a higher proportion of long term cases relating to anxiety, stress and depression than before the pandemic.

## Winter planning

Seasonal pressures over winter are likely to be intensified by the ongoing impact of COVID-19. In September and November, the Board received updates regarding the Trust and Bradford District and Craven plans for winter 2022, including actions being taken to help address anticipated demand, capacity and workforce pressures and challenges. The Trust's winter plan builds on experiences and learning from previous winter periods, particularly the combination of COVID-19 and seasonal demands during the winters of 2020 and 2021.

# Workforce Dashboard (October 2022)

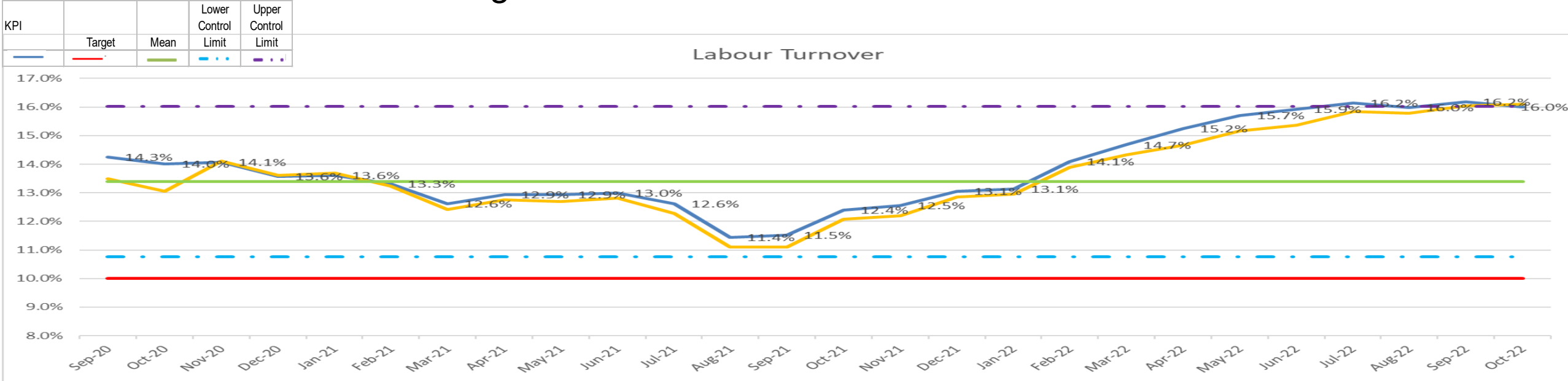
Metric	Goal & Action status		Current	Highlights/ Exceptions
Key Workforce Metrics – Recruitment Rate	10%		13.72%	Recruitment rate increasing from start of new financial year, now above target
Key Workforce Metrics – Sickness Rate	4%		7.10%	Sickness rate increased by 1% from September
Key Workforce Metrics – Labour Turnover	10%		16.00%	Labour turnover continues to be above target but has remained static since July
Key Workforce Metrics – Vacancy Rate	10%		12.85%	Vacancy rate increased in October
Mandatory Training Summary	80%		89.63%	Overall compliance remains above 80%
Appraisal Rates Summary	80%		57.92%	Appraisal compliance has dropped significantly due to a technical recording issue which has now been resolved
Clinical Supervision Rates Summary	80%		83.13%	Compliance rate has been consistently above target
<b>Safer Staffing</b> – Compliance Levels/ Heat Map/ Working Time Directive Breaches / Bank and Agency - Fill Rates/ Booking reasons	-		-	Fill rates and bank and agency usage remain high due to Specialising, COVID impact. Working Time Directive breaches still difficult to manage

# Workforce – Labour Turnover, Vacancy Rate, Sickness Absence



Bradford District Care  
NHS Foundation Trust

- **Recruitment, retention and wellbeing of staff** continue to be a key concern and focus.
- **Labour turnover** remains high.



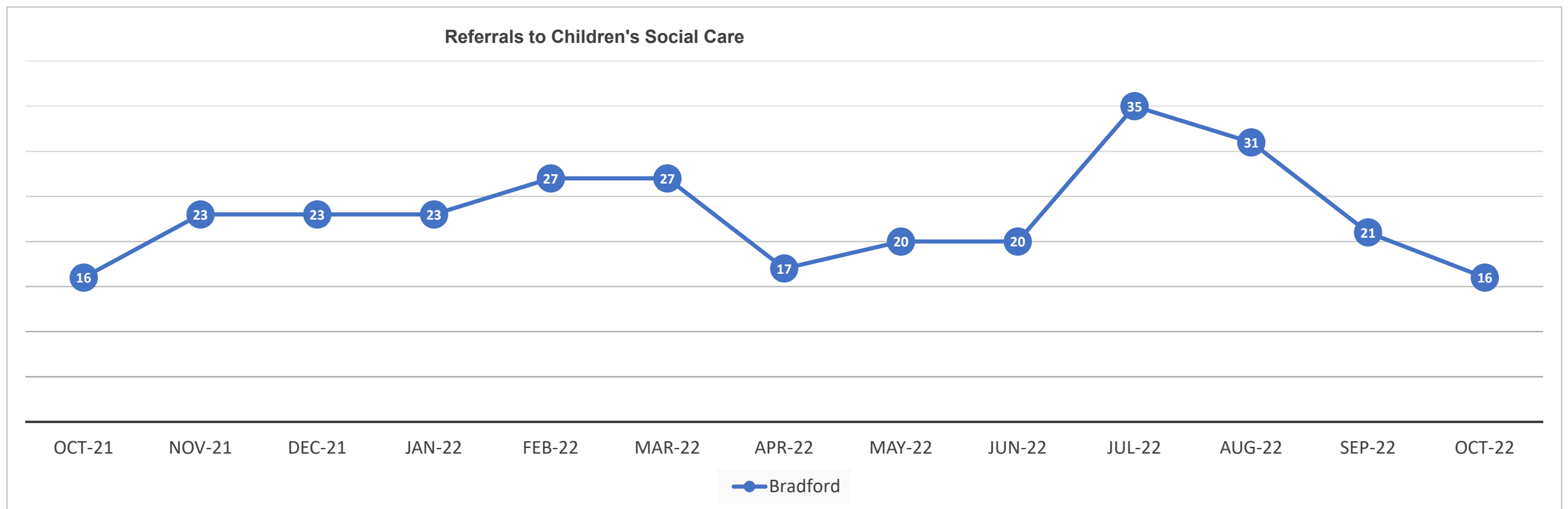
- **Vacancy rate** has increased to 12.85% in October 2022, against a Trust target of equal to or less than 10%.
- A hot spot area is **inpatient mental health services**, which has increased levels of sickness absence, coupled with high levels of vacancies (25.30%), particularly in professionally qualified roles. The Chief Operating Officer is leading work with system partners to consider actions that may be necessary to maintain service quality over the winter period.
- Areas of focus outlined in the Trust’s **Clinical Workforce Strategy 2021-2024** include reviewing the workforce skills mix, designing and developing new roles and maximising the benefits of digital approaches.
- There is extensive **health and wellbeing support** in place for all staff. Organisational development support and pastoral care is also an important component of the Trust and Bradford and Craven place plans for winter 2022/23.



# Quality and Safety

## Safeguarding Dashboard (October 2022)





Metric	Goal & Action status	Current	Average (rolling 13 months)
Safeguarding Adult Referrals	N/A	13	6.9
Safeguarding Children Referrals	N/A	16 (Bradford)	23.1 (Bradford)
Duty Calls regarding adults	N/A	114 (Bradford)	84.23 (Bradford)
Duty Calls regarding children	N/A	60 (Bradford)	53.4 (Bradford)





# Quality and Safety

## Incidents Dashboard (October 2022)

Metric	Goal & Action status	Current	Average
All incidents	N/A 	827	923.1
Violence & Aggression	N/A 	142	196.9
Medication Errors	0 	47	46.3
Near Misses	N/A 	5	19.5

# Patient Insight Report (October 2022)

## How do we monitor patient experience?

We ask service-specific questions to patients using each of our services

### The Friends and Family Test reports overall satisfaction

We present the positive answers to the question:

*Overall, how was your experience of our care?*  
as a percentage of all those responding

### The PX Score represents the patient experience

We ask questions about the experience of each of our services

Each response is scored on a scale of 1-100

The score is a composite measure representing  
all reported patient experience via Patient Connect

90

is our target for both measures

Scores need to be interpreted in context; Please check the volume of responses before drawing conclusions from scores.

## What do our patients say about the Trust as a whole?

### How did we do this month?

93.8%

FFT % positive

Overall, how was your experience of our care?  
'Good' + 'Very Good' as a percentage of those  
answering the FFT question

437

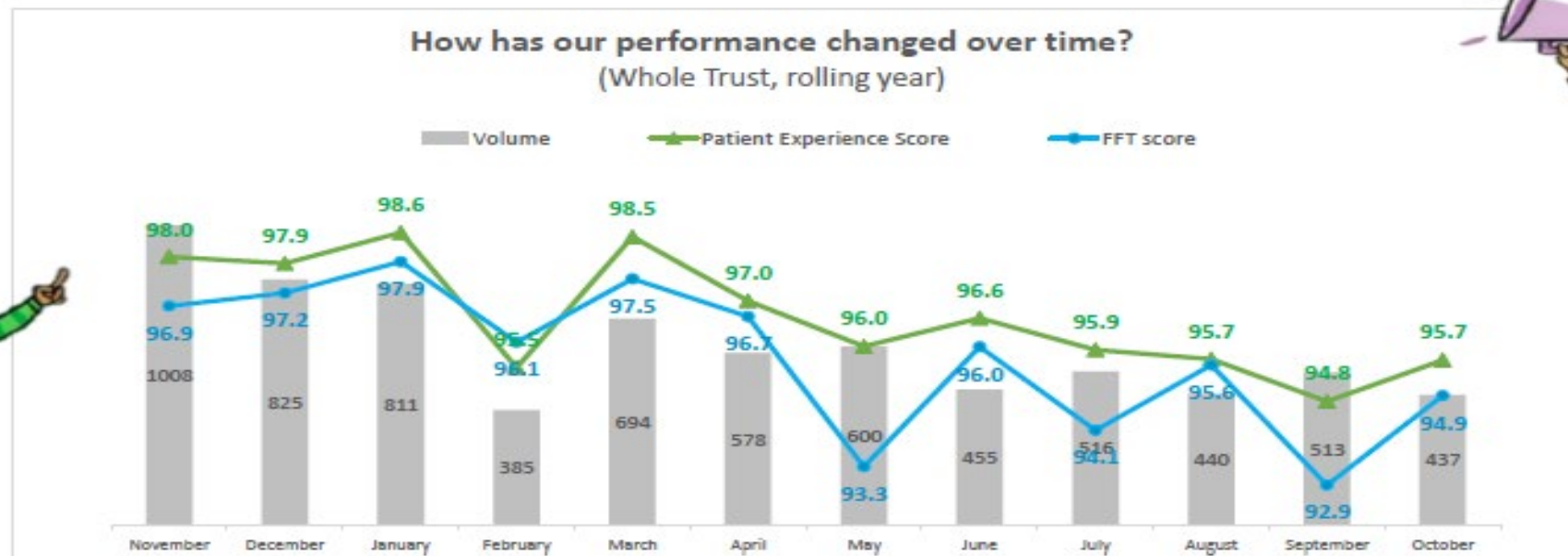
respondents  
to all questionnaires  
this month

95.7

Overall Patient Experience Score

Composite of all patient experience questions  
(where 100 = best answer, 1 = worst answer)  
all questionnaires

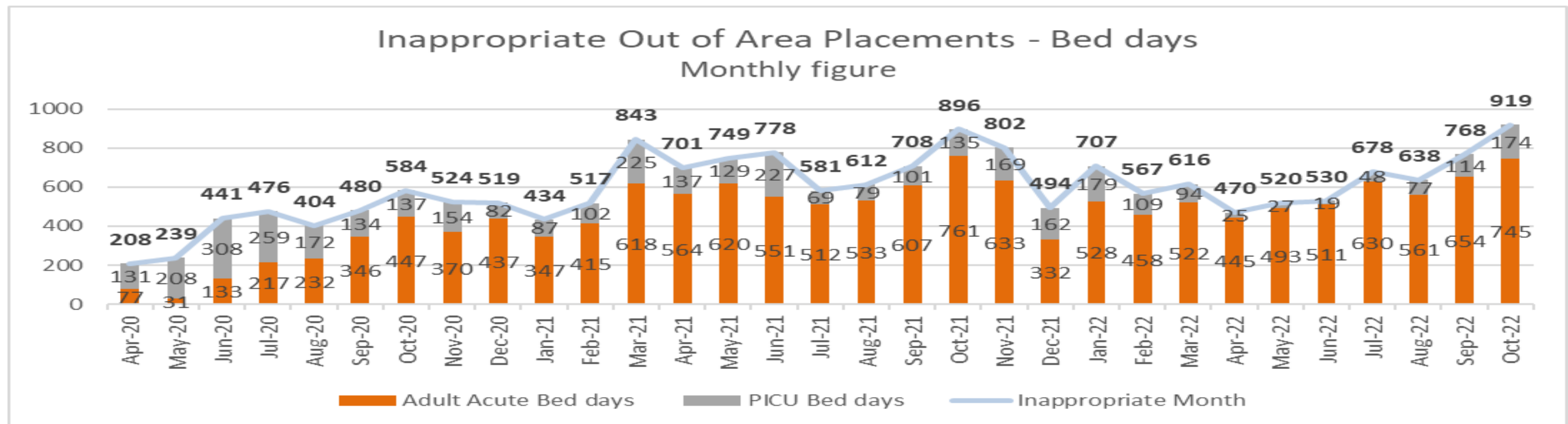
### How has our performance changed over time? (Whole Trust, rolling year)



# NHS Oversight Framework Metrics

## – Out of Area Placements

- Use of acute adult and Psychiatric Intensive Care Unit (PICU) out of area beds has continued due to a combination of reduction in bed capacity to support COVID infection prevention and control requirements for isolating and cohorting patients and acuity of service user presentation.



- The Trust has worked with an independent sector partner to block purchase beds, with a rigorous assurance framework to oversee quality and maximise capacity available.
- A workshop was held with Bradford and Craven place partners in mid October to address flow through mental health inpatient beds. Plans for the winter period include enhanced staffing in the Intensive Home Treatment Team to manage demand and extension of the hours of the bed management team service.
- However high acuity and complexity means that anticipated reductions in average length of stay are not likely to be achieved in 2022/23.

- Demand is rising for many services and capacity is being constrained through a combination of staff absence, vacancies and infection prevention and control measures.
- The Senior Leadership Team continues to oversee processes to manage and reduce waiting lists, including support for people who are waiting.
- Waiting times standards continue to be met in services including:
  - podiatry: non emergency pathways; nail surgery;
  - tissue viability;
  - MyWellbeing Improving Access to Psychological Therapies (IAPT) – referral to 1<sup>st</sup> treatment;
  - Child and Adolescent Mental Health Service (CAMHS) – referral to 1<sup>st</sup> appointment (assessment), referral to 2<sup>nd</sup> appointment (treatment);
  - early intervention in psychosis
- Waiting times have improved for children and young people with eating disorders, with 100% of cases (urgent + routine) meeting the national access standard in quarter 2.
- The main services where waiting times standards are not currently being met are:
  - community dental service: treatment under general anaesthetic; clinic services;
  - speech and language therapy: patients on non-emergency pathways; paediatrics;
  - continence: referral to appointment;
  - CAMHS: broader CAMHS pathways; neurodevelopment assessment;
  - MyWellbeing IAPT service: waits between 1st and 2nd appointments;
  - psychological therapies: community mental health services;
  - Memory Assessment and Therapy Service (MATS): referral to first appointment / diagnosis
  - Bradford and Airedale Neurodevelopmental Service: adult autism; adult attention deficit hyperactivity disorder.



## A note on the charts used in this data pack

Within this data pack there has been a concerted move to using Statistical Process Control (SPC) charts where this is the most appropriate way of visualising data. Where SPC charts are not deemed the most appropriate use of data, alternative charts and display mechanisms have been included. It is important to note that whilst the variation and assurance symbols are predominantly associated with SPC charts, we have taken the approach of standardising their use within this document across all data types to ensure consistency of language and approach. We have also included ‘action status’ symbols to highlight the current response to the data displayed in each chart.

Following is a description of the meaning of the symbols used throughout this document.

Variation			Assurance			Action Status			
Common cause – no significant change	Special cause of concerning nature or higher pressure due to (H)igher or (L)ower values	Special cause of improving nature or lower pressure due to (H)igher or (L)ower values	Variation indicates inconsistently passing and falling short of the target	Variation indicates consistently (P)assing the target	Variation indicates consistently (F)alling short of the target	Watching brief – continue to observe in order to better understand the current position	Improvement – continue actions to support improvement until steady state achieved	Deterioration or maintained under-performance – instigate or review actions to ensure drivers of current position are mitigated	Steady state – continue to monitor achievement of level of performance which is satisfactory, and which requires no intervention to maintain

**Escalation and Assurance Report**

**Report from: Audit Committee**

**Date of the meeting: 7<sup>th</sup> July 2022**

**Key discussion points and matters to be escalated from the discussion at the meeting:**

**Alert:**

- There were no issues identified that required escalation from the three meetings.

**Advise:**

- The internal audit team reported on a delay in commencing the 2022/23 programme. Changes to the internal audit plan were being discussed with management and the Audit Committee chair will be sighted on the proposed changes. It is anticipated that this will be by mid-September.
- The internal audit team reported on a limited assurance report in relation to service users' monies. An internal deep-dive audit is scheduled to review operations and processes. The finance team will provide a de-brief to the Audit Committee in October 2022.
- The Committee considered the Information and Data Assurance Annual Report and noted three potential risks relating to data compliance associated with screenshots, length of retention of some data, and a possible audit trail issue in one application.

**Assure:**

The Audit Committee:

- Noted the ongoing development of the Board Assurance Framework (BAF) including the new format and exploration of ways to enhance the extractable value from the BAF.
- Noted the NHS Benchmarking Services Report. The Committee noted the Trust's relative performance and potential opportunities to explore to enhance performance.
- Reviewed the report on losses and compensations for the period April to June 2022.
- Noted the improved position regarding the completion of agreed actions arising from internal audit reports.
- Noted the report of the Local Counter Fraud Specialist in particular the actions taken by a member of the finance team to detect and prevent a very sophisticated mandate fraud. As well as protecting the Trust, this action provides wider protection across the NHS with lessons learnt being shared.
- Reviewed and approved the Fraud, Bribery and Corruption Policy.

**Risks discussed:**

- 2536, 1821

**New risks identified:**

- None.

**Report completed by: Andrew Chang, Audit Committee Chair  
24<sup>th</sup> August 2022**

**Escalation and Assurance Report**

**Report from: Audit Committee**  
**Date of the meetings: 6<sup>th</sup> October 2022**

<b>Key discussion points and matters to be escalated from the discussion at the meeting:</b>
<b>Alert:</b>
There were no issues identified that required escalation.
<b>Advise:</b>
The Committee noted Audit Yorkshire’s report on progress on delivery of the 2022/23 internal audit plan. Delivery is behind programme, however with support from departments, the plan is deliverable. Failure to recover the programme may jeopardise the ability of the Trust to obtain the annual Head of Internal Audit Opinion and/or a positive opinion. The Committee was assured that management is working with Audit Yorkshire to ensure delivery of the plan. The Committee will continue to closely track progress.
<b>Assure:</b>
<p>The Committee:</p> <ul style="list-style-type: none"> <li>• Received an update on the BAF and noted the addition of three new high-level risks to the Organisational Risk Register.</li> <li>• Reviewed the Bi-Annual Litigation Report covering the latter half of 2021/22 and noted that there has been a significant decrease in the amount the Trust was paying in contributions to NHS Resolution.</li> <li>• Reviewed proposed changes to the Standing Financial Instructions and Scheme of Delegation and resolved to recommend that the Trust board approve the revision.</li> <li>• Reviewed the report on Losses and Special Payments for the first half of 2022/23 and noted that a VAT refund of £304.5k relating to lease vehicles was to be disbursed back to colleagues and former colleagues who had paid VAT on their lease vehicles.</li> <li>• Noted the Financial Sustainability Self-Assessment submitted to Audit Yorkshire for review.</li> <li>• Received a sector technical update from KPMG (external auditor).</li> <li>• Noted Audit Yorkshire’s positive report on the Trust’s progress to complete actions arising from internal audit report.</li> <li>• Reviewed the Counter Fraud Progress Report and noted the progress and activity of the Counter Fraud Specialist.</li> <li>• Received and reviewed the Charitable Funds Annual Report and Accounts for 2021/22 and delegated authority to the Audit Committee Chair to adopt them subject to the findings in the external auditor’s report to be presented at the Charitable Funds Committee meeting on 27 October 2022.</li> </ul>
<p><b><u>Risks discussed:</u></b></p> <ul style="list-style-type: none"> <li>• 2536, 1821</li> </ul>
<p><b><u>New risks identified:</u></b></p> <ul style="list-style-type: none"> <li>• Safeguarding Team staff sickness</li> <li>• Increased number of statutory reviews requiring Safeguarding Team input;</li> <li>• Lack of commissioned service for adults with learning disabilities who need ongoing prescribing monitoring for ADHD or an assessment for ADHD.</li> </ul>

**Report completed by: Andrew Chang, Audit Committee Chair**  
**26<sup>th</sup> October 2022**

## Escalation and Assurance Report

Agenda  
Item

**10.2**

**Report from the: Charitable Funds Committee**

**Date of meeting: 28<sup>th</sup> July 2022**

**Report to the Board of Directors**

### Key escalation and discussion points from the meeting

#### Alert:

Our new approach to the Charity was discussed at Board and with the Board of Governors. We continue to work closely with the Trust to move forward our new approach for the charity and ask for the continued support of the board in identifying Colleague Ambassadors that can raise awareness, spread the word but also help in the collation of ideas that will allow us to seek external funding.

#### Advise:

A review was undertaken of the staff charges and overheads. The funding position of the Charity was discussed in detail and will likely come back to Board as an alert once the options have been developed. The external environment is somewhat challenging for all Charities with the cost of living crisis. We have seen reduced numbers of fundraising activities and participants and a understandable reluctance to ask people for money given current hardships. We continue to seek external grants but many of these are ringfenced and specific in their nature and do not support the underlying costs of the charity.

It is likely that the longer term financial viability of the Charity will need to be addressed and options around the role and support of the Trust presented. This was a key action from the meeting.

#### Assure:

A number of Agenda items provided assurance to the Committee especially around good governance and auditability.

- Standard operating procedures and the standardised application process was reviewed.
- Transaction and balances reviewed along with an updated MI suite giving greater granularity and understanding of spend.
- Support and training for fund managers,.

#### Risks discussed:

-



**New risks identified:**

- 

**Report completed by:**

Mark Rawcliffe

Committee Chair and Non-Executive Director

29 September 2022

## Escalation and Assurance Report

Report from: Finance, Business and Investment Committee

Date the meeting: 22 September 2022

### Key discussion points and matters to be escalated from the discussion at the meeting:

#### Alert:

- There were no issues identified that required escalation from the meeting.

#### Advise:

- Whilst the trust is forecasting a break even financial position for 2022/23 which is in line with plan, there are a number of financial risks that are mitigated by non-recurrent mitigations mainly due to the level of vacancies across services. Financial risks primarily relate to bank and agency staff being use to deliver model roster staffing model, as well as acuity levels and staff absence in low secure services. Further work is taking place across a number of transformation work streams to identify savings that can support the underlying position for next year and beyond. The Committee requested a more detailed update on progress in the November meeting, including clarity on financial savings, accountabilities and assurance on deliverability of the initiatives.
- The Committee also noted the ICB financial position, which at the end of Month 4, reported no variance to plan, both for the year to date position and the forecast. However there are emerging risks in the financial position of the local authority which may impact the ICB financial position. Further discussions are taking place at place level with local authority stakeholders to understand the drivers of these risks and assess the impact of any proposed mitigation actions, both from a financial and activity perspective.
- The Committee noted that there was no further news in relation to the National Hospitals Programme capital funding for Lynfield Mount Redevelopment. Alternative options are being explored to identify capital at an ICB level although it is recognised that this would be smaller in scope than the submitted redevelopment.

#### Assure:

- The Committee reviewed the YTD financial position to month 5. The financial position continues to look favourable with a YTD surplus position of £424k which is £15k better than plan. The forecast for the year is a breakeven position which is as planned. The efficiency programme of £14.4m is off track in August with a £745k and forecasting a £3.6m under-achievement. There is a reasonable degree of confidence that non-recurrent mitigations will be identified in year due to the level of vacancies across services. Further assurance was requested as noted above in relation to financial risks and opportunities for 2023 and beyond.

- The Committee was assured that the transfer of the Wakefield 0-19 service from BDCFT to Harrogate and District NHS Foundation Trust planned for 30th September 2022 was on track.

**Risks discussed:**

- The Board Assurance Framework and Organisational Risk Register were considered.

**New risks identified:**

- None.

**Report completed by: Maz Ahmed, Finance Business & Investment Committee  
Chair  
23 September 2022**

## Escalation and Assurance Report

Report from: Mental Health Legislation Committee (“MHLC”)

Date the meeting: 22.09.22

### Key discussion points and matters to be escalated from the discussion at the meeting:

#### Alert:

1. There is a relatively significant issue regarding the timely production of **reports/ documents** for mental health tribunals and hospital manager meetings. Performance, which was already relatively weak, has declined further. Part of the problem appears to be that the Trust’s (small) Mental Health Act team is and has been under some considerable resource pressure (running at around 20-50% capacity, in practice, due to long-term absence/capability issues). Additionally: other parts of the Trust and/or external stakeholders appear unable and/or unwilling to prioritise this (important) work to the extent required. The Committee (“C”) took the view that the Board, given some potential risks arising from the issue, needs to consider an intervention to: (a) provide a longer-term solution to the MHA team’s resourcing issue (short-term resourcing options having been tried and, due to the nature of the work, been ineffective); and (b) to promote stronger compliance with the requirement to assist in the production of such documentation in other relevant parts of the trust.

#### Advise:

2. There is an ongoing issue regarding the (availably, suitability and quality of) **physical space** in which (tribunal and associate hospital manager) hearings are conducted, especially as in-person hearings become the default option again, and especially in light of COVID-safety concerns. At Airedale, specifically: in the short-term, a room often usually used for “relaxation” by service users will be used instead, for (on average) one or two afternoons a week, for hearings. While an alternative space for relaxation will be provided, the proposed arrangement did not appear to C to be a good long-term solution. An action was agreed to consider any better longer-term alternative options.
3. C received some feedback about how isolating/depressing it can feel, personally, as a mental health service user, to be in an **out-of-area service**.
4. There was a combined **CQC** mental health act visit to the Airedale Centre for Mental Health – the outcome is unknown, as yet, but C will be updated in due course. It was noted that, unusually, CQC visited all three wards at the site – it is possible that a similar approach may be repeated at Lynfield Mount.

**Assure**

5. C was again grateful for the continuing input from its **involvement partners**: they made useful contributions and offered important insights in relation to several matters.
6. C scrutinised – as it always does – the data and evidence regarding the use of **restrictive practices** within the Trust. It was further satisfied, on the evidence, that the increasingly long-term trend of relatively low and declining use of such practices has been maintained during the most recent period. Heather and Oakburn appear to have been the worst-performing wards over the longer-term: but, notably, Oakburn appears, since March 2022, to have been able to transform its performance – it appeared to C that lessons could be learned from what appears to be its marked improvement.
7. The majority of the newly-appointed **associate hospital managers** have progressed, effectively, through an induction programme and are well-positioned to act in the role.
8. Ongoing strong performance regarding many **metrics** covered in the “dashboard”. **Training compliance**, for example, is in a relatively good place.
9. C was updated on compliance regarding **consent to admission and treatment**. Most wards have showed progress and/or maintained a strong position (Heather and Oakburn appeared to be among those wards not performing as strongly as others, but the evidence was not in a form from which confident conclusions could be drawn).
10. C analysed feedback from its members following a recent **survey**: the feedback was generally positive with some areas for improvement.
11. Various other matters – including some more administrative matters – were progressed or dealt with, appropriately, within the meeting.

**Risks discussed:**

12. Board assurance framework and strategic organisational risk register noted/discussed.

**Report completed by: Simon Lewis, NED, Chair of MHLC**  
**Date: 22.09.22**

**Escalation and Assurance Report**

**Report from: Quality and Safety Committee**

**Date of the meetings: 20<sup>th</sup> October 2022**

**Key discussion points and matters to be escalated from the discussion at the meeting:**

**Alert:**

There were no issues identified that required escalation not already raised in the most recent board meetings.

**Advise:**

The Committee:

- Noted the operational risks highlighted through the Performance Dashboard's Workforce sub-dashboard and the Care Group report viz:-
  - Sickness absence rate of 6.7% continues to be of concern although there has been an improvement of 1% in the rate since July.
  - Labour turnover continues to be high at 16% since April (target 10%).
  - Appraisal compliance for the majority of Care Groups is below the 80% target. This is attributed to absences over the summer.
- Noted that the Go See programme was still waiting to be refreshed. It is recognised that this is an important assurance tool of the Committee and should be resumed.

**Assure:**

The Committee:

- Welcomed Sally Napper, Associate Non-Executive, as a member of the Committee.
- Noted that Mandatory Training compliance remains above the 80% target at 83%.
- Received positive feedback from the Involvement Partner, Mr Matthew Riley, on the improved level of support from the Involvement team and the assurance it has provided to Mr Riley. A recommendation was made for the Trust to find additional ways for service users (and friends and family) to feedback on their experiences. This triangulated well with the report on Patient and Carer Experience & Involvement Team Developments. The Committee took assurance from the plans to understand the challenges and supported the plan to transform the team.
- Received and noted the Safeguarding Annual Report 2021/22.
- Received the maiden Annual Report on Clinical Supervision noting compliance level is achieving the 80%> target. A transformation from the 2020 CQC reported level of <20%.
- Received an update on Medicines Management & Optimisation, and confirmed its continued support for digital innovation of medicines management.

**Risks discussed:**

- Safeguarding training identified as requiring improvement
- Safer staffing remains a risk and will be closely monitored

**New risks identified:**

*Library temperature control* was added to the Organisational High Risk Register during September, however its score was reduced during the month.

**Report completed by: Andrew Chang, Member, Quality & Safety Committee**  
**28<sup>th</sup> October 2022**

**Annual Cycle of Business for the Council of Governors meetings 2022**

	Paper author	Lead Director	19 January Extraordinary	3 February	5 May	7 June Extraordinary	13 July	1 September	15 September Annual Members Meeting	1 December	2 February
<b><u>STANDING ITEMS:</u></b>											
Apologies	LP	LP	X	X	X	X	X	X	X	X	X
Declarations of and Conflicts of Interest	LP	LP	X	X	X	X	X	X	X	X	X
Minutes of the last meeting	HR	LP	-	X	X	-	X	X	X	X	X
Minutes of the Annual Members' Meeting	HR	LP	-	-	-	-	-	-	X	X	X
Matters arising	-	-	X	X	X	-	X	X	X	X	X
Cumulative Action Log	HR	LP	-	X	X	-	X	X	X	X	X
Governor Feedback (verbal)	-	-	-	X	X	-	X	X	-	X	X
Any Other Business (verbal)	-	LP	X	X	X	X	X	X	X	X	X
Council of Governors Meeting Evaluation (verbal)	-	LP	X	X	X	X	X	X	-	X	X
<b><u>STRATEGIC CONTEXT</u></b>											
Chair's Report	LP	LP	-	X	X	-	X	X	-	X	X
<b><u>QUALITY, SAFETY AND RISK</u></b>											
Integrated Performance Report	SI	MW	-	X	X	-	X	X	-	X	X
Alert, Advise, Assure Escalation Reporting: Board Sub-Committees:											
Audit Committee	AC	MW	-	X	X	-	X	X	-	X	X
Charitable Funds Committee	MR	MW	-	X	X	-	X	X	-	X	X
Finance, Business and Investment Committee	MA	MW	-	X	X	-	X	X	-	X	X
Mental Health Legislation Committee	SL	DS	-	X	X	-	X	X	-	X	X

	Paper author	Lead Director	19 January Extraordinary	3 February	5 May	7 June Extraordinary	13 July	1 September	15 September Annual Members Meeting	1 December	2 February
Quality and Safety Committee	AM	PHu	-	X	X	-	X	X	-	X	X
Workforce and Equality Committee	MR	BC	-	X	X	-	X	X	-	X	X
Proposal for the Annual Members' Meeting	HR	FS	-	-	-	-	X	-	-	-	-
Annual Members' Meeting Thematic Report and Analysis	HR	FS	-	-	-	-	-	-	-	-	-
Quality Report (Account) Presentation	NM	PHu	-	-	-	-	X	-	-	-	-
Care Quality Commission Update	BF	PHu	-	X	-	-	-	-	-	-	-
West Yorkshire Suicide Study	DS	DS	-	-	-	-	X	X	-	-	X

**WORKFORCE**

Remuneration of the Chair of the Trust and Non Executive Directors to ratify (recommendation from the Remuneration Committee) <b>Statutory duty</b>											As required
Appointment of the Deputy Chair of the Trust (recommendation from the Nominations Committee) <b>Statutory duty</b>											As required, next due July 2022
Appointment of the Senior Independent Director (recommendation from the Nominations Committee) <b>Statutory duty</b>											As required, next due July 2022
Appointment of the Chair of the Trust (to ratify) Private - (recommendation from the Nominations Committee) <b>Statutory duty</b>							X				
Appointment of a Non Executive Director (to ratify) Private - (recommendation from the Nominations Committee) <b>Statutory duty</b>											As required, next due July 2022
Approve the appointment of the Chief Executive (approval) Private - (recommendation from the Nominations Committee) <b>Statutory duty</b>											As required
Performance Evaluation of the Chair and Non Executive Directors (recommendation from the Remuneration Committee) - Private			-	-	-	-	X	-	-	-	-
Staff Survey Outcome	HF	BC	-	-	X	-	-	-	-	-	-



	Paper author	Lead Director	19 January Extraordinary	3 February	5 May	7 June Extraordinary	13 July	1 September	15 September Annual Members Meeting	1 December	2 February
Freedom to Speak Up Guardian Report	RW	PHu	-	-	-	-	-	X	-	-	-
Staffing Update (suggest receiving on 6 monthly basis for 2023 onwards)	MH	BC	-	-	-	-	X	X	-	X	X
<b><u>FINANCE, SUSTAINABILITY AND GROWTH</u></b>											
Approval of any significant transactions <b>Statutory duty</b>											As required
Update on capital investment for Lynfield Mount Hospital											As required
<b><u>WELL LED AND GOVERNANCE</u></b>											
Operational Plan Progress Update	SI	MW	-	-	X	-	-	-	-	-	-
Receive Annual Report, Accounts and Quality Report (Account)	FS	LP	-	-	-	-	-	-	X	-	-
Appointment of the External Auditor (ratify recommendation from Audit Committee and tender exercise) <b>Statutory duty</b>	FS	AC			X						
Amendments to the Constitution (ratify recommendation) <b>Statutory duty</b>	-	-	As required								
Governor Election – proposal and outcome	HR	FS	-	-	-	X	-	-	-	-	-
Terms of Reference – Council of Governors	HR	FS	-	-	X	-	-	-	-	-	-
Terms of Reference – Council of Governors Nomination Committee	HR	FS	-	-	X	-	-	-	-	-	-
Terms of Reference – Council of Governors Remuneration Committee	HR	FS	-	-	X	-	-	-	-	-	-
Terms of Reference – Membership Development Committee	HR	FS	-	-	X	-	-	-	-	-	-
Election for the Lead Governor, and Deputy Lead Governor	HR	FS	-	-	-	-	-	-	-	-	-
Role Description Lead Governor, and Deputy Lead Governor	HR	FS	-	-	-	-	-	-	-	-	-
Role Description - Governor	HR	FS	-	-	-	-	-	-	-	-	-

	Paper author	Lead Director	19 January Extraordinary	3 February	5 May	7 June Extraordinary	13 July	1 September	15 September Annual Members Meeting	1 December	2 February
Governor Committee membership	HR	FS	As required								
Update from Membership Development Committee / Action Plan supporting Membership Engagement Strategy	HR	FS	-	-	-	-	-	X	-	-	-
Youth Views	-	Lead Gov	-	-	-	-	X	X	X	X	X
Membership Report on how the Governors have carried out their duties – AMM	HR	Lead Gov	-	-	-	-	-	-	X	-	-
Council of Governors Annual Declaration of Interest	HR	FS	-	-	X	-	-	-	-	-	-
Non Executive Director Annual Declaration of Interest, Fit and Proper, Independence (following report to the Board of Directors)	HR	FS	-	-		-	X	-	-	-	-
Council of Governors Annual Work Plan	HR	LP	-	X	X	-	X	X	X	X	X
Council of Governors Effectiveness Review	HR	LP	-	-	-	-	-	-	-	X	X
Council of Governors Development Annual Work Plan	HR	LP	-	-	-	-	-	X	-	-	-
Notification of future Meeting Dates	HR	LP	-	-	-	-	-	-	-	X	-
Procedure for Reimbursement of Expenses	HR	FS	-	-	-	-	-	-	-	X	X
Code of Conduct	HR	FS	-	-	-	-	-	-	-	X	X

Items to be scheduled:

- Approve the Membership Engagement Strategy (2023)