

**RATIFIED MINUTES OF THE COUNCIL OF GOVERNORS MEETING
HELD ON TUESDAY 7 MAY 2019
2.00 – 4.35 PM
CONFERENCE ROOMS A & B, RESEARCH & DEVELOPMENT CENTRE,
KINGSWAY, DERBY, DE22 3LZ**

PRESENT	Caroline Maley	Trust Chair and Chair of Council of Governors
	John Morrissey	Public Governor, Amber Valley
	Rob Poole	Public Governor, Bolsover & North East Derbyshire
	Lynda Langley	Public Governor, Chesterfield
	Julie Lowe	Public Governor, Derby City East
	Bob MacDonald	Public Governor, Derby City East
	Moira Kerr	Public Governor, Derby City West
	Christine Williamson	Public Governor, Derby City West
	Shirish Patel	Public Governor, Erewash
	Kevin Richards	Public Governor, South Derbyshire
	Rosemary Farkas	Public Governor, Surrounding Areas
	Kelly Sims	Staff Governor, Admin & Allied Support Staff
	April Saunders	Staff Governor, Allied Professions
	Farina Tahira	Staff Governor, Medical and Dental
	Jo Foster	Staff Governor, Nursing
	Al Munnien	Staff Governor, Nursing
	Roy Webb	Appointed Governor, Derby City Council
Jim Perkins	Appointed Governor, Derbyshire County Council	
Angela Kerry	Appointed Governor, Derbyshire Mental Health Forum	
Gemma Stacey	Appointed Governor, University of Nottingham	
IN ATTENDANCE	Ifti Majid	Chief Executive
	Carolyn Green	Director of Nursing and Patient Experience
	Claire Wright	Deputy Chief Executive & Director of Finance
	Margaret Gildea	Non-Executive Director & Senior Independent Director
	Geoff Lewins	Non-Executive Director
	Julia Tabreham	Deputy Chair & Non-Executive Director
	Anne Wright	Non-Executive Director
	Richard Wright	Non-Executive Director
	Suzanne Overton-Edwards	NEXt Director Scheme
	Denise Baxendale	Membership and Involvement Manager
	Justine Fitzjohn	Trust Secretary
	Leida Roome	Personal Assistant – note taker
	Denise Robson	Assistant to Moira Kerr
Dave Waldron	Trust Member	
APOLOGIES	Karen Smith	Public Governor, Amber Valley
	Martin Rose	Public Governor, Bolsover & North East Derbyshire
	Adrian Rimington	Public Governor, Chesterfield
	Christopher Williams	Public Governor, – Erewash
	Carol Sheriff	Public Governor, High Peak & Derbyshire Dales
	Marie Varney	Public Governor, High Peak & Derbyshire Dales
	Tony Longbone	Staff Governor, Admin & Allied Support Staff
	Roger Kerry	Appointed Governor, Derbyshire Voluntary Action
Wendy Wesson	Appointed Governor, University of Derby	

ITEM	<u>ITEM</u>
DHCFT/GOV /2019/037	<p><u>WELCOME, INTRODUCTIONS, CHAIR'S OPENING REMARKS, APOLOGIES FOR ABSENCE & DECLARATION OF INTERESTS</u></p> <p>Caroline Maley welcomed all to the meeting and was pleased to see the number of governors in attendance.</p> <p>A special welcome was extended to new governors Julie Lowe, Bob MacDonald and Dr Farina Tahira. Also welcomed were Justine Fitzjohn, who will be starting as the new Trust Secretary in June 2019 and Julia Tabreham, Non-Executive Director, who has returned after illness.</p> <p>Apologies were noted as above.</p> <p><u>Declaration of interest:</u></p> <p>John Morrissey advised that he was not elected as a Councillor for Amber Valley in the recent May elections.</p>
DHCFT/GOV /2019/038	<p><u>SUBMITTED QUESTIONS FROM MEMBERS OF THE PUBLIC</u></p> <p>No questions were submitted by members of the public.</p>
DHCFT/GOV /2019/039	<p><u>MINUTES OF THE PREVIOUS MEETING</u></p> <p>The minutes of the previous meeting held on 5 March 2019 were accepted as a correct record.</p>
DHCFT/GOV /2019/040	<p><u>MATTERS ARISING & ACTION MATRIX</u></p> <p>The Council of Governors agreed to close all completed actions. Updates were provided and noted on the actions matrix. All completed 'green' actions were scrutinised to ensure that they were fully complete. There were no matters arising.</p> <p>With reference to item DHCFT/GOV/2019/008 Roy Webb confirmed that he had met with Carolyn Green.</p>
DHCFT/GOV /2019/041	<p><u>BRIEFING ON NHS LONG TERM PLAN</u></p> <p>Ifti Majid provided a further briefing on the NHS Long Term Plan and how the Trust was responding to its implementation. The full report is available via the link https://www.longtermplan.nhs.uk/. The following items were noted:</p> <ol style="list-style-type: none"> 1) Contract Negotiation agreement – the Mental Health Investment standard will be met in full, which will mean extra income. Further monies will be received but these will only be used for special investments such as the Perinatal Liaison Project. Monies will also be received for Sustainability Transformation Partnerships (STPs), which are now listed by population size; it is likely that this money will be used for Crisis and Home Treatment Teams in order to reduce pressure on inpatient services. 2) Concerning Joined up Care Derbyshire, governors noted the four Clinical Commissioning Groups (CCGs) have now been re-structured into one – the Derby and Derbyshire CCG. A Strategic Commissioner will be in place for both the Trust and the STP. Work has started on an implementation trajectory for the Primary Care Networks (PCN's) and a new contract will be available from July. 3) NHSI and NHSE have been re-structured into one body, and performance management will come from this new body. A refreshed timeline for the STP's has been agreed and will be presented to Board in September/October for agreement and ratification. Ifti stressed the importance of involvement from all for the people who use our services.

	<p>Roy Webb sought clarification on whether the changes will impact on Governance issues. Ifti Majid confirmed that no legislative changes have been made to date, but that this is likely to change to support organisations in delivering the Long Term Plan.</p> <p>Roy Webb also asked if a process has been put in place to avoid further animosity from the public especially relating to changes in care. In response Ifti Majid explained the importance of ensuring that the public are aware that the changes are not about closing beds, but about supporting people at home where appropriate.</p> <p>John Morrissey sought assurance that there will be adequate staffing to support the new care model e.g. caring for people outside of Hospitals and supporting people at home. Ifti Majid explained that in the implementation of the plan, there will be lots of different models of care, as well as new staffing models. He quoted the Non-Medical Prescribers and Apprentices. Moira Kerr queried whether the long term monies will be able to be used to bid for the Perinatal and Liaison Psychiatric services. Ifti Majid advised that the Trust will need to produce a Business Case to continue to deliver these services. Regarding the public's reaction to the previous changes, Moira Kerr also drew attention to the groups which were disruptive during the previous consultation. Moira confirmed that a meeting has been planned at St Peter's Church on the 14 May, which she is hoping to attend, as she feels it is important to engage with these groups. Ifti Majid agreed that it is important to engage with these groups, he thanked Moira for the relevant information which he will share with Sean Thornton, Assistant Director NHS Derby and Derbyshire CCG.</p> <p>In supporting the Trust's integrated partnership working, April Saunders explained that as Physical Health and Wellbeing Lead, she is working with GPs to explain the referral process and to encourage early intervention for younger people.</p> <p>Caroline Maley explained that John Morrissey is representing Governors on the newly established CCG and JUCD Engagement Committee, which meets monthly. Caroline explained that the Committee has been established to oversee the public and patient involvement and engagement in local service developments. Caroline requested that a member of the Council of Governors supports John in this role. Kevin Richards agreed to attend the meetings with John and Moira Kerr also offered her support.</p> <p>ACTION:</p> <ul style="list-style-type: none"> • Update on the Trust's response to the NHS Long Term Plan to be a standing item on the Council of Governors meeting. <p>RESOLVED: The Council of Governors:</p> <ol style="list-style-type: none"> 1. Noted the briefing provided by Ifti Majid.
<p>DHCFT/GOV /2019/042</p>	<p><u>REPORT FROM GOVERNORS NOMINATIONS AND REMUNERATION COMMITTEE</u></p> <p>Caroline Maley presented an update from the meeting of the Nominations and Remuneration Committee, which was held on the 13 March 2019.</p> <p>The Committee received satisfactory appraisals for four Non-Executive Directors (NEDs): Julia Tabreham, Anne Wright, Richard Wright and Geoff Lewins.</p> <p>It also noted that a NED Skills Audit and succession planning exercise had been undertaken. As a result, the Committee will be considering proposals for the re-appointment of three NEDs at its next meeting. The Committee will also be agreeing the recruitment arrangements to replace Anne Wright, who has chosen not to seek a second term after her current Term of Office ends in January 2020.</p>

	<p>The Trust will be seeking a NED with clinical skills and will be encouraging applications from underrepresented groups.</p> <p>As part of the Annual Report of the Committee's work in 2018/19, a revised Terms of Reference was presented for approval by the Council of Governors.</p> <p>Moira Kerr raised a number of concerns about the proposed changes as well as the process that had been carried out on previous amendments. Moira suggested that a systematic review takes place. She provided the meeting with printed information on her thoughts.</p> <p>John Morrissey felt that, whilst the revised Terms of Reference are pertinent and important, the decision to revise these does not lie with the Nominations and Remuneration Committee; they can only recommend and not decide.</p> <p>After some discussion it was agreed to refer the issues back to the Nominations and Remuneration Committee with a view to bringing back a revised proposal to the Council of Governors on 2 July 2019.</p> <p>ACTION:</p> <ul style="list-style-type: none"> • Justine Fitzjohn to refer the Terms of Reference back to the next Nominations and Remuneration Committee. <p>RESOLVED: The Council of Governors:</p> <ol style="list-style-type: none"> 1. Received the update on the business undertaken by the Committee 2. Received assurance that a robust appraisal process has been followed for Julia Tabreham, Richard Wright, Anne Wright and Geoff Lewins 3. Agreed that the Committee's Terms of Reference will be referred back to the Committee 4. The Annual Report of the Committee was approved.
<p>DHCFT/GOV /2019/043</p>	<p><u>NON-EXECUTIVE DIRECTOR DEEP DIVE</u></p> <p>Richard Wright, Chair, Finance and Performance Committee and member of the Quality Committee, provided the Deep Dive report to the Council of Governors.</p> <p>Richard gave an outline of the work of the Finance and Performance Committee, which also covers contract negotiations, estates, information systems, including digital and the risk register. He was happy to advise that the control total was achieved last year as was the Cost Improvement Programme (CIP), albeit mostly non-recurrent. He added that the challenges will be greater in the current financial year and future years but noted the commitment of all who work in the Trust.</p> <p>He also added that contract negotiations will be more difficult and the mix of services will be critical as will the waiting times. Richard stressed that Estates and information systems are of strategic importance and data systems need to be focused on long term.</p> <p>Governors noted that the Trust's NEDs were working with NEDs from other Trusts; this links to a greater understanding of the STP/Joined Up Care work and provides assurance that other Trusts are motivated in the same way.</p> <p>He added that continuous improvements are ongoing but sometimes change takes a long time.</p> <p>In response to a question from John Morrissey on whether contracts, that the Trust currently has, are at risk from private competition, Richard Wright advised that this is a manageable risk. The Trust is well placed and he does not have any concerns about this.</p> <p>Richard is also involved in interviews for consultants, which he finds interesting. Richard has been involved in the Operational Plan sign off and has recently had</p>

	<p>his yearly appraisal with Caroline Maley.</p> <p>RESOLVED: The Council of Governors:</p> <p>1. Noted and appreciated the information provided in the Deep Dive by Richard Wright.</p>
<p>DHCFT/GOV /2019/044</p>	<p><u>INTEGRATED PERFORMANCE REPORT</u></p> <p>The Council of Governors received the Integrated Performance Report, which provides an overview of performance at the end of March 2019.</p> <p>Geoff Lewins confirmed that the control total surplus was met by the Trust, which generated additional funding of £1.4 million. Geoff explained that there are restrictions on how the Trust can spend the additional funding. Christine Williamson asked whether the additional funding can be used for extra staff. Geoff Lewins explained that these monies can only be used for capital investment or savings to improve services and not on employing staff or de-activated services.</p> <p>The Cost Improvement Programme (CIP) was also achieved mainly with non-recurrent monies, i.e. one off savings.</p> <p>Regarding the Trust's Operational Performance, out of area placements continues to be a concern – this is also a national issue. Geoff explained that not only are out of area placements expensive but they can also impact on a patient's recovery. It was noted that a paper on this will be presented to the next Finance and Performance Committee meeting.</p> <p>Anne Wright confirmed that the Health Visitor workload continues to be high and caseloads and staffing have been reviewed. Following on from the review the Trust will meet with Commissioners to consider options. An update on a new contract and new service specifications will be presented to the next meeting. Anne also explained that the Safeguarding workload remains high – this will also be discussed with Commissioners along with the rising demand for services.</p> <p>Julia Tabreham referred to the service responsiveness data and was pleased to report that services are responding very well despite increased pressure. Staff were working well with management support but waiting times remain challenging. Julia explained that the new targets are very challenging and reiterated the importance of collaborative working in order to meet these increased challenges. A robust business plan is in place and Non-Executive Directors have received assurance from this.</p> <p>Margaret Gildea confirmed that a clinical development workshop focusing on pathways is being arranged John Sykes, Medical Director; Carolyn Green, Executive Director of Nursing and Patient Experience; and Amanda Rawlings, Director of People and Organisational Effectiveness will be involved and will be discussing the workforce for the future i.e. staff on acute wards..</p> <p>Ifti Majid is leading work with partner organisations which is focusing on offering services in a different way.</p> <p>The apprenticeship scheme is proving successful and the apprentice levy was used to upskill staff. The Trust is considering whether future apprenticeships may work differently i.e. a mix of work based and college attendance.</p> <p>Sickness absence continues to be a concern and the Trust has recently changed its wellbeing provider to enable staff to access counselling and occupational therapy services more quickly. April Saunders asked if the Trust is considering a different pathway for people with personality disorders – who are currently making up 30% of service users. Ifti Majid advised that work is ongoing on this,</p>

the Trust is looking at a hub and spoke model.

Margaret Gildea explained that the Trust is keen to increase the uptake for the flu jab and is trying to ascertain why colleagues are not having the flu jab. The Staff Wellbeing Lead, Jamie Broadley will engage with colleagues on this, and April Saunders offered her support.

Roy Webb commented that staff absence rates were low, which was very positive. Margaret Gildea appreciated Roy's comment and reiterated that the Trust is working hard with its staff to keep the rates down. Regarding the clinical development workshop, Roy Webb asked if attendance is voluntary. Margaret explained that General Managers and Clinical Staff work together and that the work is a natural cascade.

Moira Kerr sought clarification whether there are sufficient Health Visitors for the new service operation. In response Anne Wright commented that there are vacancies but recruitment is ongoing and efforts are also being made to retain colleagues. The job specification for this role is due to be reviewed.

Jo Foster agreed that retaining staff is important, a happy workforce impacts on the service users. Jo confirmed that two staff from the Hartington Unit are completing an apprenticeship, and interest has been received from some Health Care Assistants in joining the scheme.

RESOLVED: The Council of Governors:

- 1. Noted the information provided in the Integrated Performance Report**
- 2. Appreciated the additional information and the re-assurance provided by the Non-Executive Directors.**

DHCFT/GOV
2019/045

ESCALATION ITEMS TO THE COUNCIL OF GOVERNORS

Three escalation items were raised from the 9 April 2019 Governance Committee:

Question 1: How have the Non-Executive Directors assured themselves that the Liaison Teams, which are co-located in the Acute Hospitals, are delivering the required outcomes expected by the commissioned operational requirements? In particular, what evidence is there that the Trust is delivering the services required in terms of Accident and Emergency department attendance; support for service users/patients in crisis who need referral to mental health services and attending service users in the Medical Assessment Unit (MAU).

Richard Wright responded that the Liaison Teams are monitored in three ways: through monthly Key Performance Indicators, via the Team Specifications and adherence to the Royal College of Psychiatric accredited standards for Liaison Teams. Data is available for attendance, i.e. 6760 and 3844 patients were seen respectively by the South and the North Liaison Teams. Referrals from A&E were 53% in the South and 40% in the North. With reference to the one hour target 88% were seen in the South and 98% in the North.

Concerning the Medical Assessment Unit the percentages are 30% in the South and 40% in the North. The referral percentages to Mental Health Services are 40% and 31% respectively. Referral details are retained and a Safe and Well Plan is made.

Moira Kerr expressed surprise at the high figures of patients, who were not seen. Roy Webb queried whether frequent attenders were included in the figures and Ifti Majid confirmed that this is the case but that work is ongoing concerning the frequent attenders.

Question 2: How are Non-Executive Directors assured that staff feel

confident to “speak up” with no retribution?

Margaret Gildea explained that it is difficult to guarantee that all colleagues are happy, a new Freedom to Speak Up Guardian has recently been appointed, Tamera Howard. Furthermore an excellent policy for Raising Concerns is now in place and colleagues are also able to approach the Chief Executive, Executive Directors, Union representatives, Staff Governors or Margaret herself in order to raise concerns. An employee survey is also undertaken yearly as is a regular Pulse Check.

Leadership culture is also important to enable colleagues to speak freely. The Trust has adopted a new strategy for leadership, with Team Derbyshire days taking place. Networking also takes place with the Joint Negotiating Committee, the Black, Asian and Minority Ethnic (BAME) group and the Staff Forum. It was noted that the Trust has a zero tolerance to harassment and bullying.

Question 3: It has come to the Committee’s notice that some care co-ordinators are producing online care plans for service users without the involvement of the service user. Amongst other things, this can lead to incorrect personal information being included. How do the Non-Executive Directors become assured that care plans are properly in place, with all guidelines around content and involvement met, and that they are properly reviewed at least annually.

In response Anne Wright noted that triangulated evidence is provided to the Quality Committee as well as at Quality Visits. Care plans are joint plans and are person centred plans. Work is ongoing on this.

Roy Webb queried whether the Care Quality Commission monitors care plans. Ifti Majid confirmed that to the Trust’s knowledge no monitoring is carried out by the Care Quality Commission on care plans. He also explained that there is a pro forma for the care plan, which is person centred and should be completed by the service user and the relevant Trust colleague together.

April Saunders commented the importance of training on care plans and Ifti Majid confirmed that bite-sized training is to be rolled out. He also reinstated the importance of supervision in checking and controlling the care plans.

RESOLVED: The Council of Governors:

- 1. Noted the questions from the Governance Committee**
- 2. Accepted the responses provided.**

DHCFT/GOV
/2019/046

GOVERNANCE COMMITTEE REPORT

Kelly Sims provided the Council of Governors with an update report on the Governance Committee meeting, which was held on 9 April 2019. A good level of attendance was attained and Kelly was congratulated on chairing her first meeting.

The Committee had approved the content of the governor and membership section of the Annual Report. It also approved the Council of Governors statement for inclusion in the Quality Report. For next year’s Quality Report the Committee suggested including the following for clarity:

- A separate section for partnership working, including work undertaken as part of Joined Up Care Derbyshire
- An additional column showing comparative data from the previous year on the Trust’s Performance Dashboard
- A more detailed section on the Quality Visit programme, detailing governors’ involvement in visits.

RESOLVED: The Council of Governors:

	<p>1. Noted the content of the report made at the Governance Committee meeting on 9 April 2019.</p>
DHCFT/GOV /2019/047	<p><u>UPDATE – ANNUAL MEMBERS’ MEETING</u></p> <p>Denise Baxendale provided an update on the Annual Members’ Meeting (AMM), which is scheduled for 11 September 2019. The AMM is being held in the Centre for Research and Development, Kingsway Hospital Site. A Governor Task and Finish Group has met to discuss the programme which apart from the formal business will include a market place, presentations on the theme of equality, diversity and inclusion and the announcement of the winning entries from the Trust’s Writing Competition titled ‘Looking Back/Looking Forwards’. All governors are encouraged to attend the AMM and to promote it in their constituencies. An update will be presented to the next meeting.</p>
DHCFT/GOV /2019/048	<p><u>REVIEW OF THE CURRENT PROCESSES AND ROLE DESCRIPTION FOR THE LEAD/DEPUTY LEAD GOVERNOR</u></p> <p>Justine Fitzjohn presented a paper, which details the summary discussions from a Task and Finish Group, convened to review the current role descriptions and processes around the Lead Governor and Deputy Lead Governor roles.</p> <p>A benchmarking exercise was undertaken to compare the Trust’s current role descriptions and processes for the Lead Governor and the Deputy Lead Governor. Initial findings were reported back to the Governance Committee for their April 2019 meeting; a Task and Finish Group was established to discuss the issue in more detail. The paper detailed the potential amendments for discussion and agreement by the Council of Governors.</p> <p>A discussion ensued on the skills required as well as the qualifying period that Governors would need to be in office before they could stand for Lead Governor or Deputy Lead Governor.</p> <p>Moira Kerr felt that some of the proposed changes around qualifying criteria could exclude people in terms of equality/diversity and added that the solution to provide ongoing support might not be sufficient. Bob MacDonald challenged the qualifying period of time, indicating that appointments should be based on the person and not the time they had spent in the governor role.</p> <p>Caroline Maley was keen to progress the item and on a show of hands, it was agreed that the qualifying period in order, to stand to become a Lead Governor would be 12 months and for a Deputy Lead Governor six months.</p> <p>The amendments on the role description were accepted and it was agreed that nominee’s statements should not exceed 250 words.</p> <p><i>(April Saunders left the meeting at 16.15 hours and Gemma Stacey at 16.25 hours.)</i></p> <p>RESOLVED: The Council of Governors:</p> <ol style="list-style-type: none"> 1. Discussed and agreed the amendments to the role description/process for the Lead Governor and Deputy Lead Governor as suggested in Appendix A of the paper 2. Noted that an election process will be held for a Deputy Lead Governor, based on the agreed documentation.
DHCFT/GOV /2019/049	<p><u>UPDATE ON RECENT GOVERNOR ELECTIONS</u></p> <p>Denise Baxendale presented a paper updating governors on recent elections for Staff and Public Governors to provide assurance on the process taken. The elections were undertaken by Electoral Reform Services, an independent company used by the majority of Foundation Trusts to run their elections.</p>

	<p>Six seats were available; all seats were contested and Denise was pleased to announce that the following were elected:</p> <ul style="list-style-type: none"> • Chesterfield – Lynda Langley (re-elected) • Derby City East – Julie Lowe and Bob MacDonald • Erewash – Lewis Hall • Surrounding Areas – Rosemary Farkas (re-elected) • Medical – Dr Farina Tahira <p>The newly elected governors have attended an induction session and have taken advantage of the “buddy up” system that is provided by more experienced governors to help them in their role.</p> <p>Denise Baxendale asked for it to be noted that Lewis Hall, elected as Public Governor for Erewash, has resigned due to personal circumstances. In line with the Trust’s Constitution, the next highest polling candidate was approached and Christopher Williams had accepted.</p> <p>Governors were asked to note the range of activities that took place to promote the vacancies.</p> <p>The turn-out rates for the elections compared favourably to ERS’s average turnout rate of 12%.</p> <p>RESOLVED: The Council of Governors:</p> <ol style="list-style-type: none"> 1. Received assurance that the recent governor recruitment exercise was carried out according to election rules as outlined in the Constitution and resulted in recruitment to all vacant posts 2. Noted the details of the outcome of the governor role and post for Erewash.
<p>DHCFT/GOV /2019/050</p>	<p><u>REVIEW OF THE MEETING EFFECTIVENESS AND FOLLOWING THE PRINCIPLES OF THE CODE OF CONDUCT</u></p> <p>The following comments were made:</p> <ul style="list-style-type: none"> • meeting did not finish on time • meeting did keep to the agenda items • the behaviour of the meeting attendees was good • it was deemed to be an effective meeting.
<p>DHCFT/GOV /2019/051</p>	<p><u>CLOSE OF MEETING</u></p> <p>Caroline Maley thanked all those present for their input and attendance and closed the meeting at 16.35 hours.</p>