

MINUTES OF COUNCIL OF GOVERNORS MEETING

HELD ON TUESDAY 7 SEPTEMBER 2021, FROM 14.00-16.30 HOURS

MEETING HELD DIGITALLY VIA MICROSOFT TEAMS

PRESENT	Caroline Maley	Trust Chair and Chair of Council of Governors
	Valerie Broom	Public Governor, Amber Valley
	Susan Ryan	Public Governor, Amber Valley
	Rob Poole	Public Governor, Bolsover and North East Derbyshire
	Lynda Langley	Public Governor, Chesterfield and Lead Governor
	Julie Lowe	Public Governor, Derby City East
	Carole Riley	Public Governor, Derby City East and Deputy Lead Governor
	Stuart Mourton	Public Governor, Derby City West
	Orla Smith	Public Governor, Derby City West
	Andrew Beaumont	Public Governor, Erewash
	Julie Boardman	Public Governor, High Peak and Derbyshire Dales
	Rosemary Farkas	Public Governor, Surrounding Areas
	Jan Nicholson	Staff Governor, Allied Professions
	Marie Hickman	Staff Governor, Admin and Allied Support Staff
	Jo Foster	Staff Governor, Nursing
	Varria Russell-White	Staff Governor, Nursing
	Nigel Gourlay	Appointed Governor, Derbyshire County Council
	David Charnock	Appointed Governor, University of Nottingham
	IN ATTENDANCE	Margaret Gildea
Ashiedu Joel		Non-Executive Director
Geoff Lewins		Non-Executive Director
Sheila Newport		Non-Executive Director
Julia Tabreham		Non-Executive Director
Richard Wright		Non-Executive Director
Ifti Majid		Chief Executive
Carolyn Green		Executive Director of Nursing and Patient Experience
Gareth Harry		Director of Business Improvement and Transformation
Claire Wright		Deputy Chief Executive and Executive Director of Finance
John Sykes		Medical Director
John Pressley		Audit Manager, Mazars (item 2021/047)
Denise Baxendale		Membership and Involvement Manager
APOLOGIES	Ruth Grice	Public Governor, Chesterfield
	Chris Mitchell	Public Governor, High Peak and Derbyshire Dales
	Kel Sims	Staff Governor, Admin and Allied Support
	Farina Tahira	Staff Governor, Medical
	Rachel Bounds	Appointed Governor, Derbyshire Voluntary Association
	Roy Webb	Appointed Governor, Derby City Council
	Stephen Wordsworth	Appointed Governor, University of Derby
	Jodie Cook	Appointed Governor, Derbyshire Mental Health Forum
	Justine Fitzjohn	Trust Secretary

ITEM	<u>ITEM</u>
DHCFT/GOV /2021/042	<p><u>WELCOME, INTRODUCTIONS, CHAIR’S OPENING REMARKS, APOLOGIES FOR ABSENCE & DECLARATION OF INTERESTS</u></p> <p>Caroline Maley welcomed all to the meeting especially to newly elected governors and those who were re-elected in June. She reminded everyone that the meeting was being streamed for public viewing. The apologies were noted; and no interests were declared.</p>
DHCFT/GOV /2021/043	<p><u>SUBMITTED QUESTIONS FROM MEMBERS OF THE PUBLIC</u></p> <p>It was noted that no questions from members or the public have been received.</p>
DHCFT/GOV /2021/044	<p><u>MINUTES OF THE COUNCIL OF GOVERNORS’ MEETINGS ON THE 4 MAY 2021 AND 6 JULY 2021</u></p> <p><i>Minutes of the previous meeting held on 4 May 2021</i> The minutes of the meeting held on 4 May 2021 were accepted as a correct record.</p> <p><i>Minutes of the previous meeting held on 6 July 2021</i> The minutes of the meeting held on 6 July 2021 were accepted as a correct record.</p>
DHCFT/GOV /2021/045	<p><u>MATTERS ARISING AND ACTIONS MATRIX</u></p> <p>All completed ‘green’ actions were scrutinised to ensure that they were fully completed. The Council of Governors agreed to close completed actions. There were no matters arising.</p> <p>RESOLVED: The Council of Governors noted the completed actions and comments on the Action Matrix.</p>
DHCFT/GOV /2021/046	<p><u>CHIEF EXECUTIVE UPDATE</u></p> <p>Ifti Majid provided the meeting with:</p> <ul style="list-style-type: none"> • An update on the current situation regarding the COVID-19 pandemic. He confirmed that Derbyshire has a low transmission rate; and that one patient in the Trust’s inpatient facilities has COVID-19. • Staff continue to maintain infection prevention and control measures to high standards. • 26 members of staff are currently off work due to COVID-19 related illnesses. This equates to 1% of the workforce which is one of the lowest in the country. • There is significant concern going into winter, but it is hoped that the roll out of the COVID vaccine will help to alleviate the pressures. • The Trust worked really hard to reduce the number of patients on wards, by offering appropriate care in a community setting and discharging safely. Despite the fact that pressure on beds is a national issue, there is still an expectation to keep patients locally and not use out of placement beds. • There is an increase in people using our services. This is due to a waiting list backlog and a new demand for our services. • Staff have been coping really well during the pandemic but are exhausted. • Long Term Plan monies cannot be diverted to mop up COVID-19 pressure. • The Trust is on a roadmap out of lockdown. A new operational leadership group has been established (which sits below the executive team) and the Incident Management Team has been stepped down and replaced with a Covid Response team. • The development of the Integrated Care System and the new components continues. • The Trust expects a Care Quality Commission (CQC) inspection at the end of the financial year; a well led review is now due; and the Trust continues to

	<p>escalate actions to NHS England/Improvement (NHSE/I) regarding performance and contractual obligations.</p> <p>Andrew Beaumont asked if people who suffer with long-COVID is down to genetics. Ifti explained that the reasons for people developing long-COVID is unknown. Rosemary Farkas explained that long-COVID seems to involve inflammatory process and clotting mechanisms rather than genetics and impacts on anybody including younger people.</p> <p>Lynda Langley conveyed her appreciation to Ifti for the informative update. She explained that she would like to circulate a message to staff on behalf of the Council of Governors thanking them for their commitment and hard work during the pandemic. She confirmed that she will also thank staff during her presentation at the Annual Members Meeting on 9 September.</p> <p>RESOLVED: The Council of Governors noted the helpful information and explanations provided by Ifti Majid.</p>
<p>DHCFT/GOV /2021/047</p>	<p><u>PRESENTATION OF THE ANNUAL REPORT AND ACCOUNTS 2020/21 AND REPORT FROM THE EXTERNAL AUDITORS</u></p> <p>Claire Wright, Deputy Chief Executive/Director of Finance, reminded governors of their statutory role i.e., governors must be presented with the NHS Foundation Trust's annual report and accounts and any report from the auditor on them.</p> <p>Claire explained that an overview of the Annual Report and Accounts for 2020/21 will also be presented, consistent with financial reporting, at the Annual Members' Meeting this afternoon.</p> <p>Claire introduced John Pressley of external auditors, Mazars, who provided a summary of the Annual Audit letter for the Trust. John explained that Mazars key responsibilities are to:</p> <ul style="list-style-type: none"> • Give an opinion on the Trust's financial statements • Assess the Trust's arrangements for securing economy, efficiency and effectiveness in its use of resources (the value for money conclusion). <p>John explained that the audit was completed by the deadline, which was testament to the work of the Finance Team and other Trust staff who worked together to present the annual report and accounts. John presented a positive annual report letter and confirmed that they had not identified any significant weaknesses which would require further work or wider reporting.</p> <p>Lynda Langley extended thanks to John Pressley for the information given and for a good report. She explained that one of the duties of the Lead Governor is to represent the Council of Governors at the Audit and Risk Committee meeting to observe the Annual Report and Accounts 'sign off'. Lynda attended the meeting along with Mazars and observed Non-Executive Directors (NEDs) receive assurance on the final document. Lynda conveyed her appreciation to Claire Wright, Deputy Chief Executive/Director of Finance and the Finance Team.</p> <p>Caroline Maley also conveyed her appreciation to John Pressley for the positive report.</p> <p><i>(John Pressley left the meeting at 14:46.)</i></p>
<p>DHCFT/GOV /2021/048</p>	<p><u>LEAD GOVERNOR ROLE</u></p> <p>Caroline Maley reiterated the importance of the Lead Governor role and requested that the Council of Governors encourages eligible governors to submit a nomination for the Lead Governor role and the Deputy Lead Governor role. It was noted that Lynda Langley the current Lead Governor leaves the Trust in March 2022 when her term of office ends. It is important that her successor is in place before then, ideally</p>

	<p>with a period of shadowing. It was also noted that Carole Riley, Deputy Lead Governor also leaves the Trust in March 2022 when her term of office ends.</p> <p>It was noted that the Trust has been encouraging eligible governors to consider the role for several months but to date no formal expressions of interest have been received.</p> <p>At the Governance Committee in August governors discussed some of the possible barriers for governors considering the role. This included time commitment and the qualifying period that public governors need to be in post before taking on the role. A recommendation was made by the Governance Committee to reduce the eligibility criteria from 12 to six months. An overview of time commitment and duties of the current Lead Governor was outlined in the report.</p> <p>Lynda Langley encouraged governors to take on the role and to contact her to discuss the role. She reiterated that she was keen to work alongside the new Lead Governor before her term of office ends in March. Lynda also reiterated how enjoyable and fulfilling the role is. Regarding time commitment Lynda explained that it is not an onerous role; and the pandemic had created additional meetings. Carole Riley, Deputy Lead Governor echoed Lynda's comments.</p> <p>RESOLVED: The Council of Governors approved the recommendation to reduce the eligibility criteria from 12 to six months.</p> <p>ACTION: Eligible governors are encouraged to express an interest in the Lead Governor and Deputy Lead Governor roles.</p>
<p>DHCFT/GOV /2021/049</p>	<p><u>NON-EXECUTIVE DIRECTOR'S (NED) DEEP DIVE</u></p> <p>Geoff Lewins, as Chair of the Audit and Risk Committee, presented the Deep Dive, which included the annual report of the Audit and Risk Committee, to governors.</p> <p>Geoff explained that the Committee oversees the production of the Annual Report and Accounts which included liaising with the external auditors Mazars. He also explained that preparing and auditing the report and accounts was made considerably more difficult by the COVID-19 pandemic, but the Committee had gained significant assurance in the end result.</p> <p>It was noted that the Audit and Risk Committee carries out a significant amount of other work during the year reviewing the Trust's system of risk management.</p> <p>Geoff is a member of the Finance and Performance Committee. He is also involved in the OnEPR project which will migrate the Trust from the electronic patient record PARIS to SystemOne.</p> <p>Geoff also confirmed that he is involved in the Derbyshire System in the implementation of 'shared care records' a linked IT system. He has recently joined the System Transition Assurance Sub-Committee which is providing assurance on the transition activities to move towards Integrated Care System (ICS) status.</p> <p>Caroline Maley conveyed her appreciation to Geoff reiterating that the NED Deep Dives help governors to understand the NEDs role of holding to account the performance of the Trust Board.</p> <p>Valerie Broom referred to the shared care record commenting that this has been on the NHS agenda for a number of years and sought assurance that the shared system will be implemented. Geoff explained that the System Transition Assurance Sub-Committee is in the process of providing timescales for the implementation of 'shared care records' in Derbyshire.</p> <p>Valerie commented that she is aware that not all providers use the same systems and asked if they will be compatible across the NHS. Geoff explained that the Trust is moving to SystemOne which will enable the Trust to be part of the shared care</p>

	<p>record system. He explained that this work is scheduled to be completed in January 2022.</p> <p>Andrew Beaumont had recently attended a GovernWell session on finance at which a mathematical simulation of virtual hospitals was mentioned for benchmarking purposes and asked if the Trust used this. Geoff explained that the Trust uses benchmarking data on a variety of things to compare our performance to e.g. catering costs; cost per square foot of estates etc. He also explained that although benchmarking is useful some Trusts measure in different ways, so the data needs to use with caution.</p> <p>RESOLVED: The Council of Governors received the Deep Dive Report from Geoff Lewins.</p>
<p>DHCFT/GOV /2021/050</p>	<p><u>ESCALATION ITEMS TO THE COUNCIL OF GOVERNORS FROM THE GOVERNANCE COMMITTEE</u></p> <p>One item of escalation was received from the Governance Committee meeting held on 4 May 2021:</p> <p>Governors seek assurance on the current status on psychiatrist recruitment and retention to the Trust’s psychiatric services; and in particular an update on vacancies and whether these have been filled by permanent staff, locums or remain vacant.</p> <p>The response to the question attached as Appendix 1 to these minutes, was read out at the meeting.</p> <p>Valerie Broom asked if the Trust has any issues with retaining consultants and if it has a higher turnover of consultants compared to other Trusts. John Sykes explained that this is a competitive environment and the Trust is working hard to recruit and retain staff. He also explained that retirement is a big issue across the Trust; and the Trust offers retire and return on a part-time basis which is helpful.</p> <p>Valerie also asked if the Trust has issues with the gender imbalance and gender pay gap. John Skyes explained that the Trust has 51/49% of consultants in favour of men. He explained that the current national scheme for remuneration for part-time and full-time consultants is being reviewed which will help to alleviate the pay gap and support women in higher levels who work part time. Richard Wright explained that there is no evidence that the Trust has difficulty in retaining women consultants.</p> <p>RESOLVED: The Council of Governors was satisfied with the response.</p>
<p>DHCFT/GOV /2021/051</p>	<p><u>VERBAL SUMMARY OF INTEGRATED PERFORMANCE REPORT</u></p> <p>The Integrated Performance Report (IPR) was presented to the Council of Governors by Julia Tabreham, Non-Executive Director (NED). The focus of the report was on workforce, finance, operational delivery and quality performance. Julia referred to:</p> <ul style="list-style-type: none"> • The Integrated Performance Report (IPR) presentation at the Trust Board this morning which was excellent and included summaries of key issues • Julia commended staff and managers, many of them who are exhausted by the pandemic response. • An operational oversight group has been established one level down from executive team. The group is starting to make some traction. • The Trust is waiting for allocations for funding for the second half of the year. • Non-Executive Directors have challenged the Board on agency costs. Executives explained that these relate to operational and clinical need in the rise in demand of Trust services, COVID-19 costs and medical costs of the workforce. • The pressure on out of area placements has reduced. There is currently one patient placed out of area.

	<ul style="list-style-type: none"> • The waiting lists for psychological services and Child and Adolescent Mental Health Services (CAMHS) have reduced. • 93% of the workforce have been fully vaccinations for COVID-19 • The Trust’s flu vaccination programme will be launched shortly. • Restraint and seclusion peaked in July and significant scrutiny has been received. • A targeted focus on recruitment is ongoing. <p>Regarding out of area placements, Jo Foster confirmed that the report was accurate. She explained that the patient placed out of area is appropriate as they work for the Trust. Jo also confirmed that there has been an immense focus on reducing out of area placements and this is now paying off.</p> <p>RESOLVED:</p> <ol style="list-style-type: none"> 1) The Council of Governors Noted the information provided in the IPR. 2) Agreed that the NEDs have held the Executive Directors to account.
<p>DHCFT/GOV /2021/052</p>	<p><u>MENTAL HEALTH, AUTISM AND LEARNING DISABILITIES SYSTEM DELIVERY BOARD</u></p> <p>Ifti Majid delivered a presentation on the Mental Health, Autism and Learning Disabilities System Delivery Board (the Delivery Board) which is responsible and accountable for the whole population of Derbyshire that needs intervention of providers in different organisations. He explained that as Joined Up Care Derbyshire (JUCD) Accountable Officer for mental health, autism and learning disabilities he is Chair of the Board. The following was noted:</p> <ul style="list-style-type: none"> • Gareth Harry and Sheila Newport sit on the Delivery Board as Senior Responsible Officer (SRO) and specialist Non-Executive Director respectively. They are not representing the Trust specifically but are utilising their expertise for the whole system. • The Delivery Board is responsible for transformation and performance (statutory, regulatory and financial) across the whole system. • The Delivery Board has a strategic responsibility in forward planning e.g. preparing for Derbyshire’s shared care record; dealing with COVID-19 issues; new service models and investment. • The Delivery Board will also be hosting the Childrens System Delivery Board and will be known as the Mental Health, Autism, Learning Disabilities and Childrens System Delivery Board • The Transforming Care Partnership supports people in the community rather than in a hospital environment. • A finance and quality group will feed back into the Delivery Board and into the system wide meeting around system quality. • The Long Term Plan for mental health continues. Actions include reducing the target of inpatients in mental health acute wards to less than 32 days; developing a second Safe Haven in the north of the county; replacing all dormitory wards across the county with single en-suite rooms; and the development of a Psychiatric Intensive Care Unit (PICU) in Derbyshire. • The transformation of community mental health services continues. Wider multi-disciplinary teams will be established to care for people in the community. • It is estimated that due to the pandemic 400-600 people have not accessed dementia services. This is a challenge and the focus is on building on digital access to support services and Living Well with dementia courses. • The establishment of a Specialist Autism Team for which demand outstripped capacity even prior to the pandemic. • The Delivery Board is one of the first to take responsibility for the programme of spend. It is important the Delivery Board stays on plan; and it is approving the autism and learning disability services.

	<p>Sheila Newport explained that the Delivery Board has achieved an enormous amount during the last 18 months and despite some challenges ahead is optimistic about the success of the Delivery Board. The co-production with service users and members of the population has been really beneficial.</p> <p>David Charnock asked how the system will manage the complexity of people with learning disabilities (LD) and autism; and those people who have autism without LD in same group. He explained that high functioning autistic people do not see themselves as having LD. Ifiti explained that people with mental health issues and LD also have complex needs and the system is considering placing people in different cohorts with different training needs identified for each cohort. Cohorts can run together but have separate and different needs. Regardless of whether people have high functioning autism or not, Ifiti assured governors that the emphasis is on treating people at home rather than as inpatients. Gareth Harry explained that they have been engaging the EQUAL Autism sub-group, which is part of the EQUAL Forum (patient and carers forum).</p> <p>RESOLVED: The Council of Governors noted the information provided on the Mental Health, Autism and Learning Disabilities System Delivery Board.</p>
<p>DHCFT/GOV /2021/053</p>	<p><u>GOVERNANCE COMMITTEE REPORT – 15 JUNE AND 10 AUGUST 2021</u></p> <p>The Council of Governors received the reports from the Governance Committee meeting which took place on 15 June and 10 August 2021. Julie Lowe, Chair of the Committee referred the meeting to the annual review of the Governance Committee Terms of Reference. She explained that at the Committee meeting, governors agreed that the Terms of Reference remained fit for purpose. She also referred to the Governor Membership Engagement Action Plan which was reviewed and updated; and circulated to governors.</p> <p>RESOLVED: The Council of Governors</p> <ol style="list-style-type: none"> 1) Noted the information provided in the Governance Committee Report 2) Approved the minor amendments to the Governance Committee’s Terms of Reference.
<p>DHCFT/GOV /2021/054</p>	<p><u>ANY OTHER BUSINESS</u></p> <p>Governors Annual Effectiveness Survey</p> <p>Denise Baxendale reminded governors that the deadline to complete the survey is Friday 17 September. To date 53.84% of the Council of Governors have completed the survey. Denise reminded governors that the results will be used to develop the governor training programme for next year and identify any issues raised.</p> <p>Annual Members Meeting (AMM)</p> <p>Denise Baxendale reminded governors that the AMM is taking place on 9 September from 4pm and encouraged governors to attend. Caroline Maley reiterated that all governors are invited to the AMM.</p> <p>Caroline Maley</p> <p>Denise Baxendale explained that this is Caroline’s last Council of Governors meeting before she retires on 13 September. Denise conveyed her appreciation to Caroline for her support and for chairing meetings so effectively. On behalf of the Council of Governors, Lynda Langley also thanked Caroline for her support and commitment.</p>
<p>DHCFT/GOV /2021/0055</p>	<p><u>REVIEW OF THE MEETING EFFECTIVENESS AND FOLLOWING THE PRINCIPLES OF THE CODE OF CONDUCT</u></p> <p>The Council of Governors agreed that:</p> <ul style="list-style-type: none"> - Governors are adhering to the Code of Conduct

	<ul style="list-style-type: none"> - The meeting included a clear oversight of Integrated Care Systems - The meeting was efficiently chaired and finished early - The meeting covered all agenda items with enough time for discussion - Governors were assured that the Non-Executive Directors are holding the Board to account.
<p>DHCFT/GOV /2021/056</p>	<p><u>CLOSE OF MEETING</u></p> <p>Caroline Maley thanked all for their attendance and input.</p> <p>The next Council of Governors meeting will be held on Tuesday 2 November, from 2.00pm. This will be a virtual meeting.</p> <p>The meeting closed at 16:30 hours.</p>

Escalation items to the Council of Governors from the Governance Committee

Question One:

Question:

Governors seek assurance on the current status on psychiatrist recruitment and retention to the Trust's psychiatric services; and in particular an update on vacancies and whether these have been filled by permanent staff, locums or remain vacant.

Response:

During the period 1 March 2019 to 31 August 2021 there has been 17 medical leavers and during this same period there has been 15 new medical starters. Generally the Trust has been successful in replacing consultants who retire, despite a recognised national shortage. It is often more difficult to recruit speciality doctors. The greatest success the Trust has had in replacing Consultants is by higher trainees from within the Trust moving up on completion of their training and reflects the fact that this is a good Trust to work in and generally people want to stay.

There are currently 11 vacancies for consultants and speciality doctors and one coming vacant in September due to retirement. Nine of these roles are covered by agency workers and recruitment is ongoing with posts advertised. The Trust has been successful in recruiting during August to specialty doctor vacancies on Ward 33 with the doctor starting on 27 August and Ward 34 and the doctor will start on 1 November. Whilst we can seek to recruit speciality doctors from overseas (albeit this is time consuming and expensive) it is not possible to recruit Consultants in the same way as they do not meet the UK training requirements to enter the grade.

On top of the vacancies identified above there are five new posts identified due to new funding becoming available. Recruitment has started to fill these posts. One of our existing higher trainees has already expressed interest in one of these roles.