

**MINUTES OF COUNCIL OF GOVERNORS MEETING
HELD ON TUESDAY 1 MARCH 2022, FROM 14:15-16:15 HOURS
MEETING HELD DIGITALLY VIA MICROSOFT TEAMS**

PRESENT	Richard Wright	Deputy 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
	Ruth Grice	Public Governor, Chesterfield
	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
	Orla Smith	Public Governor, Derby City West
	Andrew Beaumont	Public Governor, Erewash
	Christopher Williams	Public Governor, Erewash
	Julie Boardman	Public Governor, High Peak and Derbyshire Dales
	Chris Mitchell	Public Governor, High Peak and Derbyshire Dales
	Rosemary Farkas	Public Governor, Rest of England
	Marie Hickman	Staff Governor, Admin and Allied Support Staff
	Kel Sims	Staff Governor, Admin and Allied Support
	Jan Nicholson	Staff Governor, Allied Professions
Jo Foster	Staff Governor, Nursing	
Jodie Cook	Appointed Governor, Derbyshire Mental Health Forum	
IN ATTENDANCE	Denise Baxendale	Membership and Involvement Manager
	Justine Fitzjohn	Trust Secretary
	Jaki Lowe	Director of People and Inclusion
	Claire Wright	Deputy Chief Executive and Executive Director of Finance
	Deborah Good	Non-Executive Director
	Geoff Lewins	Non-Executive Director
	Margaret Gildea	Non-Executive Director
APOLOGIES	Stuart Mourton	Public Governor, Derby City West
	Farina Tahira	Staff Governor, Medical
	Varria Russell-White	Staff Governor, Nursing
	Roy Webb	Appointed Governor, Derby City Council
	Rachel Bounds	Appointed Governor, Derbyshire Voluntary Association
	Stephen Wordsworth	Appointed Governor, University of Derby
	David Charnock	Appointed Governor, University of Nottingham
	Selina Ullah	Trust Chair
Ifti Majid	Chief Executive	

Ashiedu Joel
Sheila Newport

Non-Executive Director
Non-Executive Director

ITEM	<u>ITEM</u>
DHCFT/GO V/2022/006	<p><u>WELCOME, INTRODUCTIONS, APOLOGIES FOR ABSENCE & DECLARATION OF INTERESTS</u></p> <p>Richard Wright, Deputy Trust Chair welcomed all to the meeting. He reminded everyone that the meeting was being held via a public link. He introduced Deborah Good, newly appointed Non-Executive Director (NED) to the meeting.</p> <p>Richard conveyed his appreciation to governors whose terms of office end in March. He also thanked Valerie Broom and Andrew Beaumont for re-standing in the elections.</p> <p>He also acknowledged how the relationship between the Trust Board and Council of Governors has grown in strength.</p> <p>The apologies were noted.</p> <p>There were no declarations of interest.</p>
DHCFT/GO V/2022/007	<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/GO V/2022/008	<p><u>MINUTES OF THE MEETING HELD ON 2 NOVEMBER 2021</u></p> <p>The minutes of the meeting held on 2 November 2021 were accepted as a correct record.</p>
DHCFT/GO V/2022/009	<p><u>MATTERS ARISING AND ACTIONS MATRIX</u></p> <p>There were no matters arising from the minutes.</p> <p>It was noted that there were no ongoing actions listed on the Actions Matrix.</p> <p>RESOLVED: The Council of Governors noted that all actions on the Actions Matrix had been completed.</p>
DHCFT/GO V/2022/010	<p><u>CHIEF EXECUTIVE'S UPDATE</u></p> <p>In the absence of the Chief executive, Claire Wright, Deputy Chief Executive and Executive Director of Finance, presented an update which included:</p> <ul style="list-style-type: none">• The government published the health and social care integration white paper, Joining Up Care for People, Places and Populations, on 9 February 2022; which sets out a vision for an integrated NHS and adult social care sector which will better serve patients and staff• Integrated Business Boards (ICBs) will be legally and operationally established on 1 July 2022• The first Integrated Care Partnership Board has taken place, focusing on health and care, Place and collaborative working• Conversations are taking place about a wider collaborative and governance as the Integrated Care System (ICS) evolves

	<ul style="list-style-type: none"> • The Trust Strategy (2018-2022) has been reviewed to ensure that the Trust outlines how we are going to achieve our strategic objectives at a time of great change. The Strategy reflects a context of wider partnership working across Derby and Derbyshire, through our integrated care approach with local health and care partners. It is also developed as our partnerships with Trusts and other providers who deliver services similar to our own across the East Midlands are growing, through a regional East Midlands Alliance approach • The Staff Forum continues to provide productive and honest conversations. The recent Staff Forum focused on concern about the rise in the cost of living; in particular mileage remuneration and the cost of fuel. The Trust agreed to review the wellbeing offers and to carry out a review of its Travel Policy • The Trust issued a statement about our support for all those affected by the crisis in Ukraine which impacts widely across people in Derbyshire, including our staff, service users and carers • It has been a difficult week as two colleagues have recently passed away. The Trust has offered support to all colleagues affected. <p>Andrew Beaumont referred to the pay disparity between men and women and asked what is being done to improve women’s pay. Claire explained that the gender pay gap is on the Trust Board’s agenda; and at this morning’s meeting a paper outlines key actions to help to close the gap e.g. flexible working. It was noted that as one of the UK’s largest employers, the NHS is committed to addressing the gender pay gap.</p> <p>Valerie Broom expressed her appreciation that the Trust is focusing on reducing the gender pay gap and was pleased to see that the paper presented this morning to the Trust Board outlined its plan and commitment to address this issue.</p>
<p>DHCFT/GO V/2022/011</p>	<p><u>UPDATE ON NEXT ROUND OF NON-EXECUTIVE DIRECTOR APPOINTMENTS</u></p> <p>Justine Fitzjohn gave the following update on the Non-Executive Director (NED) appointments:</p> <ul style="list-style-type: none"> • The closing date for applications is 1 March. The Trust is pleased with the level of applications received so far • Longlisting is scheduled for 8 March • Shortlisting is scheduled for 24 March • Stakeholder focus groups will be taking place on 8 April • Interviews will be taking place on 11 April <p>It is envisaged that the newly appointed NEDs will be in post prior to Margaret Gildea and Richard Wright taking up their new roles as designate Non-Executive Members for the Integrated Care Board (ICB) Board on 1 July. The Trust will be arranging a handover between the exiting and newly appointed NEDs.</p> <p>RESOLVED: The Council of Governors noted the update on the NED appointments.</p>
<p>DHCFT/GO V/2022/012</p>	<p><u>NON-EXECUTIVE DIRECTORS DEEP DIVE</u></p>

	<p>Margaret Gildea NED, Senior Independent Director and Chair of the People and Culture Committee presented the Deep Dive to governors.</p> <p>Margaret gave an overview of her role and referred to the following:</p> <ul style="list-style-type: none"> • The Executive Team has focused on supporting staff throughout the pandemic with enhanced leadership engagement, a strengthened service for health and wellbeing, and empathy around the challenges of staffing and redeployment • Staff survey results during this period have demonstrated the value of the People First approach • There has been an increased emphasis on partnership working across Derbyshire and the East Midlands as the Trust prepares for the Integrated Care System to become fully operational on 1 July 2022. <p>Margaret conveyed her appreciation to the Executive Team for ensuring that NEDs were able to carry out their responsibilities despite the restrictions caused by the pandemic.</p> <p>RESOLVED: The Council of Governors received the Deep Dive Report from Margaret Gildea.</p>
<p>DHCFT/GO V/2022/013</p>	<p><u>ESCALATION ITEMS TO THE COUNCIL OF GOVERNORS FROM THE GOVERNANCE COMMITTEE</u></p> <p>Four items of escalation were received from the Governance Committee meetings held on 8 December 2021 and 8 February 2022:</p> <p><i>Question one: Governors seek assurance that the issues raised concerning the Trust in Roy’s story shared with the Trust Public Board on 2 November; and with the Governance Committee on 8 December have been addressed; and if not addressed what plans are in place to address the issues.</i></p> <p>Governors were referred to a paper in this morning’s Trust Board pack ‘A Framework of Quality Assurance for Board Stories – Sharing Service Receiver and Carer Experiences to Trust Board’ which outlines learning points from patient and carers experiences that are presented to the Trust Board. Jodie Cook suggested that the paper could be shared with partners as some experiences had been raised at other meetings. Jodie was advised that the paper is in the public domain. Claire Wright suggested that it could be shared at delivery board and will feedback to Ifti Majid and Gareth Harry.</p> <p><i>Question two: Governors seek assurance that patients are given appropriate communication if an appointment is cancelled. Concerns have been raised by members and the public that some cancellations are only communicated to patients at the last minute and can have an emotional impact on the patient. Concern has also been raised that parents of young people are not being included in communications to enable them to support their child.</i></p> <p><i>Question three: Governors seek assurance on what additional support staff have access to during the pandemic and also if they have long COVID? Is additional support being provided by Occupational Health and wellbeing support staff?</i></p> <p><i>Question four: Governors discussed the issues that staff networks are experiencing and sought assurance that the issues are being addressed</i></p>

	<p><i>including: getting appropriate support, training, time to fulfil the Chair and Vice-Chair roles, supervision, communication with the Trust.</i></p> <p>Marie Hickman asked if the Chairs and Vice-Chairs of the staff networks been involved in the discussions and recommendations referred to in the response. Jaki Lowe advised that one of the aims is to co-create so that the Chairs/Vice-Chairs are fully involved in discussions. She also confirmed that all the networks are aware of the recommendations.</p> <p>The responses to the questions are attached as Appendix 1 to these minutes, were read out at the meeting.</p>
<p>DHCFT/GO V/2022/014</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 the NEDs. The focus of the report was on workforce, finance, operational delivery and quality performance.</p> <p>Geoff Lewins as Chair of the Audit and Committee updated the meeting on the following:</p> <ul style="list-style-type: none"> • Regarding the Statistical Process Control Charts (SPC) in the report Geoff explained that data in between the upper and lower control limits on the charts is normal but if the data is outside of these limits there could be a problem with the design process; and if so, the limits need to be narrowed to make them more adaptable to ensure that they are controlled. • Out of area placements have been a concern in the past; not only because of the impact this has on the service user and their families; but also the financial cost. Geoff confirmed that there have been real improvements in reducing the use of out of area placements; and that the few that have been arranged were due to the COVID-19 pandemic necessitating a reduced bed base for infection, prevention and control reasons • Waiting lists are generally an area of concern. In some cases new investment is needed as demand for some services is outstripping commissioned capacity. The Trust is using agency staff to try to alleviate the issues with vacancies across services. It was noted that 24% of posts in talking therapies are currently vacant. In the Children and Adolescent Service (CAMHS) there is a constant pressure due to the increase in demand to access the service. Geoff reiterated that reducing waiting times is a priority for the Trust. • The Trust is forecasting a breakeven at the end of the financial year. However, there are some hazards including the inevitable increase in the use of agency staff due to the COVID-19 pandemic, and staff vacancies. Recruitment fill rates continue to improve. Governors were reminded that recruitment in the NHS is a national issue. The Finance and Performance Committee will continue to monitor recruitment • The proportion of service users whose care plans have been reviewed continue to be lower than expected. There is an increased focus on improving this and work continues to improve this month by month. <p>Richard Wright, as Chair of the Finance and Performance Committee referred to care plans and explained that the new Mental Health Long-term plan</p>

	<p>emphasises the importance of co-producing care plans. He also referred to a recent ward round he participated in for older adults where he witnessed a care plan being reviewed with the service user, and witnessed sensitivity regarding service users, cares and their families.</p>
<p>DHCFT/GO V/2022/015</p>	<p><u>GOVERNANCE COMMITTEE REPORT – 8 FEBRUARY 2022, INCLUDES:</u></p> <p>The Council of Governors received the report from the Governance Committee meeting which took place on 8 February 2022, Julie Lowe, Chair of the Committee referred to the following:</p> <ul style="list-style-type: none"> • Ruth Grice and Marie Hickman have been elected as Chair and Deputy Chair of the Governance Committee respectively • The Committee recommends that the Council approves the following amends to the Nominations and Remuneration Committee Terms of Reference: <ul style="list-style-type: none"> - remove the restriction of not allowing public governors from the same constituency to be members - reduce the quorum to two public governors and either the staff governor or the appointed governor - keep membership the same (Lead Governor, four public governors, one staff governor, one appointed governor and the Trust Chair) <p>It was also noted that the Governance Committee sought the Council's approval to elect:</p> <ul style="list-style-type: none"> • Susan Ryan as designate Lead Governor for six months from 21 March • Julie Boardman as Deputy Lead Governor <p>Justine Fitzjohn conveyed her appreciation to all governors and noted how the Council of Governors has developed over time.</p> <p>RESOLVED: The Council of Governors:</p> <ul style="list-style-type: none"> • Received and noted the contents of the report • Agreed to the proposals to amend the Nominations and Remuneration Committee's terms of reference as outlined above • Agreed to the proposals to elect Susan Ryan as 'designate' Lead Governor for six months starting on 21 March • Elected Julie Boardman as Deputy Lead Governor.
<p>DHCFT/GO V/2022/016</p>	<p><u>ELECTION UPDATE</u></p> <p>Denise Baxendale provided the Council of Governors with an update on the recent public and staff governor elections and gave assurance that the election process is undertaken in line with the model election rules as laid out in the Trust's Constitution. The elections were undertaken by Civica Election Services, an organisation who carries out many Foundation Trust elections.</p> <p>The report included the range of activities that took place to promote the vacancies and identify individuals interested in the governor vacancies.</p> <p>The vacancies have been widely promoted across Derby and Derbyshire. We are aware that the information has been circulated by several organisations including: Joined Up Care Derbyshire, South Derbyshire CVS, Derbyshire Mental Health Forum, Erewash CVS, The Volunteer Centre Chesterfield and</p>

	<p>North East Derbyshire, Derbyshire County Council, Carer’s Network, Bolsover District Council, Amber Valley Borough council, South Derbyshire Council, Mental health together, the Trust’s EQUAL Forum, Chesterfield Borough Council’s BME Forum, Rhubarb Farm.</p> <p>Nominations opened on 19 January and closed at 5pm on 7 February. The situation is as follows:</p> <ul style="list-style-type: none"> - Amber Valley – contested with two nominations - Bolsover and North East Derbyshire – contested with two nominations - Chesterfield – contested with two nominations - Derby City East – uncontested with two nominations - Derby City West – contested with three nominations - Erewash – uncontested with two nominations - South Derbyshire – contested with three nominations - Rest of England – contested with two nominations - Staff governor, medical – contested with two nominations <p>Voting packs were despatched to members on 25 February with voting closing at 5pm on 17 March.</p> <p>Following elections to these eleven governor seats, the Council of Governors will have a full complement of governors. Newly elected governors’ terms of office will begin on 21 March 2022.</p> <p>The newly elected governors will be invited to attend an induction session on 23 March; and be encouraged to take advantage of the ‘buddy up’ system that is provided by more experienced governors to help them in their role.</p> <p>RESOLVED: The Council of Governors</p> <ol style="list-style-type: none"> 1) Received the update on the governor elections 2) Received assurance on the process for the elections taken.
<p>DHCFT/GO V/2022/017</p>	<p><u>REVIEW OF THE GOVERNOR MEMBERSHIP ENGAGEMENT ACTION PLAN</u></p> <p>Denise Baxendale provided an update on the governors Membership Engagement Action Plan (Action Plan). Governors are elected to represent their local communities and the Action Plan has been developed to increase engagement with members and to promote the governor role. It is aligned to the key objectives for members’ engagement in the Membership Strategy 2021-2024 as follows:</p> <ul style="list-style-type: none"> • Increase membership engagement with the Trust and its governors • Provide mechanisms for members to provide feedback to the Trust • Increase awareness of governors and the role they play • Further develop and enhance member focused communications through the membership magazine and e-bulletin • Include the role and promotion of staff governors in the Trust’s wider focus on staff engagement. <p>The Action Plan was last reviewed by the Governance Committee on 8 February 2022 and the updated version was presented to the Council.</p>

	<p>Despite the pause on face-to-face events during the COVID-19 pandemic, governors have been able to engage with members and the public via virtual events.</p> <p>RESOLVED: The Council of Governors</p> <ol style="list-style-type: none"> 1) Received the revised Governors Membership Engagement Action Plan 2) Encouraged governors to carry out the actions listed.
<p>DHCFT/GO V/2022/018</p>	<p><u>ANY OTHER BUSINESS</u></p> <p>Governors</p> <p>Richard Wright conveyed his appreciation to governors who are committed to representing the people in Derbyshire. He empathised the importance of sharing feedback with the Trust in order for the Trust to hear what people are saying about the services that it provides.</p> <p>Denise Baxendale expressed her gratitude to governors whose terms of office end on 20 March and commented how much she had enjoyed working with them all.</p> <p>Lynda Langley thanked everyone for attending the meeting.</p>
<p>DHCFT/GO V/2022/019</p>	<p><u>REVIEW OF 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"> • The meeting was effectively chaired • The meeting covered all agenda items with enough time for discussion.
<p>DHCFT/GO V/2022/020</p>	<p><u>CLOSE OF MEETING</u></p> <p>The meeting closed at 16:15 hours.</p> <p>An extraordinary Council of Governors meeting will be held on 13 April from 12:00-13:00 hours to approve the appointments of two Non-Executive Directors who will replace Margaret Gildea and Richard Wright.</p> <p>The next Council of Governors meeting will be held on Tuesday 10 May from 14.00 hours.</p> <p>Both meetings will be held virtually using Microsoft Teams.</p>

Appendix 1

Questions to escalate to the Council of Governors – 1 March 2022

Escalated items from the Governance Committee held on 8 December 2021 and 8 February 2022

Question one:

Governors seek assurance that the issues raised concerning the Trust in Roy's story shared with the Trust Public Board on 2 November; and with the Governance Committee on 8 December have been addressed; and if not addressed what plans are in place to address the issues.

Response

The Trust Board and Executive Team are very grateful for Roy sharing his experience at Trust Board and Joined Up Care Derbyshire to consider how we learn from individuals' experiences. The lived experience of mental health problems, co-existing alcohol issues and the impact of financial pressures are well established risk factors. This year we welcome continued focus to reduce waiting times and improve access, investment in alcohol services to reach individuals and their families at the earliest opportunity. We are working with Roy on his wishes and how he would like to use his story in an educational video for community mental health practitioners through our new practice Educator role. This is also learning in addition to our patient experience response that we worked with Roy on prior to sharing his story at the Trust Board.

Governors were referred to the [Public Trust Board paper](#) which includes actions from Roy's story.

Question two:

Governors seek assurance that patients are given appropriate communication if an appointment is cancelled. Concerns have been raised by members and the public that some cancellations are only communicated to patients at the last minute and can have an emotional impact on the patient. Concern has also been raised that parents of young people are not being included in communications to enable them to support their child.

Response

Governors seek assurance that patients are given appropriate communication if an appointment is cancelled.

This financial year around 8% of psychiatric outpatient appointments have been cancelled by the Trust per month, around 12% have been cancelled by patients and around 12% of patients did not attend their appointment (DNA). The main reasons for cancellations are when patients need to be seen more urgently, or because of consultant illness.

When an appointment is cancelled by the Trust and the patient had previously been notified about the appointment, the patient will be contacted by telephone if short notice, or

by letter if the appointment is a few weeks into the future, to advise them that unfortunately their appointment has been cancelled and that another appointment will be arranged.

Concerns have been raised by members and the public that some cancellations are only communicated to patients at the last minute and can have an emotional impact on the patient.

Unfortunately, last minute cancellations are unavoidable on occasions when consultants or other professionals are taken ill and no cover is available. This year there have been around 43,000 outpatient appointments so far, of which around 640 have had to be cancelled owing to consultant sickness. When this happens the medical secretary or clinic administrator will ring the patients concerned to let them know that unfortunately their appointment has had to be cancelled and that another appointment will be arranged. Data relating to cancellations is monitored through the clinical divisions and reported through to Trust Board, including plans to keep cancellations to a minimum.

Concern has also been raised that parents of young people are not being included in communications to enable them to support their child.

Parents are informed by letter if the cancellation isn't short-notice and by telephone if the cancellation is within a few days.

Occasionally a child or young person may not want their parents involved or communicated with. In circumstances when this arises, the child or young person's capacity is assessed to determine appropriateness.

Question three:

Governors seek assurance on what additional support staff have access to during the pandemic and also if they have long COVID? Is additional support being provided by Occupational Health and wellbeing support staff?

Response

A range of additional wellbeing support was put in place for staff during the pandemic, this included bookable coaching calls with a member of the Staff Wellbeing Team, access to Peer Support Groups, Wobble Rooms & Spaces, Traumatic Incident Support, access to a 24/7 Counselling Helpline and numerous Bespoke Training Sessions offered to staff.

Most recently we have been able to offer staff the chance to attend a 'Winter Wellbeing Check In' – an opportunity to check in on their wellbeing with a member of the Wellbeing Team and receive support and signposting as required.

We continue to offer all of the above wellbeing support alongside other support available such as access to counselling (via Resolve), access to the Thrive Wellbeing App and access to a National Fitness Platform for NHS Staff.

There is a current need and focus for staff around their financial wellbeing and we have had sessions provided by Marches Energy Charity to offer money saving advice and we continue with our Financial Wellbeing Peer Support Group. We will be launching a

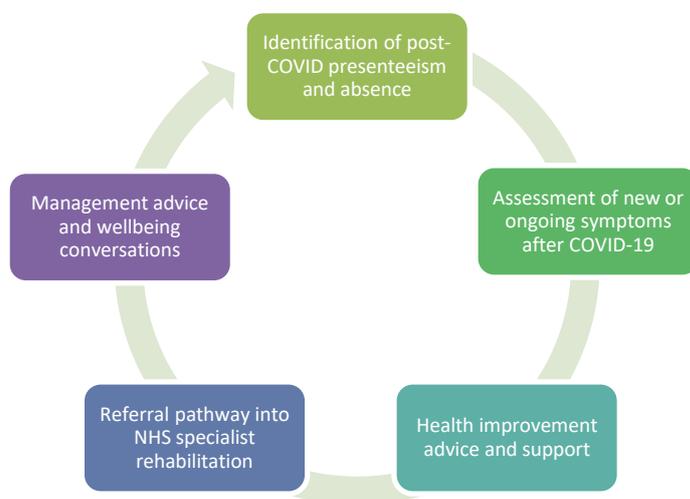
Financial Wellbeing Package in March which will include our offer from Salary Finance (previously Neyber.)

We also continue to receive requests for Bespoke Team Support. This can be for teams who have experienced a difficult incident, for teams who are feeling exhausted and for those teams where moral is low. We have been responding to requests for team support either by coaching team leads or providing team sessions which are delivered by the Wellbeing Team or if appropriate by the team at Resolve Counselling Service.

Our Staff Wellbeing Champions meet every month to report back how things are feeling in their areas of work, share ideas and request help. The Champions will play a vital part of our Covid recovery and we are in the process of recruiting and inducting more to the network.

For individual support on Long Covid, Occupational Health have a range of services according to individual symptoms and experience, on receiving a referral an appropriate package is put in place.

As a system we have successfully bid for funding to support a Long Covid programme which has enabled research which will inform the further service development. This includes specific work on virus presentation and pathway for BME staff and the support that needs to be in place.



The roll out of the health and wellbeing conversation is critical to capture dynamically and as symptoms and situations change, the plans which will be put in place.

Question four:

Governors discussed the issues that staff networks are experiencing and sought assurance that the issues are being addressed including: getting appropriate support, training, time to fulfil the Chair and Vice-Chair roles, supervision, communication with the Trust.

Response provided by Jaki Lowe and will be delivered by Margaret Gildea. Note the response was Jaki was very detailed. Therefore Margaret will provide the following response, and add an appropriate amount of detail from Jaki's response (in blue text)

Response

We have had resource issues which are now resolved and we have some practical plans and funding to support the networks and Co-Chairs.